

**PROMOTION AND RETENTION
OF STUDENTS**

**ELEMENTARY AND MIDDLE SCHOOL PUPIL RETENTION REPORT –
PARENT OR GUARDIAN RESPONSE**

School _____

School year _____

Report date _____

Student's name _____

Birth date _____

Address _____

Home Phone _____

Teacher(s) _____

Parent or Guardian Response in Agreement

____ Having been apprised of the reasons for and conditions of the decision to retain my child, named above, in grade ____ for the _____ school year, I acknowledge and affirm that I am in agreement with that decision.

____ I also understand that any documentation and/or records of this decision shall be placed in my child's permanent record.

Signature(s) of parent(s) or legal guardian(s)

_____ Name (print)	_____ Signature	_____ Date
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_____ Name (print)	_____ Signature	_____ Date
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Parent or Guardian Response in Disagreement

____ Having been apprised of the reasons for and conditions of the decision to retain my child, named above, in grade ____ for the _____ school year, I hereby state that I disagree with that decision.

____ I also acknowledge and affirm that I do not have any legal authority to overturn the decision of the teacher(s), but I do request an appeal of the decision to the Amphitheater School District Governing Board.

____ I acknowledge and agree that the governing Board has the final responsibility in the matter and that my signature on this form does not change the decision of the teacher(s).

____ I also understand that any documentation and/or records of this decision and appeal shall be placed in my child's permanent record.

Signature(s) of parent(s) or legal guardian(s)

_____ Name (print)	_____ Signature	_____ Date
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_____ Name (print)	_____ Signature	_____ Date
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Governing Board Decision

Board agenda date: _____

The action taken by the Amphitheater School District

____ sustained

____ reversed

the teacher's decision.

Grade placement for the above-named pupil for the _____ school year shall be _____ grade.

For the Governing Board

Date