	Date:
Dear Mr & Mrs.	
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	g Therapy program of Plymouth Community Schools Special
Education, hearing tests have been admini	stered to grades kindergarten, one, four, seven and ten, as
directed by the State Board of Education o	f Indiana.
Hearing tests have been given to yo	our child and as the result of these, I would like to suggest
further medical evaluation of the hearing $\boldsymbol{\rho}$	problem by a physician.
Please take the enclosed audiogram	m and hearing form to the physician to fill out. When the fro
is completed, please return it to the princip	
Many hearing losses are mild and o	can be corrected if they are found early and prompt
treatment is provided	
Thank you for your cooperation in	this matter.
	Respectfully,
	,
	Speech & Hearing Therapist