

**Parent/Guardian Request for Advanced Academics  
Review in Grade 4 or Grade 5 Mathematics**

\_\_\_\_\_  
(School)

Date: \_\_\_\_\_

Dear Referral and Review Team,

I would like my child, \_\_\_\_\_, grade \_\_\_\_\_, to be reviewed for Advanced Academic instruction in the area of mathematics.

I believe my child requires Advanced Academic instruction for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

Attached is the completed Parent/Guardian Survey which supplements this request for review.

Thank you for responding to my request. I understand that I will hear from the Team within thirty (30) days.

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Phone Number)