

shall be placed on an individual academic improvement plan in partnership with LEA/Parish and teacher because they did not attain basic proficiency in at least two core subject areas.

In accordance with the requirements of Bulletin 1566 §701 and §703, _____ has the right to at least two or more of the following interventions:

- Strategic classroom placement
- Access to instruction leveraging a high-quality (tier 1) curricula during school hours
- Additional in school support where off grade level instruction does not account for more than 35% of total minutes in each subject area
- Opportunity to enroll in a high-quality summer program that uses a high-quality (tier 1) curricula or learning program

Further, the parent/legal guardian of _____ understands:

Initial	
	Student is entitled to participation in an individual academic improvement plan that is co-developed between parent/legal guardian and teacher.
	Parent/legal guardian is entitled to information in home language detailing intervention supports available to student prior to selection of interventions.
	Parent/legal guardian may select and agree to at least two interventions to be provided, at no cost, by the school system.
	Parent/legal guardian can take action at home to support student progress by doing accessing resources available in the Family Support Toolbox Library and/or provided by student's school.

School System Promotion Policy per Pupil Progression Plan:

LEA Name:	Date:
Student Name:	Grade:
Parent/Legal Guardian Name:	School/Parish Name:

Select at least two or more options from the intervention list below:

- Enrollment in a summer program
- Additional in-school support
- Guaranteed access to a tier 1/high quality curriculum
- Strategic classroom placement

I am a parent or legal guardian of the student referenced above and I understand my rights as it relates to promotion and retention; and I have selected and agreed to course of action for my student.

Print Parent/Legal Guardian Name:

Parent/Legal Guardian Signature:	Date:
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School Administrator Signature:	Date:
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