

**Early Entrance\*\***

If a request for early admission to kindergarten or first grade is received by the district, the following guidelines will be used:

1. The Request for Early Entrance form must be filled out by a parent. The completion of this form and receipt of a formal evaluation will activate the early entry committee. Members of that committee are: kindergarten or first-grade teachers, the speech and language therapist, building principal(s) and the director of special services;
2. The parents will be made aware that it is their responsibility to secure testing by a qualified agency approved by the director of special services.

Three areas that must be tested include:

- a. Cognitive (intelligence);
- b. Affective (social/emotional); and
- c. Physical.

Test scores should be in the top quartile for entering the requested grade level.

3. All information must be received by the director of special services on or before August 15th;
4. The early entry committee will review the test information and the parent interview forms. If a student is to be considered for early entrance, the student will also be required to participate in a one-day screening/observation conducted by the district during August;
5. The screening committee will make recommendation to the superintendent, and parents will be notified in August;
6. A written appeal can be made by the parents to the superintendent who may affirm, reverse or modify the early entry committee's decision. A subsequent hearing may be held with the Board if the respective decision does not meet with the approval of the parent(s).

**REQUEST FOR EARLY ENTRANCE**

Date \_\_\_\_\_

Child Name \_\_\_\_\_

I request that my child be reviewed for early admission to:

(Check one)  Kindergarten  First grade

I will have \_\_\_\_\_ (Child name) evaluated at my expense in the following areas:

1. Cognitive (intelligence);
2. Affective (social/emotional);
3. Physical.

I understand the test scores must equal or surpass the established norms for the requested attendance grade level in all areas of assessment by August 15. I will receive written information from the district concerning my request within three weeks of providing them with the test scores.

Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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

\_\_\_\_\_  
Date