Repetition of Students Policy

Introduction

In previous years the practice of repetition of students was used when it was felt the child was under-achieving or unable to cope. Throughout the school year, it is our duty as teachers to closely monitor our students’ progress in order to provide them with the best possible available resources and programs of work most suited to their needs.

Repetition can have a demoralising effect on the child and the effect on the child's self confidence and self esteem could influence their attitudes for the rest of their lives. Repetition therefore is one of the most difficult educational decisions facing the school and the child's parents.

As a part of the ongoing process of meeting the needs of the students in our care, consideration has to be given to the appropriateness of student grade placement. If it is considered that a child may benefit from repetition the following policy will come into play.

Policy

It is the policy of this school to consider repetition if –

- The parents suggest it.
- The class teacher suggests it.
- The child is experiencing difficulty because they -
  - are very young
  - are immature
  - are under-achieving
  - has suffered a long term illness
  - has had a long term absence (e.g. overseas holidays, etc...)
Several of these conditions should be present before repetition can be considered, and the procedures following should be implemented as soon as is practicable before the end of any one school year (ideally processes should begin before the end of Term 3).

**Guidelines**

1. Preliminary discussion is needed between the class teacher and the Principal.

2. The School Counsellor should be consulted and appropriate tests and diagnosis conducted.

3. The parents must be informed as early as possible if it is decided by the Principal and the class teacher that repetition may be considered. The child can then be made aware of what is involved and given the necessary re-assurance both at home and at school.

4. The ultimate decision on repetition will be made following agreement of the student’s parents and the Principal following -
   
   a. perusal of documentation
   b. consideration of the results of interviews between the school, parents, class teacher, school counsellor and the child.

5. It is expected that no child should turn thirteen (13) years of age before proceeding to Year 7.

**Conclusions and some over-riding considerations that must be addressed**

1. Repetition of students should occur in the earliest grade level possible, once the appropriate assessments have been made.

2. Assessment of students’ maturity and academic achievement must be carefully made through the use of objective evaluation and appropriate personnel.

3. No decisions concerning the repetition of students are to be made before the details are discussed with all stakeholders, including the child’s teachers, School Executive, School Counsellor, Principal and Parents.

4. The deciding factor must, as always, be whether such a step is going to benefit the child.

5. Before a final decision is made the impact of the repetition on the student’s eligibility for support programs both in and out of school, should be identified and discussed with the parents.

6. NO child will be repeated without the **full agreement of the parents and the Principal**.

**Ratification**

This Policy has been developed in conjunction with the school community, staff and Principal 2013.

Bede Darcey
Principal
November, 2013
GEPS REPETITION REFERRAL FORM

1. Name of child  __________________________

2. Class _________

3. D.O.B._____________________

4. (a) Class Teacher’s Reasons for Referral.

________________________________________________________________________________

________________________________________________________________________________

(b) Specific comments on: -

[1] Reading/Language Development

________________________________________________________________________________

________________________________________________________________________________

[2] Numeracy

________________________________________________________________________________

________________________________________________________________________________

[3] Social/Emotional Adjustment

________________________________________________________________________________

________________________________________________________________________________

(c) Intervention attempted to date:

________________________________________________________________________________

________________________________________________________________________________

5. Counsellor’s Report and Recommendation. (see attached documentation)

6. School Repetition Meeting:

Date:__________________________________

Recommendation:

________________________________________________________________________________

________________________________________________________________________________

7. Meetings with Parents: Date:________________________

8. Parents decision, in writing. (see attached sheet)
GEPS Repetition Notification

Meeting Date: _________________________

Present: Parents: _________________________________

_________________________________

Principal: _________________________________

Counsellor: _________________________________

Teacher: _________________________________

Today a decision has been made to:

Repeat _________________________________

Not to repeat _________________________________

Reasons for the decision:

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

Considerations for class placement in the following year:

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

Signed: _________________________________ Principal

_________________________________ Parent