

**ALLIANCE
AGAINST**

**SECLUSION
&
RESTRAINT**

Month Day, Year

Parent/Guardian's Name

Address

Email address

Telephone number

Dear Representatives of _____ School,

I write to respectfully request that school staff, contractors, and all employees working with school staff, including school resource officers and police officers, avoid using corporal punishment, seclusion, and restraint with my child, _____, (Date of Birth MM/DD/YYYY).

The reason for my request is that corporal punishment, seclusion, and restraint would likely be traumatic for my child, as it has been found to be traumatic for many children. Studies show that these practices lead to serious physical and emotional harm to children, including physical injuries; mental health conditions including post-traumatic stress disorder (PTSD), depression, anxiety, and suicidality; school dropout; academic failure; disability; and occasionally death. These interventions are contraindicated for children with past trauma and those with medical conditions that impact the heart or breathing. Seclusion or isolation is contraindicated for students who require constant monitoring, students with suicidal ideation, and students who may engage in self-injurious behavior. School corporal punishment, seclusion, and restraint have been identified as a form of community violence, and they are adverse childhood experiences (ACEs) that can lead to long-term health problems.

Moreover, studies indicate that corporal punishment, seclusion, and restraint usually worsen a child's behavior, not improve it. Non-violent, safe alternatives can always be used instead. Thus, I do not consent to the use of corporal punishment, seclusion, or restraint upon my child.

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My second request is for a Functional Behavioral Assessment (FBA) to determine the root causes of my child's challenging behaviors and to develop a Behavioral Intervention Plan (BIP), which would be a non-traumatic, non-violent plan for addressing my child's challenging behaviors. I would also like to brainstorm with my child's IEP or 504 team additional ways to support their behavior so that they can learn the social and emotional skills that they need to succeed. Please let me know when I can meet with the team to discuss my concerns and requests.

You can reach me at (xxx) xxx-xxxx or myemail@mail.com to discuss this important matter.

Sincerely,

Signature

Parent/Caregiver's Name