



PARENT REFUSAL OF ELL SERVICES

Student Name: _____ School: _____

Address: _____ Home Phone: _____

I understand that after careful evaluation, it is recommended that my child receive extra service in the English Language Learner Program. School personnel have discussed this assignment with me and I understand the following:

1. This service is a part of Prairie-Hills schools' educational program assisting children who have been identified as "limited English proficient" by the WIDA-ACCESS Placement Test (W-APT).
2. Participation in the ELL Program helps my child develop English Language and other academic skills by improving reading, writing, and oral language skills.
3. ELL teacher(s) work with my child in small groups.
4. I have the right to refuse the service of this program if I choose to do so.

I have read and understood the above information. I have decided to refuse the service of the ELL Program at this time. I have the right to request ELL service for my child if needed in the future.

Parent Signature

Date

Principal Signature

Date
