SAN JUAN SCHOOL DISTRICT
2015-16 Parental Exclusion from State Assessments

As a parent/guardian, I **do not** want my child to participate in the following assessments during the 2015-16 school year:

Student Name_____ ***Student ID***_____

The data obtained in these assessments are utilized by teachers and administrators to review student progress toward learning targets, plan instruction, provide teacher feedback, inform potential course placement, provide important achievement data to students and parents and allow for public reporting about school quality.

☐ SAGE (Student Assessment of Growth and Excellence) **English Language Arts/Literacy/Writing**

☐ SAGE (Student Assessment of Growth and Excellence) **Math**

☐ SAGE (Student Assessment of Growth and Excellence) **Science**

☐ SAGE Interim

☐ SAGE Formative

☐ Civics Exam
Passage of the Civics exam is required for graduation

☐ General Financial Literacy Assessment

☐ ACCESS (English Language Learners)

☐ ACT (11th grade students)

☐ ACT Plan (10th grade students)

☐ ACT Explore (8th or 9th grade students)

☐ DIBELS (Dynamic Indicators of Basic Early Literacy) Grades 1-3

☐ DLM (Dynamic Learning Maps) **ELA & Math** for students with significant cognitive disabilities

☐ UAA (Utah Alternative Assessment) **Science** for students with significant cognitive disabilities

☐ AAPPL (Assessment of Performance toward Proficiency in Languages) for students in Dual Immersion Language programs

I acknowledge that this signed form must be returned to the principal of my child's school on an annual basis and at least one day prior to the beginning of the assessment. This information will be kept at the child's school.

_____ Parent/Guardian Signature
_____ Parent/Guardian Name (please print)
_____ Contact Information (phone/email)

_____ My Child's Grade
_____ My Child's School

200 North Main Blanding, UT 84511 Voice: (435) 678-1200 Fax: (435) 678-1272