**EXIT SLIP**

Dear Parent/Guardian, Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, is being exited from the intervention group in which they were participating.  Your child’s classroom teacher and/or intervention teacher \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ believe that your child is meeting grade level expectations based on classroom performance and progress monitoring assessments.  The teachers will continue to monitor your child to ensure that he/she continues to meet grade level expectations.  If he/she does not, we will begin support again.

Please call or email your child’s classroom teacher or intervention teacher if you have any questions or concerns and please continue to support and encourage your child to do his/her personal best. Together we can work as a team and make a difference!

Lindsay Kulig Kimberly Lewis Kari Ginger

Title I Teacher Academic Interventionist Title I Teacher

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