

Date: _____

Student Name: _____

School: _____

Grade: _____

Teacher: _____

Dear _____,

This letter is to inform the district of my decision to refuse to allow my child, _____, to participate in the Partnership for Assessment of Readiness for College and Careers (PARCC) assessment for the 2015-2016 school year.

This refusal was not influenced by the teachers, administration, or school board. I simply see this test as an expensive and stressful experiment in which New Jersey should not participate.

Please keep me informed about any non-punitive, educationally-appropriate accommodations you are making for non-testing children. Please do not, however, contact me in an effort to change my decision, and please do not discuss this refusal with my child.

I attest that I am the parent or legal guardian of this child and consent to my student refusing to take the PARCC assessment during the 2015-2016 school year.

Sincerely,

Signature of parent or legal guardian

Printed name of parent or legal guardian