



PALMYRA PUBLIC SCHOOLS
PALMYRA, N.J. 08065

Lianne M. Kane
Supervisor of the Child Study Team
Coordinator of the ESEA Grant
301 Delaware Avenue
(856) 786-9300 ext. 1005

Date: _____
To: Parents/ Guardian of: _____
From: Palmyra Public Schools
Re: Basic Skills Improvement Program

Your child, _____, was selected to participate in the Palmyra Public School's Basic Skills Improvement Program(s). During the regular school day, BSIP students receive supplemental instruction in the subject(s) checked below. Students are supported in the general classroom as well as in small groups.

We based student selection for these programs on the results of report cards, standardized testing and professional staff recommendation. As mandated by the State of New Jersey, we placed into the Basic Skills Program those students who demonstrated a particular set of needs in Language Arts Literacy and/or Math. Some students will need Basic Skills for a full year. However, if sufficient progress is made and the child is working up to grade level, services may no longer be needed. Specific exit criteria includes an S or above on report cards, an average RIT score on MAP Testing, as well as scoring proficient or above on PARCC.

Please sign and return the bottom portion of this letter to indicate that you give permission for your child to participate in the Basic Skills program. If you have any questions concerning the placement of your child in the program, please contact your child's teacher or the Basic Skills Instructor.

Sincerely,

Basic Skills Instructor

Recommended program for your child:
____ LANGUAGE ARTS LITERACY
____ MATH

I grant permission for _____ to participate in the Basic Skills Program.

Parent/Guardian Signature: _____ Date: _____