

200 Poplar Street, Vandergrift, PA 15690

Date _____

Student Name _____

Present Grade _____

School _____

Parent _____

Teacher _____

Briefly describe your reasons for requesting that your student remain at his/her current grade level for the upcoming school year.

I understand this request will be forwarded to the school's Central Administrative Team for review. A conference to discuss recommendations of Central Office may be scheduled before a determination is made as well as an advocate or outside agency may be requested.

Parent/Guardian Signature