Private Schools Title I Program
PERMISSION TO PARTICIPATE
2012-2013

My child  _______________________________________________________________

First           Middle     Last

Attending _______________________________________ School in grade ___________

Name of School          Grade Level

☐ has my permission
☐ does NOT have my permission

to participate in the 2012-2013 Sacramento City Unified School District’s Private Schools
Title I Program.

______________________________   ______________
Printed Name of Caregiver/Guardian                 Phone Number

______________________________   ______________
Caregiver/Guardian Signature      Date

The assessment scores that qualify your child to receive NPS Title I services are listed
below, along with comments from your child’s teacher:

<table>
<thead>
<tr>
<th>Curricular Area</th>
<th>Name/Type of Assessment</th>
<th>Percentile score/Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reading</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Language</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mathematics</td>
<td></td>
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</tr>
</tbody>
</table>

Comments:  ________________________________________________________________

_________________________________________________________________________

_________________________________________________________________________

Please return this form to your principal by:  ________________