

New Hampshire <u>RSA 193-C:6</u> allows parents to exempt their student from public school from participating in the required assessment state-round (Englishlanguage arts math, and/or science) by submitting this complete form to the school their student attends. The school district will provide an appropriate alternative educational activity for the period of time during which the evaluation is administered. The alternative activity will be agreed upon by the school district and the student's parent or legal guardian.

To exempt a student from participating in the standardized assessments required by the state, the parent/legal guardian must complete and submit this form to the student's school. A parent's advance notice of a student's exemption will assist school administration in planning the administration of the test.

This waiver form is maintained at school and does not need to be sent to the New Hampshire Department of Education but must be available during evaluation follow-up.

Please note: A new waiver form is required each year that a parent/legal guardian wishes to exempt their student from state evaluations.

To exempt a student from taking the statewide assessment(s), this section must be completed by the parent or legal guardian:

Student Name:	Can:
Student's Last Name:	
School Name:	
Student SASID	

Enter the state tests from which you are exempting your student during the school year 20_____-20____

Mathematics (grades 3-8)/ Dynamic Learning Maps (SAS/DLM)
English Language Arts (grades 3-8)/ Dynamic Learning Maps (SAS/DLM)
Science (grades 5, 8, 11)/ Dynamic Learning Maps (SAS/DLM)
S.A.T. (grade 11)

1. I understand that by signing this form I am exempting my child out of the statewide assessment(s) indicated above.

2. The following alternative activity has been agreed upon by the school district and the parent or legal guardian of the student: The school district will provide independent work including but not limited to independent reading, make-up work, and/or review material.

3. I, the undersigned, acknowledge that no scores or summary of individual student performance, based on the statewide assessment, will be provided to me as a result of my decision to exempt my student from the statewide assessment.

Parent/Legal Guardian_____

(signature)

Date _____

Parent/Legal Guardian____