

[Date]

[Parent/Guardian Name]

[Street Address]

[City, State, Zip Code]

Re: Cognitive Developmental Assessment Recall for [Child's Full Name]

Dear [Parent/Guardian Name],

We are writing to schedule a follow-up cognitive developmental assessment for [Child's Name]. As part of our ongoing commitment to monitoring your child's growth and learning milestones, it is time for a routine re-evaluation.

The purpose of this recall assessment is to:

- Measure progress since the previous assessment.
- Identify current strengths in problem-solving and memory.
- Ensure that our teaching strategies align with your child's developmental needs.

The assessment is designed to be engaging and play-based, lasting approximately [Duration, e.g., 45 minutes].

Please contact our office at [Phone Number] or [Email Address] by [Deadline Date] to schedule an appointment. We have openings available on the following dates:

- [Option 1]
- [Option 2]
- [Option 3]

If you have any questions regarding the assessment process, please feel free to reach out.

Sincerely,

[Your Name]

[Your Title/Role]

[School/Organization Name]