

PARENT/CAREGIVER ACKNOWLEDGEMENT OF ENROLLMENT IN LOCALLY MODIFIED COURSE(S)

Student Name:

Date of Birth:

School:

Grade:

As a result of formal and informal assessment and consultation with parents/caregivers, teachers and educational personnel, it is the recommendation of the educational team that your child be placed in the Locally Modified Course described below {include grade level and specific course(s)}.

I clearly understand the recommendation for the Locally Modified Course placement described above. I understand the rationale for and implications of this placement and realize that my child:

1. will be working on a Locally Modified 11, 21, or 31 course(s);
2. may not meet the current admission requirements for post-secondary educational institutions; and,
3. may discontinue the Locally Modified course(s) at any time.

Signature of Parent/Guardian

Date

Signature of Parent/Guardian

Date

This form must be completed at the beginning of each school year and filed in the student's cumulative file.

Updated: April 2018