



# Student Progress Assessment & Placement Agreement for K—Pre-first Grade

Student's Name: \_\_\_\_\_ Teacher \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Age when entered: \_\_\_\_\_ Grade \_\_\_\_\_ Years \_\_\_\_\_ Months \_\_\_\_\_ School \_\_\_\_\_

Siblings: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

\_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Vision problem? Yes  No  Exam Recommended   
Describe \_\_\_\_\_

Hearing problem? Yes  No  Exam Recommended   
Describe \_\_\_\_\_

Speech/Language problem? Yes  No  Evaluation Recommended   
Describe \_\_\_\_\_

Diagnosed learning disability? Yes  No  Evaluation Recommended   
Describe \_\_\_\_\_

Teacher evaluation of present social and emotional development \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### EVALUATION OF PRESENT ACADEMIC ACHIEVEMENT:

	Level	Comments
Reading level	_____	_____
Math level	_____	_____
Language level	_____	_____
Written work	_____	_____

FORMAL ASSESSMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Placement Agreement

As a follow-up to our previous conversation(s), I (agree) (do not agree\*) with the recommendation that

\_\_\_\_\_ be placed in grade \_\_\_\_\_ for the \_\_\_\_\_ - \_\_\_\_\_ school year.

Parent/Legal Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Teacher: \_\_\_\_\_

Date: \_\_\_\_\_

Principal: \_\_\_\_\_

Date: \_\_\_\_\_

Optional Parent/Guardian Statement: \_\_\_\_\_

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Copies to:	<input type="checkbox"/>	Parent	<input type="checkbox"/>	Teacher
	<input type="checkbox"/>	Principal	<input type="checkbox"/>	Conference Superintendent

\*In the event the decision of the principal is to place the student without parent/guardian agreement, the parent/guardian may appeal the decision through the Office of Education. A review committee will study the information and make a recommendation to school administration. Final decision rests with the school administration.