

Davenport Community Schools

District Acceleration Request Form

Requests received after April 1 may not be completed by the end of the school year.

Student's Name _____ Date _____

Current Grade _____ School _____ Teacher _____

Parent/Guardian Name/s _____

Address _____ Phone _____ work or home or cell?

_____ email _____

Nature of request:

_____ Whole grade acceleration

_____ Single subject acceleration (i.e., Science). List subject _____

_____ Multiple subject acceleration. List subjects _____

Reason(s) for Request. Include reference to specific evidence and/or data to support this request. [Note: Student must show evidence of meeting grade or subject standards and benchmarks to accelerate.] Use back of page if needed.

Provide names of your student's teachers from the past two years (and names/addresses of schools if different from current school) – Use back if needed.

Parent/Guardian Signature

Date

Submit this form to your student's building TAG Facilitator.