



GRADE PLACEMENT AGREEMENT

Student Name: _____

Date of Birth: _____

Based on the District’s Birthdate Placement chart and/or in following the pattern of their MSDS records, your child should be placed in grade _____.

_____ I **agree** with this placement.

_____ I **disagree** with this placement.

Instead, I am requesting that my child be placed in grade _____.

Please supply your rationale below:

We recognize the importance of parents’ views on the education of their students. While grade placement is ultimately the decision of Oxford Virtual Academy Administration, we will strive to make the grade placement process collaborative. To this end, we need your cooperation as we work to a mutually agreed-upon grade placement in the best interest of the child.

Signature of Parent/Guardian **Date**

OFFICIAL SCHOOL USE ONLY BEYOND THIS LINE

After reviewing assessment data, completed curriculum, educational records, age, and/or social-emotional development of the child, Oxford Virtual Academy is placing the student in grade _____.

Signature of OVA Administrator **Date**

