

Form D

Wakulla County Schools
PARENT REQUEST FOR ALTERNATE ASSIGNMENT

Directions for Use:

**Parent submits this form to the student’s teacher as soon as the objection arises.
Teacher shares form with principal and determines an alternate assignment that is equivalent to the original assignment. Principal approves assignment.
A copy of the completed form is provided to the parent and principal. The teacher maintains the original.
The completion and quality of the alternate assignment is the responsibility of the student, and the teacher will evaluate the assignment upon the same merits as the rest of the class is judged.**

Person (parent) Making Request: _____ Date _____

Student Impacted: _____ Teacher: _____

Title/Description of Instructional Material and Assignment: _____

Reason for Objection: _____

Date Received by Teacher/Principal: _____

Description of Alternate Assignment: _____

Due Date of Alternate Assignment (must allow same amount of time as original assignment) _____

Copy to parent, teacher, and principal. Teacher communicates and explains assignment to student.

FS 1006.28(1)(a)2