Dr. Sue Nash-Ditzel
Superintendent of Schools
snash@killinglyschools.org

KILLINGLY PUBLIC SCHOOLS
Great Things Happen Here!

Mr. Jeffrey Guiot
Assistant Superintendent
jguiot@killinglyschools.org

ACKNOWLEDGEMENT TO EXEMPT ATTENDANCE OF CHILD FIVE OR SIX YEARS OF AGE FROM SCHOOL

Pursuant to and in accordance with Section 10-184 of the Connecticut General Statutes,

I _____, of _____,
Parent, Legal Guardian or Other **Legal Street Address**

the parent, legal guardian or other person charged with the care of the following child,

_____, of _____,
Name of Child / Age / Date of Birth **Legal Street Address**

do hereby exercise my option not to send my child to school until he / she reaches seven (7) years of age. I exercise my option for the school year _____.
School Year

Furthermore, as part of this process I have been provided information on the educational opportunities and school accommodations available in the school district of the Town of Killingly. I also certify that the information provided herein is true and accurate to the best of my knowledge.

Signature: _____
Parent, Legal Guardian, Other / Date

ACKNOWLEDGED BY:

_____
Central Administration Office Representative / Date

cc: Central Office
Parent (if requested)
Applicable School Principal