COUGARCOUGAR

Castle Dale Elementary

195 East 600 North ♦ PO Box 539 ♦ Castle Dale, Utah 84513

Telephone: (435) 381-5221 ♦ Fax: (435) 381-5220

Melinda Durrant, Principal ♦ Colleen P. Bott, Secretary

Cougars Conquering The Challenge

Parent/Guardian,

Your child has qualified for the Title 1 Program. The Title 1 program supplements and supports the instruction that your child is receiving in his or her regular classroom. It features individualized instruction based on your child’s specific academic needs in reading and/or math.

Three assessments were given to your child. They were the RISE Language Arts Test, RISE Math Test and a DIBELS Benchmark Assessment. Your child did not meet a grade level benchmark or proficiency on these tests, and he/she has qualified for Title 1 supplemental services.

Our goal at Castle Dale Elementary is to help students achieve academic success in reading, language arts, and math. In order to help those students who qualify for the Title 1 program, we offer these supplemental services:

1. Small-Group Instruction – Paraprofessionals are assigned to classrooms to work either individually or in small groups with students who are identified as Title 1. Under a teacher’s supervision, the paraprofessional gives students additional practice with skills in reading or math.
2. One-To-One Tutoring – Paraprofessionals are assigned to classrooms to work individually with a student who is identified as Title 1. Under a teacher’s supervision, the paraprofessional gives the student additional practice with skills in reading or math.

Please discuss with your child’s teacher the results of the three assessments and supplemental services your child is being offered. In order for your child to succeed, we all need to be committed to helping him/her, at school and at home. By working together, we can help your child achieve academic success.

If you have further questions about the Title 1 Program, please contact Stephanie Roper, Title 1 Teacher, at Castle Dale Elementary.

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\_\_\_\_\_\_\_ I give permission for my child to receive services through the Title 1 program as outlined above.

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**Parent/Guardian Signature Date**

\_\_\_\_\_\_\_ I do NOT give permission for my child to receive services through the Title 1 program as outlined above.

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**Parent/Guardian Signature Date**

**In order to receive services, this form must be signed and returned to the school.**

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