



# FORMAL REQUEST TO REPEAT A GRADE FOR 2026–2027 SCHOOL YEAR

## FOR PREKINDERGARTEN–8th GRADE ONLY

**PARENTS: By submitting this form to your child's school, you officially request that the school retain your child at the previous grade level. This is a decision you as a parent have the right to make for the 2026–2027 school year. You must submit this form to your child's school either in person or via the email address the school provides for this specific purpose. If you send via email, ensure you receive confirmation that this form was received.**

Student Name: \_\_\_\_\_

Student ID: \_\_\_\_\_ Student DOB: \_\_\_\_\_

School District Name: \_\_\_\_\_

School Name: \_\_\_\_\_

Date: \_\_\_\_\_

Grade Student Completed in 2025–2026 School Year: \_\_\_\_\_

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Dear Administrator,

This letter serves as a formal request for my child, listed above, to repeat grade \_\_\_\_ (insert grade you are seeking for your child to repeat).

Thank you.

Signed,

Parent Signature: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent Home Phone Number: \_\_\_\_\_

Parent Cell Phone Number: \_\_\_\_\_

Parent Email: \_\_\_\_\_