## Notice of parent withdrawal (for school use only)

National Assessment Program – Literacy and Numeracy (NAPLAN)

Form S2003

For completion by parent/carer who wishes to withdraw a student from the testing program. Test participation should be finalised by Monday 11 May 2015.

Student's name:							
Year level:			Class:				
School:							
s to be withdraw	n from the follo	owing NAPLAN te	est(s):				
☐ Language cor	nventions	Writing		Reading			
Numeracy (Non-calculator — all year levels)				☐ Numeracy (C	alculator allow	ved — Years 7	& 9
Reason:							
Religious Philosophical							
Other (specify):							
, , , , , , , , , , , , , , , , , , ,							
Parent/carer's sig	nature:			Da	te:		<u> </u>
				Da Da			
Teacher's signatu	re:	ncipal:					
Teacher's signatu	re: ed by the pri	-	from the NA		te:	as indicated a	
	re: ed by the pri	-	from the NA	Da	te:	as indicated a	bov
Teacher's signatu  To be complet I acknowledge tha	re: ed by the pri	-	from the NA	Da	te:	as indicated a	bov
Teacher's signatu  To be complet  I acknowledge tha	re: ed by the pri	-	from the NA	Da	te:	as indicated a	bove
Teacher's signatu  To be complet  I acknowledge tha	re: ed by the pri	-	from the NA	Da	te:	as indicated a	bove
Teacher's signatu  To be complet  I acknowledge tha	re: ed by the pri	-	from the NA	Da	rents/carers a	as indicated a	

This information you provide on this form will be used for administering and managing requests for the NAPLAN tests as part of legislative functions described in Education (Queensland Curriculum and Assessment Authority) Act 2014 (s. 13). Personal information will be accessed by authorised by QCAA staff and handled in accordance with the Information Privacy Act 2009. | Form no: S2003

Original for student's file



Copy to parent/carer