

## English Learner Services Waiver Form

Student Name: \_\_\_\_\_

District: \_\_\_\_\_

School: \_\_\_\_\_

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

As required by federal law, since the Home Language Survey indicated a language other than English spoken in your home, the student has taken an English language proficiency test to determine if he/she qualifies for additional language support, in order to comprehend daily lessons and participate socially in school. The student's English language skills were assessed in the areas of reading, writing, listening and speaking.

The school has described the English Learner (EL) services they recommend for the student in detail. You have considered the service(s) offered by the school and have chosen to **decline** specialized services for the student. Specialized services or classes are those only provided for English Learners, for example EL pull out classes or any content classes consisting of only ELs. This does not include a class composed of ELs and non-ELs in which English Learning is supported through content instruction.

### Parental Right to Refuse English Learner Services:

By signing below, I acknowledge that I have read and understand each statement.

- I am aware of the English language assessment score and understand why the student was recommended for additional English language instruction.
- My decision to decline or opt-out of specialized EL services is voluntary.
- I understand that I will receive annual notice of the student's English language proficiency test scores and eligibility status for language services until the student reaches English proficiency, as determined by the Kansas English Language Proficiency Assessment (KELPA).
- I understand that waiving services does not exempt the student from annually taking the Kansas English Language Proficiency Assessment.
- I can change my preference at any time by notifying the school district in writing, and allow the student the opportunity to enroll in the EL services(s) offered by the school.

---

I, \_\_\_\_\_ (parent/guardian printed name),  
with a full understanding of the above information, wish to decline English Learner  
services offered to the student.

\_\_\_\_\_  
Parent/Guardian Signature

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