| Insert School Letterhead |
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**Date:**

**District:**

**School and Grade Level:**

**Student Name:**

Dear Parent or Guardian,

Upon your request, we administered a literacy screener to your child. We have determined that your child is eligible for an early literacy targeted intervention program. Your child's score indicated an intervention in the following skill area(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. The goal of these programs is to help qualifying students develop their full educational potential and increase the number of children who are reading proficient by the end of 3rd grade.

Our program will help to ensure your child can participate meaningfully in school classes and activities. This letter summarizes your child’s early literacy skill level and the programs available to help your child achieve at a high level by improving his or her literacy skills. The following district programs are available to help your child improve their early literacy skills and make academic progress:

* Jumpstart program (summer) *District insert details of your program*
* Classroom-based program *District insert details of your program*
* Home-based program

Please do not hesitate to contact us with any questions about this program. Questions can be directed to [School Contact] at [Contact Information].

Sincerely,

[Principal’s Name]