

**Direct Student Services Informational Meeting
Invitation to Participate**

School: _____ Date: _____
(mm/dd/yyyy)

Dear Parent or Guardian:

You are invited to attend a meeting at your child's school or a school in your area. Your participation as a partner with the school is important to a successful education for all of our students. Please join us to help make sure our students are successful in school.

Our school district qualifies to receive additional funding for a program known as Direct Student Services. A State is required to prioritize funding for Direct Student Services to school districts that have the highest percentage of schools identified for Comprehensive Support and Improvement, schools implementing Targeted Support and Improvement, or a combination of both.

You are invited to a meeting to discuss the Direct Student Services that our school district is providing. Our district will be providing the following Direct Student Services:

- ☐ Attending academic courses not available at the student's school. This includes advanced courses and career and technical education courses that lead to industry related certifications;
- ☐ Credit recovery and academic acceleration courses that lead to a high school diploma;
- ☐ Programs or activities that help students successfully complete college level courses and tests that are accepted for credit at colleges and universities;
- ☐ Components of a individualized learning approach which may include academic tutoring; and
- ☐ For students attending a school identified for Comprehensive Support and Improvement, transportation to transfer to a public school in the district not identified for Comprehensive Support and Improvement. Eligible schools may include charter schools if available.

Meeting Date: _____ (mm/dd/yyyy)

Time: _____

Meeting Location:

Please let us know if you can attend the meeting by completing the "Parent Participation Form". Please have your child return this form to his or her teacher. Please call your child's school or the school district office at _____ (phone) if you have any questions or concerns.

We look forward to working with you so that all students can succeed in school.

Sincerely,

Name

Title

Phone

Email Address