



# Ayer Shirley Regional School District

141 Washington Street  
Ayer, MA 01432

Phone: (978) 772 - 8600

## Program Waiver Application Form for English Learners

*Students under 10 Years of Age*

### A. Background Information

Name of student:

Date of birth:

Date student was placed in an English language classroom:

Date parent(s) or legal guardian(s) visited school to apply for waiver :

(at least 30 calendar days after student was placed in an English language classroom)

### B. Parent/Guardian Informed Consent

Parents or guardians must review and sign the Parent/Guardian Informed Consent Form (Attachment A.)

### C. Determination Regarding Waiver Request

Waiver Request Approved (complete Attachment B)

*It is our informed belief that an alternate course of educational study is better suited to the student's overall educational progress and rapid acquisition of English. The student will be placed in a \_\_\_\_\_ on \_\_\_\_\_.  
(describe the type of language support/class) (insert date)*

\_\_\_\_\_  
Superintendent of Schools(signature and date)      School Principal (signature and date)

Waiver Request Denied

*It is our informed belief that an alternate course of educational study would not be better suited to the student's overall educational progress and rapid acquisition of English.*

\_\_\_\_\_  
Superintendent of Schools (signature and date)      School Principal (signature and date)

### D. Appeals Process (optional)

If the waiver is denied and if the district guidelines contain an appeals process, did the parent(s) or legal guardian(s) appeal the decision? If yes, what was the final determination of the school officials?