

Wright Elementary School District

4385 Price Avenue
Santa Rosa, CA 95407-6550
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www.wrightesd.org

Promotion/Retention Mid-Year Parent Conference

To the Parent or Guardian of: _____

According to the California Education Code (48070-48070.5) and Wright Elementary School District Policy (5123), parents must be notified when their child is found to be at risk of failing to meet grade level standards.

We informed you that your child was found to be at risk of not meeting the expected standards for his/her grade level in: _____ based on the following information:

ELA	Math
<input type="checkbox"/> STAR 360	<input type="checkbox"/> STAR 360
<input type="checkbox"/> DIBELS (Acadience)	<input type="checkbox"/> MyMath/California Math Assessments
<input type="checkbox"/> Benchmark Advance Assessments	<input type="checkbox"/> Grades
<input type="checkbox"/> Grades	

At this date, _____, we find that your child remains at risk of not meeting the expected standards for his/her grade level.

Modifications and interventions to your child's education program to assist him/her in meeting grade level standards have been:

- | | |
|---|--|
| <input type="checkbox"/> Title I Reading | <input type="checkbox"/> IXL |
| <input type="checkbox"/> ELD Intervention | <input type="checkbox"/> Lexia |
| <input type="checkbox"/> Small Group Intervention | <input type="checkbox"/> Other school-based intervention |
| <input type="checkbox"/> Office Hours | |

Further recommendations: *Please be aware that compliance with these recommendations does not guarantee that standards will be reached or that retention will not be recommended.*

_____ Regular, on time attendance in school

_____ Regular parental supervision of homework

_____ Regular reading with child by an adult

_____ Other: _____

Parent initial below to indicate understanding of this document.

_____ I understand the purpose and intent of these recommendations, and I agree with the terms cited. I will do my part to implement the recommendations.

_____ I understand the purpose and intent of these recommendations. However, I do not support the recommendations.

Parent Signature: _____ Date: _____

Teacher Signature: _____ Date: _____

Principal Signature: _____ Date: _____

cc: Student Cum File