

RETENTION: KINDERGARTEN TO GRADE 9

Please complete one form for each student who has been retained

School:	Year:
----------------	--------------


Student Information

Name:	Age:	Grade:
--------------	-------------	---------------

Year End Placement

_____ Retention	
Has this student been retained before? Yes / No (Please circle one)	If yes, at which grade level?
Were this student's parents notified, by February 15 , of a possible retention? Yes / No (Please circle one)	

Reasons for Retention (Please be specific)



Principal Signature

Date _____