



SAT Opt-Out Form

Sign & Return ONLY if opting out

Beginning with the spring 2025 administration for the class of 2026, a parent or guardian may elect for their student not to participate in the state-funded SAT as provided in [state law](#).

Please complete and return this form to the guidance office if you are choosing to opt out of the SAT.

_____ **OPT OUT:** As parent/legal guardian of (*student name*) _____, I request to have my child be excused from taking the SAT.

Student Grade: _____

Parent/Legal Guardian Name (Print): _____

Parent/Legal Guardian Signature: _____

Email: _____

Phone: _____