



PORTLAND PUBLIC SCHOOLS

501 North Dixon Street / Portland, Oregon 97227
Mailing Address: P.O. Box 3107 / Portland, Oregon 97208-3107
Telephone: (503) 916-3341 • FAX: (503) 916-3106

RESEARCH, EVALUATION AND ASSESSMENT DEPARTMENT

Dear Parent,

If you prefer that your grade 3-8 student **not** retest on OAKS *if they have already passed this year*, please fill out and sign the form below and return to the school's main office. Incomplete or illegible forms may not be honored.

If we do not receive a signed form from you the school will proceed with retesting your child as scheduled.

My child has already passed OAKS this year in _____.
(subject: Reading, Math, Science)

Please excuse my child from retesting this/these subjects for the 2011-2012 school year.

School name: _____

Student name: _____

Student ID #: _____

Student grade: _____

Parent/Guardian name: _____

Parent/Guardian signature: _____

Date: _____

Please return completed form to your school's main office.