

Date: [Date]

To: [Early Intervention Agency Name]

Address: [Agency Address]

City, State, Zip: [City, State, Zip]

Subject: Referral for Early Intervention Evaluation

Dear Early Intervention Coordinator,

I am writing to formally recommend and refer the following child for a developmental evaluation to determine eligibility for Early Intervention services:

Child's Name: [Child First and Last Name]

Date of Birth: [Child's Date of Birth]

Parent/Guardian Name: [Parent Name]

Contact Phone: [Phone Number]

As the child's [Your Relationship, e.g., Pediatrician / Teacher / Daycare Provider], I have observed delays in the following developmental areas:

- [Area 1: e.g., Communication/Speech]
- [Area 2: e.g., Gross/Fine Motor Skills]
- [Area 3: e.g., Social-Emotional Development]
- [Area 4: e.g., Cognitive Skills]

Specific observations include: [Briefly describe specific concerns or missed milestones].

Based on these observations, I believe the child would benefit from a comprehensive multidisciplinary evaluation to identify any specific needs and provide necessary support services.

Thank you for your time and for assisting this family in accessing the appropriate resources.

Sincerely,

[Your Signature]

[Your Printed Name]

[Your Title/Organization]

[Your Phone Number/Email]