Names of Parent(s)/Guardian(s)

Street Address

City, State, Zip

email@email.com

Month Day, 20XX

School Official Name

X City School District
Street Address

City, State, Zip

Dear Ms./Mr. School Official,

Please find enclosed the Annual Assessment results for our son/daughter, FName LName, who was in the Grade Level for the 20XX-20XX school year.

Sincerely,

Mother/Guardian Father/Guardian