Form EI-08

Today's date	Child's name	Child's DOB	ETID number

Consent to Refer Child to Local Educational Agency and the Ohio Department of Education and Workforce (DEW)

Ohio Early Intervention (EI) has recently received a referral for your child. Because EI is a program for children with developmental delays and disabilities from birth until age three, your child is too close to the age of three for EI to determine your child's eligibility. However, if you suspect your child may have a developmental delay or disability, your child may be eligible for preschool special education services under Part B of the Individuals with Disabilities Education Act.

You may contact your school district yourself to make a referral.

If you would like EI to contact your school district to make a referral, we are required to obtain your consent. With your consent, we will use this form to provide your contact information and your child's name and date of birth to your school district, which is responsible for your child's education, and to ODEW.

I have been fully informed of and understand that my contact information and my child's name will be shared with my local school district and with ODEW. I have received a copy of the Ohio Early Intervention Parent Rights brochure (ohioearlyintervention.org/printed-materials) with this form. I understand that I have dispute resolution options if I have an EI complaint. I consent to EI giving my child's name and date of birth and my contact information to my school district and ODEW.

Parent name(s)	Parent signature(s)	Date
Parent street address	Parent email address	Parent phone number
Parent city, state, ZIP code		

*After parent signature is obtained, this signed form must be emailed to EI@childrenandyouth.ohio.gov to ensure the referral is complete.

Department of Children & Youth

Help Me Grow Early Intervention