

**Mississippi Department of Human Services/Division of Youth Services  
Notice of Continued Special Education Services**

This form is used to notify parents that special education services will be continued for students with a current IEP. The form is sent to the parent within 72 hours of admission (3 business days) to a MDHS/DYS facility. A copy is maintained in the student's special education file.

**MDHS/DYS Facility:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Date of Admission:** \_\_\_\_\_

**To parent/guardian(s) of:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

It has been confirmed that your son/daughter received special education services in the  
(Name of School District/Agency): \_\_\_\_\_

Attached is a copy of the information provided to this facility regarding these special education services. (Telephone Verification Form or Page One of Current IEP)

The IEP developed by the previous school district/agency will be reviewed and revised.

An IEP team meeting is scheduled for \_\_\_\_\_ to review your child's IEP. The Notice of IEP meeting is attached. The current IEP will be implemented pending this IEP meeting.

The following services will not be continued pending an IEP meeting (list with justification for non-continuation of services).

If you have any questions or need additional information please contact \_\_\_\_\_, Case Manager.

Telephone: \_\_\_\_\_

Thank you for your cooperation. We are looking forward to working with you to provide your son/daughter an appropriate educational opportunity.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

**Attachments:**

- A. Procedural Safeguards
- B. Telephone Verification Form or Page One of the Student's Current IEP
- C. Notice of IEP Meeting
- D. Parental Response to IEP Meeting
- E. Change in Placement