MINNETONKA PUBLIC SCHOOLS

2026-27 State and Local Standardized Testing Refusal Form

DESCRIPTION OF RIGHTS

During Minnesota's 2016 legislative session the following language was adopted. HF 2749, Lines 459.17-459.27 Sec. 22. Minnesota Statutes 2014, section 120B.31, is amended by adding a subdivision to read: Subd. 4a. Student participation. The commissioner shall create and publish a form for parents and guardians to complete if they refuse to have their student participate in state or locally required standardized testing. The form must state why there are state academic standards, indicate which tests are aligned with state standards, and what consequences, if any, the school or student may face if a student does not participate in state or locally required standardized testing. This form must ask parents to indicate a reason for their refusal. This is effective for the 2016-2017 school year and later.

To refuse NWEA or MCA tests, this section must be completed by the parent/guardian or adult student:

Student's Legal Last Name: _____

Student's Legal First Name: _____

Student's ID Number: _____ Enrolled Grade: _____

Student's School: _____ Date: _____

Please indicate the test(s) in which you are indicating refusal for the 2026-27 school year:

☐	MCA Reading
☐	MCA Math
☐	MCA Science (For Grades 5, 8, HS)
☐	NWEA Reading **(complete prior to fall or spring testing session)**
☐	NWEA Math **(complete prior to fall or spring testing session)**
☐	NWEA Science (For Grades 5 and 6)
☐	ACCESS for ELLs
☐	ELL Screening

Reason for refusing testing: (Please briefly explain in the space below)

MEDICAL EXEMPTIONS REQUIRE A PHYSICIAN'S NOTE PER STATE REQUIREMENT

To best support school district planning, please submit this form prior to the standardized assessment dates for your child. **All MCA refusals must be submitted no later than March 8**, 2027. **This form is only valid for the 2026-27 school year**. Parents and adult students are required to submit an opt-out form annually should they wish to be exempted from MCA, ELL, or NWEA tests.

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_____I understand that by signing this form I may lose valuable information about how well my child is progressing in Reading, Math and/or Science on the state MCA tests aligned to state standards and/or the NWEA-MAP local standardized tests.

Initial here

_____In addition, opting out may impact my child's course placement and the school and district's efforts to equitably distribute resources and support student learning.

Parent/Guardian* (signature) _____

*Adult students (age 18 and older) may sign on their own behalf and do not require a signature by a parent or guardian.

Parent/Guardian or Adult Student (printed name) _____

Principal or School Designee Signature: _____