

PARENTAL EXCEPTION WAIVER (Children age 10 or older)

Name: _____ Grade: _____

School: _____ Date of Birth: _____

Language Designation: _____

My child is 10 years of age or older and I believe that an alternate course of study is better suited to my child's rapid acquisition of English. For that reason, I request a waiver of the school's Structured/Sheltered English language program. I understand that the objective for my child is to be taught English as rapidly and effectively as possible.

I have personally visited the school to apply for this waiver.

I have been provided a full written description of: the intent and content of the structured English immersion program; any alternative courses of study offered by the district and made available to my child; all educational opportunities offered by the district and made available to my child; and the educational materials to be used in the different educational program choices.

I understand that I must request that this waiver be reconsidered annually, each school year.

Parent/Guardian Signature: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: () _____

For School Use Only:

Waiver Granted/Denied: _____ Date: _____

Signature: _____