



**Department of
Academic Services**

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Parent Refusal of ESL services – OPT-OUT

I, _____ parent of _____
Parent/Guardian Student Name

I have been informed of my right to refuse to have my child serviced in the English Learner (EL) Program offered by Westlake City Schools. Although the schools are offering services as part of our ESL program that is deemed most appropriate for my child's level of English proficiency, I am requesting that the following action be taken on behalf of my child.

_____ I do not want my child to participate in the EL program.

(You have the right to refuse services for your child, however, please note, the Ohio Department of Education requires every child who is eligible for ESL services, regardless of whether they are participating in services, to take the Ohio annual language proficiency assessment, OELPA, until exit criteria are met.)

Child's Name:	
School:	
Grade:	

Parent/Guardian Signature:

Date:
