

### **Sample Written Request Form**

*Per AB 104, any student who received a D or F (grades 3-11) or 1 or 2 (grades K-2) in half or more of their academic courses during the 2020-21 school year may request a consultation for grade-level retention consideration.*

**If you would like to request a consultation, please complete this form and submit to your student's 2020-21 School Principal.**

1. HLPUSD School Attended in 2020-21: \_\_\_\_\_
2. Student's First and Last Name: \_\_\_\_\_
3. Student's Birthdate: \_\_\_/\_\_\_/\_\_\_
4. Student's 9-digit ID: \_\_\_\_ - \_\_\_\_ - \_\_\_\_
5. Student's Grade Level in 2020-21: \_\_\_\_\_
6. Full Name of Parent/Guardian Requesting Retention: \_\_\_\_\_
7. Parent/Guardian Contact Phone Number: \_\_\_\_\_
8. Are you requesting that your student be considered for retention? \_\_\_Yes \_\_\_No

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(For office use only)

Date request received by school: \_\_\_\_\_

Request received by: \_\_\_\_\_

Date of consultation: \_\_\_\_\_