

## EGG HARBOR CITY PUBLIC SCHOOLS

**Dr. Gina Forester, Director of Special Projects** 

730 Havana Avenue • Egg Harbor City, New Jersey 08215 (609) 965-1034 x 136 Fax (609) 804-0642

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

## **Title 1 Basic Skills Instruction Program**

Dear Parent/	Guardian,
Performance	reviews are conducted quarterly to determine student progress and continued
	the basic skills instruction (BSI) program. Exit criteria for removal from Title I
•	dependent on the following:
Qualifier	Exit Data
	Teacher Recommendation/Teacher Rating Scales
	Parent Recommendations/Questionnaires
	State Assessments
	Local Assessments
	Benchmark Assessments
	End-Of-Course Assessments
	Grades Place of the Control of the C
	Other – Student met Individual Program Plan Goals
have been me Please be aw We are askir do not agree	basic skills instructor, has determined that all of the goals/objectives as per the IPP et. Therefore, your child meets the criteria to exit the program in the following area(s):  Language Arts Math  are that monitoring will continue and you will be notified if services need to resume. In the discontinuation of this page indicating whether you agree or with the discontinuation of services for your child.  In the goals/objectives as per the IPP et. Therefore, your child in the following area(s):  Language Arts Math  are that monitoring will continue and you will be notified if services need to resume. In the discontinuation of services for your child.  In the goals/objectives as per the IPP et. Therefore, your child in the following area(s):  Math  are that monitoring will continue and you will be notified if services need to resume. In the discontinuation of services for your child.
Sincerely,	
Dr. Kh	a Forester
Gina Foreste Director of S	r, Ed.D. pecial Projects
	Please return the section below
	I <b><u>DO</u></b> wish for my child to be discharged from Title I BSI Services
	I <b><u>DO NOT</u></b> wish for my child to be discharged from Title I BSI Services
Student's Na	me (Please Print)
Parent/Guard	lian Name (Please Print)
Parent/Guard	lian Name (Signature)