

**SAN DIEGO UNIFIED SCHOOL DISTRICT**  
*Spring 2007 Decision to Retain or Promote: Grades 5/6 (Exiting Elementary)*

Student Name: _____	ID No. _____
School: _____	Grade: _____
Teacher: _____	Year: _____
Decision to Retain/Promote Made: <input type="checkbox"/> End-of-Year <input type="checkbox"/> Summer School <input type="checkbox"/> Following Parent Appeal Conference	

**ASSESSMENT RESULTS**

<b>Key to Levels:</b> AAC = Above/At/Close to Expectations; B = Below Expectations; FB = Far Below Expectations							
Literacy Assessments							
Assessment	Score	Level	Date	Assessment	Score	Level	Date
Degrees of Reading Power (DRP, Gr. 5-6)				CA English Language Development Test (CELDT, <i>English Learners</i> , Gr. 5-6)			
Analytical Reading Inventory (ARI, Gr. 5-6)				Other:			
Comments:							
Mathematics Assessments							
Assessment	Score	Level	Date	Assessment	Score	Level	Date
District Mathematics Test (DMT, Gr. 5-6)				Other:			
Comments:							

**RETENTION/PROMOTION DECISION**

Check One	Proficiency Level	Retention/Promotion Decision	Interventions and Supports
	Above/At/Close	<b>Promote</b> to next grade	None
	Below or Far Below	<b>Promote</b> to next grade with the following interventions:	<input type="checkbox"/> Literacy Block: ___ 6 <sup>th</sup> ___ 7 <sup>th</sup> <input type="checkbox"/> Mathematics Exploration 6 <sup>th</sup> <input type="checkbox"/> Literacy Advancement Academy 7 <sup>th</sup> <input type="checkbox"/> Mathematics Advancement Academy: : ___ 6 <sup>th</sup> ___ 7 <sup>th</sup> <input type="checkbox"/> Pre-Algebra Exploration 7 <sup>th</sup> <input type="checkbox"/> Supplemental Instruction ( <i>specify</i> ) <input type="checkbox"/> Interventions/Supports with a focus on ELD and/or SDAIE methodology (English Learners) <input type="checkbox"/> Special Education Supports identified in IEP or 504 Plan for: ___ Literacy    ___ Mathematics <input type="checkbox"/> Other _____
	Far Below	<b>Retain</b> in current grade with the following interventions:	<input type="checkbox"/> Supplemental Instruction ( <i>specify</i> ) <input type="checkbox"/> Interventions/Supports with a focus on ELD and/or SDAIE methodology (English Learners) <input type="checkbox"/> Special Education Supports identified in IEP or 504 Plan for: ___ Literacy    ___ Mathematics <input type="checkbox"/> Other _____

**SIGNATURES**

<b>Teacher</b>	<b>Date</b>
<b>Principal</b>	<b>Date</b>
<b>Parent/Guardian</b>	<b>Date</b>

**Parent Conference was held on (date):** \_\_\_\_\_      **Parent Appeal Conference was held on (date):** \_\_\_\_\_

**IEP Team Meeting Date (Special Education Students only):** \_\_\_\_\_

After repeated attempts, the school was unable to communicate directly with parent/guardian.