**Grade Reconfiguration Template Letter**

*Instructions: Please copy and paste the following letter onto District letterhead, make all appropriate modifications and fill in any blanks in the form with your district/school information highlighted in yellow. Please submit this form in the Accreditation Portal by October 15, 2025.*

June 25, 2025

Susana Córdova, Commissioner

Colorado Department of Education

201 East Colfax Avenue, Room 500

Denver, CO 80223

Dear Commissioner Córdova,

XX School District is requesting a reconsideration of the preliminary school performance framework rating for XX school, based on a grade reconfiguration. The initial school rating was: XX. We are requesting a rating of XX based on the data shared below.

Due to describe reason, the school went from serving XX grade levels to XX grade levels. Due to this change, the performance rating is no longer representative of the current student population, as evidenced by the following data points.

* How students included in the current framework compare to reconfigured population in terms of grade levels served, previous/current achievement/growth levels in ELA and math (e.g., state assessment results of students who are in the framework compared to current student population), or other (i.e., student demographics).

When including the results of students from the new grade configuration, our indicator rating totals on the performance framework would be as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| **Performance Indicator** | **Percent of Points Earned** | **Points Earned / Eligible** | **Rating** |
| Academic Achievement |  |  |  |
| Academic Growth |  |  |  |
| Postsecondary & Workforce Readiness |  |  |  |

Overall, based on the newly reconfigured population of students, the total percent of points earned would be XX/100, which would be equivalent to XX rating.

Given that the students included in the preliminary performance framework rating do not fully represent our entire student population, we respectfully request XX rating for XX school.

Thank you for your consideration.

Sincerely,

Board President Name/Signature Superintendent Name/Signature

President, Board of Education Superintendent of Schools

**Note: Signatures are optional and not required. However, district leadership (i.e., Superintendent/Board President) should be aware of all request to reconsider submissions.**