

Appendix 6.4. Caregiver Letter Template – CST Referral

To the caregiver of **[INSERT STUDENT NAME]**,

We hope this letter finds you well. We are writing to inform you that **[INSERT SCHOOL/DISTRICT]** is initiating a referral to the **child study team (CST) evaluation** for your child, **[INSERT STUDENT NAME]**.

As you may know, **[INSERT SCHOOL/DISTRICT]** utilizes the New Jersey Tiered Systems of Support (NJTSS), a framework used to maximize the academic, behavioral, and social-emotional success of all students. Over the past several months, **[INSERT STUDENT NAME]** has received support and interventions through NJTSS. Despite the implementation of targeted strategies and interventions at Tier 2 and/or intensive interventions in Tier 3, we believe **[INSERT STUDENT NAME]** has not made significant progress and may need additional services and supports to address their needs. Based on data collected, teacher observations, and team discussions, we believe your child may benefit from a child study team evaluation to better understand their learning profile and determine whether or not they would be eligible to receive special educational and related services.

What Happens Next?

- The child study team will schedule an initial planning meeting, which you will be invited to attend. At this meeting, we will discuss the reasons for the referral and determine whether an evaluation is warranted.
- If an evaluation is agreed upon, we will request your written consent before beginning the assessment process.
- The evaluations may include academic, psychological, speech/language, and other assessments, depending on your child's needs.
- Once the evaluations are completed, we will hold an eligibility meeting to review the results and determine if your child qualifies for special education and related services.

Please know that this process is intended to better understand your child's strengths and needs so that we can provide the most appropriate support. Your input as a caregiver is an important part of this process, and we welcome your collaboration.

If you have any questions or concerns, or if you would like to discuss this referral in more detail before the planning meeting, please feel free to contact **[INSERT SCHOOL COUNSELOR]** at **[EMAIL/PHONE NUMBER]**.

A member of our child study team will be reaching out shortly to schedule the initial meeting. Thank you for your continued partnership in supporting **[INSERT STUDENT NAME]**'s education.

For more information on the New Jersey Tiered Systems of Support, you may reach out to **[INSERT DESIGNATED SCHOOL PERSONNEL]** and visit <https://www.nj.gov/education/safety/njtss> and/or **[INSERT SCHOOL WEBSITE NJTSS PAGE]**.

The school-home partnership is important for your child's success. Thank you for your support and collaboration.