## ACCELERATION REQUEST See policy book for further instructions.

Student name	Present age
Birth Date	_ Age when entered 1st grade
Present grade placement	

1. Reason for acceleration:

- 2. Attach a copy of the most recent achievement test results to this form.
- 3. Teacher evaluation of daily work, tests, etc.:

4. Teacher evaluation of present social and emotional development:

5. Survey of past history in school:

6. Teacher evaluation of physical development:

- 7. Report of communication with parents (include dates, parents' reactions, etc.):
- 8. Recommendation of teacher:

9. Brief summary of suggested acceleration program:

Date
Date her and understand that this is not to be g our child in approved Michigan Conference ucation and the school leadership.
Date
Date
ot Recommended, but allowed