

**ACCOMMODATION AND EXEMPTION FORM**  
**Primary/Elementary/Intermediate Mathematics Assessment**

Region			School		

School: \_\_\_\_\_ Phone: \_\_\_\_\_

Principal's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Teacher's Name: \_\_\_\_\_

English Language Arts:  Prescribed     Prescribed Modified     Alternate Course

Pre-requisite Program \_\_\_\_\_

FULL EXEMPTION	REQUIREMENT
<input type="checkbox"/> Alternate Curricular Course (removing them from the prescribed curriculum)	A copy of the alternate course or curriculum must be on file at the school.
<input type="checkbox"/> Alternate (Functional) Curriculum	
<input type="checkbox"/> Modified Prescribed Math Course (below grade level)	
<input type="checkbox"/> Special Circumstances	Unusual circumstances such as illness, sudden bereavement, etc.
ACCOMODATIONS	REQUIREMENT
<input type="checkbox"/> Alternate Text Format	Accommodation is on file in Student's IEP or Record of Accommodations.
<input type="checkbox"/> Assistive Technology	
<input type="checkbox"/> Verbatim Scribing (Reading Sections Only)	
<input type="checkbox"/> Transcribing (Reading Sections Only)	
<input type="checkbox"/> Alternate Setting/Quiet Space	
<input type="checkbox"/> Supervised Breaks	Verbatim reading of a question is permitted for any student during the Mathematics Provincial Assessment if necessary, but must follow the guidelines outlined in the Accommodation and Exemption Policy.
<input type="checkbox"/> Reading of Texts	

**AUTHORIZATION:** This form must be completed by the parent/guardian, teacher, and principal and placed in the student's cumulative file by May 1.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Teacher or Principal Signature

**OR:** A parent may give authorization/consent by email or phone conversation.

\_\_\_\_\_  
Date of Consent

\_\_\_\_\_  
Teacher or Principal Signature