CHEBOYGAN• OTSEGO •PRESQUE ISLE EDUCATIONAL SERVICE DISTRICT

6065 Learning Lane (231) 238-9394



Indian River, MI 49749 (231) 238-8551 (fax)

Hearing Screening Permission

Dear Parents,

Your child has been referred to have his/her hearing screened by COP ESD staff. This screening is not a comprehensive audiometric evaluation, nor is it part of a multi-disciplinary evaluation team.

Please sign and return the permission form on the bottom portion of this page. You will be notified of the results when the screening is completed. If you have any questions please call the COP ESD staff member at the number below.

Thank you,

I give permission for my child _______ to have a hearing screening by COP ESD staff member ______. This person can be reached at if you have any questions.

Parent Signature

Date