



OPT OUT OF ENROLLMENT IN THE SHELTERED ENGLISH IMMERSION PROGRAM (SEIP)

Name of Student: _____ DOB: _____

Address: _____ Phone: _____

School Assigned: _____ Grade: _____ Home Language: _____

Name of Test: _____ Score Level: _____ Classification: _____

Tester/School Official: _____ Testing Date: _____

I understand that my child has been tested and a recommendation for placement in the Sheltered English Immersion Program has been made based on test results. I do not want my child to be placed in this program.

The educational benefits of the Sheltered English Immersion Program have been explained to me, and I fully understand the merits of the program. In addition, I am fully aware of my legal rights as a parent/guardian with regards to the education for students identified as English Language Learners (ELL).

I understand that my child will receive sheltered content and ESL support as part of his/her educational program and his/her progress in English Language Development will be monitored.

Reason for Opting-Out of Enrollment:

Parent/Guardian Signature: _____ Date: _____