Roseburg Public Schools

2015-2016 State Assessment Exemption Request - High School

*Per OAR 581-022-1910 and the state testing administration manual, parents may request that their student be exempted from state testing based on either **disability** or **religion**. The parent must submit the request in writing, listing the reasons for the request and proposing an alternative individualized learning activity for the student that meets the same goals that would be accomplished by participating in state testing.*

Student Name: _____ **Grade Level:** _____

Please indicate below your reasons for requesting that your student be exempt from state testing. Additionally, please identify the specific test(s) as well as the proposed alternative learning activity.

Reason(s)

State Assessment(s)

☐ ELPA 21
☐ Extended Assessments
☐ OAKS Science (Gr. 11)
☐ OAKS Social Sciences (Gr. 11)

Alternate Activity

I understand that at the high school level my student will need to demonstrate proficiency of essential skills for a high school diploma through another approved Oregon Department of Education measure.

Parent Signature: _____ Date: _____

Whatever it takes!