



**Rifton Equipment**  
PO Box 260  
Rifton, NY 12471

**800-571-8198**  
www.rifton.com

# Five Point Checklist

## for Writing an Effective Letter of Educational Necessity

**Include these essential components in your letter of justification for an adaptive device for a student in the school-based practice environment.**

- 1. Student information**
  - a. State today's date.
  - b. Provide the student's name, age, and grade.
  - c. Describe educational program, placement and services and briefly introduce the relevant concerns.
  
- 2. Explain the impact of student disability as this relates to a daily function essential for the school experience.**
  - a. This segment may include the student's diagnosis and clinical presentation if the approving decision-maker is of the same or similar health care discipline. For an administrator without a health care background, use lay terms only.
  - b. Briefly state student's condition and relevant assessment findings as regards student needs, strengths, capacity and performance.
  - c. Explain student activity limitations and participation restrictions in the learning environment.
  
- 3. Explain the educational relevance/necessity of the requested adaptive device.**
  - a. Detail how the requested adaptive device will meet the student's needs to promote participation in the learning environment as documented on the IEP. Describe how the requested adaptive device will bridge the gap between student capacity and student performance of a school function.
  - b. Explain how the device will enable the student to benefit from his/her school experience. Illustrate this educational necessity with a descriptive example. Absence of the support would interfere with the student's access to his or her educational program. Without the device, the student would be unable to participate in educational opportunities afforded to his/her peers.
  - c. Is the requested adaptive device necessary for the student to achieve his/her IEP goals as part of a reasonably calculated IEP? Reinforce how the requested adaptive device will support progress toward an IEP goal. Include current IEP goal(s) and/or specify the supplementary aids and services that support student access and participation. Where indicated, attach further documentation.
  
- 4. Justify the adaptive device and components required to meet student needs.**
  - a. Include rationale for specifically required adaptive device and components based on student assessment. Include details of product brand and accessories.
  - b. Describe previously used adaptive device strategies that did not work. Include data and give explanation. Include date(s) of trial period of requested adaptive device and include supportive data regarding successful outcome.
  - c. This concise statement can include offer of contacting the therapist if needed for clarification or more information.
  
- 5. Summarize main points in concluding sentence(s).**
  - a. Consider attaching or enclosing pictures of the product or a photo/video of student during trial of product.
  - b. Where applicable, cite research to support use of adaptive product.
  - c. Provide name/credentials of requesting therapist (team).