

Riverside Local School District

585 Riverside Drive, Painesville, OH 44077

(440) 352-0668 FAX (440) 639-1959

Keys to the Future



Date _____

Dear Parents and Guardians:

Your child, _____, will be receiving Title 1 intervention services and/or reading intervention services at school. These classes are designed to provide reinforcement and individualized small group instruction to supplement the regular classroom reading program. In order to maximize the time with your student, we will begin intervention or Title 1 services this week.

The school will be developing a reading intervention plan for your child to help them make progress toward reading proficiency. Very soon, you will be given the opportunity to provide input to assist us in setting the goals for your child. It is through a strong home-school partnership that students experience educational success. Your involvement and support play a vital role in your child's success and achievement.

Please sign the form below and return it to school with your child. Signed forms can be returned to the classroom teachers. If you have any questions or concerns, please feel free to contact me at school.

Sincerely,

I understand that my child will be participating in supplementary reading services provided by the Riverside Local School District during the school day. I also understand that additional assessments may be given to determine my child's strengths and weaknesses.

Child's Name

Parent Signature