

Clayton County Public Schools What to Expect When Opting-Out of State-Mandated Testing

Parents/Guardians who choose to disallow participation in state-mandated testing must submit a written statement to the building principal prior to the actual dates of testing, documenting their intention to have their child not participate in the Georgia Milestones. In order to plan accordingly, we ask that the written statement be delivered to the principal by **March 30, 2017**. Letters/Forms **will not be accepted during the week of testing**. Please keep a copy of the written statement. If you choose to disallow participation in the testing, please send your child to school each day on time, unless you would have kept your child home for a valid reason such as illness, doctor's appointment, etc. Compulsory attendance guidelines will be enforced during testing as they would on any other school day.

- Students whose families **have** submitted a written statement by the deadline disallowing participation in the Georgia Milestones are expected to come to school on the days of testing and be marked present. Students who have opted out of testing will be placed in a location separate from the testing environment. Adult supervision will be provided, and planned instructional activities will take place. However, iPads, cell phones, or other electronic devices cannot be used during the testing period. This is due to the need to limit the amount of computer network traffic for security purposes during testing. Students will be asked to complete assignments and work quietly during the testing period. At the end of test, students will rejoin their classmates.
- Students whose families **have** submitted a written statement for non-participation and who do not attend school during testing will be **marked absent**. They **will not** participate in the test make-ups upon their return to school.
- Students whose families **have** submitted a written statement for non-participation and who are late to school during testing will be **marked tardy**. They **will not** participate in the test make-ups.

Students whose families **have not** submitted a written statement of non-participation by the deadline and who are **not present** on the day of the test will be **marked absent** and **will** take the Georgia Milestones make-up tests as scheduled. Students whose families **have not** written a statement of non-participation by the deadline and arrive late to school on testing days will be **marked tardy** and are expected to **participate in the test make-ups**.

Our goal is to ensure that Clayton County Public Schools' families and stakeholders are fully informed about the Georgia Milestones; therefore, please visit your child's school or the district's website at www.clayton.k12.ga.us for more information.

Georgia Milestones Assessment Parent Request to Opt Out Form – Due March 30, 2017

Please complete and return the form to the school's principal or counselor.

Part 1. Student and Parent/Guardian Information

Student Name _____
First Name _____ Middle Name _____ Last Name _____

School Name _____ Grade Level _____

Parent/Guardian Name _____
First Name _____ Middle Name _____ Last Name _____

Cell Phone _____ Other Phone _____

E-Mail Address _____

Part 2. Test Selection The request is only good for the current school year. Check all tests that apply.

- | | | |
|---|---|---|
| <input type="checkbox"/> End-of-Grade English/Language Arts | <input type="checkbox"/> End-of-Course 9 th Grade Lit/Comp | <input type="checkbox"/> End-of-Course Biology |
| <input type="checkbox"/> End-of-Grade Mathematics | <input type="checkbox"/> End-of-Course American Lit/Comp | <input type="checkbox"/> End-of-Course Physical Science |
| <input type="checkbox"/> End-of-Grade Science | <input type="checkbox"/> End-of-Course Algebra | <input type="checkbox"/> End-of-Course US History |
| <input type="checkbox"/> End-of-Grade Social Studies | <input type="checkbox"/> End-of-Course Geometry | <input type="checkbox"/> End-of-Course Economics |

Part 3. Parent Advisement (A school leader or counselor is required to complete this section prior to the parent/guardian acknowledgement.)

Date of Advisement _____ Advised by Whom _____
Signature of Advisor _____

Part 4. Parent/Guardian Acknowledgement

I acknowledge receipt of the "Georgia Milestones Assessment Opt-Out of Testing" guidelines and understand any consequences that may result from my child opting out of the Georgia Milestones Assessment System.

Parent/Guardian Signature _____ Date _____