

**Date:**

**School and Grade Level:**

**District:**

**Student Name:**

Dear Parent or Guardian,

We have administered a literacy and/or numeracy screener to your child and have determined that they are eligible to participate in an early targeted intervention program.

Your child's results indicated a need for intervention in the following specific skill

area(s): \_\_\_\_\_.

The primary goal of these intervention programs is to help qualifying students reach their full educational potential and significantly increase the percentage of children who are proficient in reading and/or math by the end of 3rd grade. By participating, we aim to ensure your child can engage fully and meaningfully in all school classes and activities.

This letter provides an overview of your child's current early literacy/numeracy skill level and outlines the district-sponsored program available to help improve these skills and support high-level academic achievement:

**District Program to improve Early Literacy/Numeracy Skills:**

**Home-Based Program:** (Technology-based program)

This [document](#) contains answers to common questions regarding the home-based program. This program utilizes technology and is designed to be completed at home to effectively support your student's educational needs.

Please sign and return this letter to indicate whether or not you would like your child to participate in the home-based program.

- Yes, I would like my child to participate in the home-based program.  
 No, I would not like my child to participate in the home-based program.

\_\_\_\_\_  
(Signature of Parent/Guardian)

\_\_\_\_\_  
(Print Name of Parent/Guardian)

Date \_\_\_\_\_

Please feel free to contact us with any questions you may have about the program. You may direct questions to [\[School Contact\]](#) at [\[Contact Information\]](#).