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| 2025 NAPLAN  Record of parent/carer withdrawal (for school use only) |

For completion by parents/carers who wish to withdraw a student from the NAPLAN testing program. Refer to section 5.3 of the [*NAPLAN national protocols for test administration*](https://nap.edu.au/naplan/for-schools/national-protocols-for-test-administration).   
Test participation should be finalised by **Tuesday 11 March 2025**.

* This is NOT an application.
* It is only a record and is to be signed by the principal and parent/carer of the student.
* Once completed, a copy of this form must be given to the parent/carer.
* Retain the original in the student’s file.
* This record should not be sent to the QCAA or to its contractor.

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| Student’s name: |  | | | | |
| Year level: |  | | Class: |  | |
| School: |  | | | | |
| Is to be withdrawn from the following NAPLAN test/s: Please select ☒ | | | | | |
| Writing | | | Conventions of Language | | |
| Reading | | | Numeracy | | |
| Reason: Refer to section 5.3 of the *NAPLAN national protocols for test administration*. | | | | | |
| Please select ☒ | | | | | |
| Religious | | Philosophical | | | Other |
| Parent/carer’s signature: | |  | | | Date: |
| Parent/carer’s name (print): | |  | | | |
| To be completed by the principal | | | | | |
| *I acknowledge that the parents/carers of this student have requested that the student be withdrawn from the NAPLAN test/s as indicated above.* | | | | | |
| Comments: | | | | | |
| Principal’s signature: | |  | | | Date: |
| Principal’s name (print): | |  | | | |

**Note:** This withdrawal can also apply to practice tests.

When completed this form should be managed in accordance with the school’s privacy obligations.