

**THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA
EXCEPTIONAL STUDENT LEARNING SUPPORT**

EXTENDED SCHOOL YEAR 2021

Date _____

To the Parent(s) of _____

Your child received extended school year services at _____
ESY Site

over the summer of 2021. The ESY personnel who provided the services and the principal of the ESY site have signed below indicating provision of the services identified on the ESY form when your child was in attendance.

Days Absent: _____

Days Present: _____

If you have any questions, you may call your child's school when school reconvenes in August. Thank you.

Sincerely,

Name/Title

Name/Title

Name/Title

Name/Title

ESY Site Principal

Copy to: ESY Folder and ESY Site Principal