

## Standardized Assessment Parental Exclusion Form

Weber School District values the partnership we have with parents in educating their students. Based on Utah Code 52A-15-1503, parents (or legal guardians) have the right to exclude their student from participation in certain standardized assessments. In order to exclude a student from an assessment, the parent/guardian should complete the form and email, mail or hand-deliver it to the school administrator. Completion of this form ensures that administrators, teachers and testing staff will be appropriately informed of parents' wishes and can act accordingly.

A parent who excludes a student from an assessment must understand that no score will be received for the specific assessment. Such an exclusion will not negatively affect a student's grade, nor will it limit the opportunities he/she has for participation in a full range of academic programs and services. However, parents should be aware that standardized test scores are often used to determine the specific instructional needs of students and may be used to make placement decisions regarding advanced courses/programs. If a parent excludes a student from testing, it is essential that they work collaboratively with teachers and administrators to ensure student success.

The data obtained from these assessments is 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. All requests for Parental Exclusions must be received by the school no later than the day prior to test administration.

By signing below, I certify that:

- I am the parent (or legal guardian) with majority custodial rights of the following student:

Student Name	School	Grade	Student ID #

- As the parent/guardian, I do not want my child to participate in the following assessments during the 2016-17 school year:

Test Name	
<input type="checkbox"/> SAGE Summative – English Language Arts/Literacy/Writing	<input type="checkbox"/> NAEP
<input type="checkbox"/> SAGE Summative – Mathematics	<input type="checkbox"/> UAA/DLM (for students with significant cognitive disabilities)
<input type="checkbox"/> SAGE Summative – Science	<input type="checkbox"/> General Financial Literacy Assessment
<input type="checkbox"/> SAGE Interim – All Subjects	<input type="checkbox"/> DIBELS (Grades 1 – 3 only)
<input type="checkbox"/> SAGE Formative – All Subjects	<input type="checkbox"/> AAPPL (Dual Immersion)
<input type="checkbox"/> ACT/PLAN/EXPLORE (11 <sup>th</sup> /10 <sup>th</sup> /8 <sup>th</sup> )	<input type="checkbox"/> Civics Exam ( <b>*Passage of the Civics exam is required for graduation.*</b> )
<input type="checkbox"/> WIDA ACCESS ( English Language Learners)	<input type="checkbox"/> UTIPS (Formative Assessment Tool) – All Subjects

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 Name (Please Print)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Contact Info (phone/email)

**Additional information regarding the Civics Test:**

**R277-404-6 Student and Parent Participation in Student Assessments in Public Schools; Parental Exclusion from Testing and Safe Harbor Provisions.**

(c) If a parent exempts the parent's child from the basic civics test required in Sections 53A-13-109.5 and R277-700-8, the parent's child is not exempt from the graduation requirement in Subsection 53A-13-109.5(2), and may not graduate without successfully completing the requirements of Sections 53A-13-109.5 and R277-700-8.

If I have chosen to exclude my student from the Civics Test, I understand that he/she will not have met the state requirements necessary for graduation and **WILL NOT** be issued a diploma from a Weber District School.

\_\_\_\_\_  
Parent Signature

*By signing above, I indicate full understanding that my student will not be eligible to graduate if he/she does not successfully complete the required Civics Test.*

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This section is to be completed by the building administrator or counselor following consultation with the parent/guardian regarding this **Standardized Assessment Parental Exclusion Form**.

I, \_\_\_\_\_, certify that I have contacted the parent/guardian of the aforementioned student and have discussed the following (as they may apply):

- If the parent/guardian has indicated this student will not participate in the Civics Test, I have appropriately and adequately informed them that the student will not graduate nor will the student receive a diploma.
- I have verified that this form was submitted by the parent/guardian of the specified student.
- I have responded to any questions or concerns presented by the parent/guardian regarding the Parental Exclusion provision or have referred him/her to the district's Assessment Director.

\_\_\_\_\_  
Signature of Administrator or Counselor

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date of Contact