



ARDSLEY MIDDLE SCHOOL

Stuart Horlacher, *Principal*
Jennifer Goldenberg, *Assistant Principal*

2023-2024 Testing Refusal Notice

Please return this form to the guidance office by April 5, 2024

Student: _____
School: _____
Your Child's Teacher: _____
Grade: _____

We are writing today to formally inform the district of our decision to refuse to allow our child,
_____ to participate in:

- ☐ the 2024 New York State grade 3-8 ELA assessment;
- ☐ the 2024 New York State grade 3-8 Mathematics assessment;
- ☐ the 2024 grade 4 New York State Science assessment;
- ☐ the 2024 grade 5 New York State Science assessment;
- ☐ the 2024 grade 8 New York State Science assessment.

Sincerely,

Please print: _____

Date: _____

Please sign: _____