

I	(parent/guardian name) would
like to opt out my child	(student's name)
out of the following tests for the 20 / 20 so	chool year. I understand that there
will be no penalty for opting out of this/these tests. I a	also understand there will be no
score reported on my child's transcript.	
☐ CMAS: Colorado Measures of Academic Succ	cess
□ PSAT 8/9/10: Preliminary Scholastic Aptitude	Test
☐ SAT: Scholastic Aptitude Test	
☐ ASVAB: Armed Services Vocational Aptitude	Battery
Reason for Opt Out:	
Signature:	Date: