



Curriculum & Instruction  
Department  
English Learner Program  
1009 S. Oak Street  
Traverse City, MI 49684  
231.933.1775  
[www.tcaps.net/programs/el/](http://www.tcaps.net/programs/el/)

**TCAPS English Learner Program  
Parent/Guardian Opt-Out Letter for ESL Services**

Date \_\_\_\_\_ School \_\_\_\_\_

Student Name \_\_\_\_\_

WIDA Overall Proficiency Level: \_\_\_\_\_

Dear Parent/Guardian,

TCAPS provides English as a Second Language (ESL) supplemental service to selected students who come from language backgrounds other than English. Above is your child’s English Language Proficiency level. Based on enrollment information and your student’s WIDA level, your student qualifies for ESL services. This program supports classroom instruction and provides additional opportunities for students’ academic growth and language proficiency.

It is your right as a parent/guardian to withdraw your child from ESL services. If you DO NOT want your child to receive the services, you can withdraw your child by filling out the information below and returning this letter to your child’s school.

Please note that our federal government mandates the continued testing of any student, active or parent exited, whose home or primary language is other than English, until that student demonstrates proficiency on the WIDA ACCESS for ELLs annual assessment, as well as grade level state mandated assessments.

If you need additional information, please contact your child’s school.

Sincerely,  
*TCAPS English Learner Program*

\_\_\_\_\_ I do not wish to have my child receive ESL services.

Parent/Guardian’s Name \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

**Note to Staff:** Put original in the student’s CA-60 file and scan one copy to the EL Administrative Assistant.