

## **SCHOOL INFORMATION**

Dr. Mickey Reynolds Principal

Melisa Ayala-Cruz Assistant Principal

Melisa Flory Assistant Principal

Michael Hennessy Assistant Principal

Tom Oliver Assistant Principal

SEMINOLE COUNTY
PUBLIC SCHOOLS

Visit Our Web Site www.scps.k12.fl.us

Administrator:

## Counselor: Assistant Principal: Seminole Connect Hybrid Face to Face SCVS LAKE MARY HIGH SCHOOL INTENSIVE READING/INTENSIVE MATH WAIVER 2020-2021 I, \_\_\_\_\_\_ (Parent/Guardian) of \_\_\_\_\_ (Student) understand that my student has been recommended for placement in an Intensive Reading course or Intensive Math course for the 20-21 school year. I am aware of the following: • that this intervention is designed to assist my student in achieving reading and math proficiency as measured by the Florida Standards Assessment • that this intervention is provided by a reading endorsed or certified teacher per Florida HB7069. • that each year the FSA Reading/Math assessment increases in difficulty, and a passing score on the 10th grade FSA ELA or a concordant or comparative score as specified in Rule 6A-1.09422, Florida Administrative Code (F.A.C.) is required to earn a standard high school diploma. By virtue of my signature below, I am requesting to remove my student from the intensive reading/intensive math course, and thus, acknowledging that this intervention will not be provided. Parent/Guardian: Signature \_\_\_\_\_ Date \_\_\_\_\_ Counselor Signature: \_\_\_\_\_ Date: \_\_\_\_\_ **Course Replacement:** \_\_\_\_\_Course Number Course Name Course Number Course Name The school administrator reviewed the following items with me: Algebra 1 EOC and any other relevant placement data for my student \_\_\_\_\_(Parent/Guardian INITIALS) o FSA Reading and any other relevant placement data for my student \_\_\_\_\_(Parent/Guardian INITIALS)

Signature \_\_\_\_\_\_ Date \_\_\_\_\_