Idalia School District RJ-3

Idalia School District

20_____ School Year

Please complete this form and give the form to the building principal. This form is valid for the 20______ school year only.

I request that my child, ______, be exempt from taking the following Colorado State Assessments for the 20_____ school year (please mark the applicable box/boxes):

[] All required state assessments in the content areas of English language arts, mathematics, science, social studies and college entrance.

[] State assessments in the following content areas:

_____ English language arts

____ Math

_____ Science

_____ Social Studies

_____ SAT or other standardized college entrance examination required by the state.

Reason(s) I am requesting an exemption for my child: _____

Please initial the following box.

[] I acknowledge that the school district administration has encouraged me to have my child participate in the state assessment system as a means to provide me with information concerning my child's academic progress and growth in the areas tested by the state assessment system and my child's progress toward college and career readiness.

Print Name

Date

Signature

Adopted: 2016

Revised: November 22, 2022