

SMARTER BALANCED ASSESSMENT REFUSAL FORM

I, _____, am indicating to school
(Parent/Guardian name)

administration that my son/daughter, _____,
(Child's name)

in grade _____ is refusing to participate in the administration of the Grade 3 – 8 and 11 Smarter Balanced Assessment.

I understand that if my child is in school during the testing days, they will be brought to an alternate location with supervision for the duration of the testing period. No alternate assignment will be provided; students should bring a book to sit and read during that time.

Parents/Guardian Signature _____ DATE _____

Please return the signed form to the appropriate school's Main Office. Thank you.