

***Wayne County Board of Education
Policies Update: (Students) (6)***

- **WCBOE Policy 5310 (Students: Health Services)**
- **WCBOE Policy 5320 (Students: Immunization)**
- **WCBOE Policy 5321 (Students: Tuberculin Skin Test)**
- **WCBOE Policy 5335 (Students: Care of Students with Chronic Health Conditions)**
- **WCBOE Policy 5340 (Students: Student Accidents/Cardiac Arrest)**
- **WCBOE Policy 5410 (Students: Promotion, Acceleration, Placement, and Retention)**

***Your comments concerning these policies should be sent
in writing (mail or email) to:***

***Mr. Todd Alexander
Superintendent
Wayne County Board of Education
PO Box 70
Wayne, WV 25570
Email: talexand@k12.wv.us***

**These policies are out for public comment for 10 working days beginning
Wednesday, April 29, 2026 through Tuesday, May 12, 2026.**

Book Public Comment Period 4/29/26 thru 5/12/26

Section Vol 17-1 Ready for TAA/Director

Title New Policy - Vol. 17, No.1 - April 2025 - HEALTH SERVICES

Code po5310

Status

New Policy - Vol. 17, No.1 - April 2025

5310 - HEALTH SERVICES

The school nurse, as the school health expert, is qualified to lead the coordination of health promotion for students and school personnel through screenings, supporting school health requirements, and offering other health recommendations. Health services for schools may be provided through various partnerships including, but not limited to, partnerships established with local agencies, state agencies, community organizations, and/or health care providers.

New students enrolling in a County school at first entry of either pre-kindergarten (Pre-K) or kindergarten shall have on file within forty-five (45) days of enrollment or prior to the first day of school attendance a record of a HealthCheck screening or other comprehensive health screening comparable to the HealthCheck protocol. All screening forms shall be signed and dated by the student's licensed health care provider and completed within the past twelve (12) calendar months. The Board may retain the right to conduct follow-up screenings pursuant to WV Code and WV Policy 2525, and WV Code 18-5-17. Students determined to have impairments or disabilities shall be referred to the appropriate school personnel for additional screening.

HealthCheck is a component of West Virginia's Early and Periodic Screening, Diagnosis and Treatment Program (EPSDT) for child preventive health relating to Medicaid for children under twenty-one (21) years old. An annual comprehensive examination is recommended for all children ages three (3) to twenty (20) years old and more frequently if less than three (3) years old. HealthCheck meets vision, hearing, developmental, speech, language, oral health, or other comprehensive health screening requirements. The HealthCheck screening form is the preferred documentation method for licensed health care providers to record screenings; however, documentation formats may vary.

New students enrolling in County schools at first entry of either Pre-K or kindergarten shall have on file within forty-five (45) days of enrollment or prior to the first day of school attendance, a record of an oral health examination. The oral health examination shall be signed and dated by the student's dental provider and completed within the past twelve (12) calendar months. If the student does not have proof of an oral health examination, the student may be enrolled in the Oral Health Program (OHP). The OHP provides an oral health assessment from a dental provider regardless of the ability to pay if the parent/guardian provides consent. The student's enrollment in OHP is sufficient to meet the oral health requirement established in WV Policy 2423.

The Board of Education may require students of the County School System to submit to periodic health examinations to:

- A. ☒ protect the school community from the spread of communicable disease;
- B. ☒ verify that each student's participation in health, safety, and physical education courses meets his/her individual needs;
- C. ☒ verify that the learning potential of each child is not lessened by a remediable physical disability.

The ~~County~~ Board may provide or request that parents ~~to~~ provide:

- A. ☒ general physical examinations for athletics;
- B. ☒ dental examinations;

- C. ☒ tests for communicable disease;
- D. ☒ vision and/or audiometric screening;
- E. ☒ ~~scoliosis~~-Scoliosis tests.
- F. ☐ _____.

The Board shall directly notify the parents of students, at least annually at the beginning of the school year, of the specific or approximate dates during the school year when any nonemergency, invasive physical examination or screening is scheduled or expected to be scheduled for students if the examination or screening is: (1) required as a condition of attendance; (2) administered by the school and scheduled by the school in advance; and (3) not necessary to protect the immediate health and safety of a specific student, or other students.

The term "invasive physical examination" means any medical examination that involves the exposure of private body parts, or any act during such examination that includes incision, insertion, or injection into the body, but does not include a hearing, vision, or scoliosis screening.

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Legal 20 U.S.C. 1232(h)
 WV Code 18A-3-12

Book Public Comment Period 4/29/26 thru 5/12/26

Section Vol 17-1 Ready for TAA/Director

Title Revised Policy - Vol. 17, No. 1 - April 2025 - IMMUNIZATION

Code po5320

Status

Adopted May 26, 2015

Revised Policy - Vol. 17, No. 1 - April 2025

5320 - IMMUNIZATION

In order to safeguard the school community from the spread of certain communicable diseases and in recognition that prevention is a means of combating the spread of disease, the Board of Education requires all children entering school in this ~~District~~ County to show proof of immunization against chickenpox, Hepatitis B, measles, meningitis, mumps, diphtheria, polio, rubella, tetanus, and whooping cough or produces a certificate from the Commissioner of the Bureau for Public Health (BPH) or the Immunization Officer granting the child or person an exemption from the compulsory immunization requirements of WV Code 16-3-4. ~~A medical exemption request must be made by a licensed physician and state that the physical condition of the child is such that immunization is contraindicated or there exists a specific precaution to a particular vaccine. For preschool children entering a school housing other children in grades kindergarten through 12, Hepatitis A, Hib, and PCV immunizations are required along with the above immunization requirements hold to the extent that they are age appropriate in accordance with the immunization schedules found at www.cdc.gov by searching under "Immunization Schedules".~~

The Commissioner is authorized to appoint an Immunization Officer to make determinations on request for a medical exemption to the compulsory communication requirements established by the BPH. A medical exemption request shall be made by a licensed physician and include an acknowledgment that the physical condition of the child is one for which immunization is contraindicated or a specific precaution to a particular vaccine exists.

All Pre-K students shall also meet requirements in accordance with WV Policy 2525.

Each student's immunization record shall be a public health record to be entered in the West Virginia Statewide Immunization Information System (WVSIIS) and reviewed annually.

A student who does not have a completed certificate of immunization or other similar medical record of immunizations shall show proof that s/he has received at least one (1) dose of each of the required vaccines in order to be provisionally enrolled in school.

Provisional enrollment may continue from school entry to a time period established by the ~~WVDHHR~~ WV Department of Health, W.V. 64 CRS 95. All provisionally enrolled students shall show proof to the school that they have completed all of the required immunizations.

Proof of prior measles, mumps, rubella, pertussis ~~or~~, or Hepatitis B disease being used in lieu of vaccination requires a document signed by a physician indicating, at a minimum, the name of the patient, the date of the illness ~~and~~, and any obtained laboratory evidence of the diagnosis. If the historical disease diagnosis is in question, current laboratory evidence of immunity may be required.

The verbal or written statement of the parent or legal guardian of a child shall suffice to prove that a child has had chickenpox and is considered to be proof of immunity.

Any person who cannot give satisfactory proof of having the required immunizations or a certificate from a reputable physician showing that one or all of the required immunizations is impossible or improper or sufficient reason why any or all immunizations should not be done, shall be immunized prior to being admitted in any of the County schools. If the

exemption noted by the physician is temporary, a notation shall be made as to the future date at which the exemption should be reevaluated.

Requests for medical exemption from vaccine requirements shall be reviewed and approved or denied initially by the local health officer in the county where the requestor attends school. Approval or denial of a request shall be in writing and a copy of the response shall be sent to the State Health Officer. The local health officer's decision on a request for a medical exemption from immunization may be reviewed by the State Health Officer. That decision may be appealed through the administrative review procedure outlined in 64 CSR 95, 10 and 64 CSR 1.

Students entering grade seven (7) and grade twelve (12) shall provide official documentation from a licensed health care provider that the student has received the two additional vaccines required by West Virginia law as follows:

- A. a student between the ages of eleven (11) and twelve (12) shall receive one dose of Tdap and meningococcal vaccination prior to entering grade seven (7);
- B. a student enrolling in the school system at age thirteen (13), fourteen (14), or fifteen (15) who has not received a meningococcal vaccination shall receive the meningococcal vaccination and provide official documentation from a licensed health care provider that the student has received a meningococcal booster prior to entering grade twelve (12); and,
- C. a student enrolling in the school system at age sixteen (16) or older who has not been previously vaccinated with meningococcal vaccination shall receive a meningococcal vaccination; however, the student is not required to provide documentation from a licensed health care provider that the student received a booster prior to entering grade twelve (12).

Children who are delinquent for any required vaccinations or who have exceeded the provisional enrollment period, will be considered to be out of compliance with the law and may be required to stop receiving educational services at the school until the appropriate vaccine(s) are received and the records are amended.

~~All children entering grades 7 and 12 must show proof of the immunization booster against diphtheria, pertussis, tetanus, and immunization against meningococcal disease upon entry or produce a certificate from the Commissioner of the Bureau for Public Health granting the child or person an exemption from the compulsory immunization requirements of WV Code 16-3-4. There shall be no provisional enrollment permitted.~~

~~A student who is newly entering the school system at age thirteen (13), fourteen (14) or fifteen (15), and who has not been previously vaccinated with MCV4 must receive the MCV4 vaccination and must also show proof of a booster shot on or after age sixteen (16) and prior to entry into the 12th grade.~~

~~A student who is newly entering the school system at age sixteen (16) or older and who has not been previously vaccinated with MCV4 must receive a MCV4 vaccination and will not be required to show proof of a booster prior to entry into the 12th grade.~~

Any school personnel having information concerning any person who attempts to enter school for the first time without having been immunized shall report the names of all such persons to the Commissioner of the Bureau for Public Health.

The attendance director shall assist in obtaining immunizations or records of immunizations for those students ~~that~~ who do not have them and ~~assure~~ ensure that students are enrolled while the records are being obtained. Immunization records are accessible through the ~~West Virginia Statewide Immunization Information System (WVSIIIS).~~

Beginning with the 2012-2013 school year, all children matriculating from a West Virginia school to grades seven (7) and twelve (12) must show proof of the immunization booster against diphtheria, pertussis, tetanus and immunization against meningococcal disease upon entry. There shall be no provisional enrollment permitted. Request for medical exemption from these vaccine requirements shall be in accordance with those students entering school for the first time as indicated above.

The following vaccines are recommended for children attending public schools, at the appropriate age: influenza, meningococcal, Tdap, human papillomavirus, and other vaccines recommended for various high risk populations in the school setting may be found on the immunization schedule at www.cdc.gov by searching under "Immunization Schedules".

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Legal

West Virginia State Board of Education policy 2423

West Virginia State Board of Education policy 2525

WV Code 16-3-4 and 5

64 CSR 95

Book	Public Comment Period 4/29/26 thru 5/12/26
Section	Vol 17-1 Ready for TAA/Director
Title	Revised Policy - Vol. 17, No. 1 - Apr 2025 - TUBERCULIN SKIN TEST
Code	po5321
Status	
Adopted	March 15, 2016
Last Revised	July 25, 2023

Revised Policy - Vol. 17, No. 1 - April 2025**5321 - TUBERCULIN SKIN TEST**

Students ~~found-determined~~ or suspected ~~to have~~ of having active tuberculosis shall be temporarily removed from school while their ~~case-is-cases~~ are reviewed and evaluated by ~~their personal physician~~ a licensed health care provider and the local health officer. Students shall return to school when their personal physician and the local health officer, in consultation with the Commissioner of the Bureau for Public Health or designee, indicate that it is safe and appropriate for them to return.

The commissioner may require selective testing of students for tuberculosis when there is reason to believe that they may have been exposed to the tuberculosis organism or they ~~have~~ are exhibiting signs and/or experiencing symptoms indicative of the disease. ~~School-~~ The school nurses shall identify and refer any ~~students-student~~ student or school personnel to the local health department in instances where when they have reason to suspect that the ~~individual-student~~ individual student has been exposed to tuberculosis or ~~has~~ they are exhibiting signs and/or experiencing symptoms indicative of the disease.

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Legal WV Code 16-3D-3

Book	Public Comment Period 4/29/26 thru 5/12/26
Section	Volume 17-2 Ready for TAA/Director
Title	Revised Policy - Volume 17, No. 2 - August 2025 - CARE OF STUDENTS WITH CHRONIC HEALTH CONDITIONS
Code	po5335
Status	
Adopted	May 26, 2015
Last Revised	September 12, 2022

Revised Policy - Volume 17, No. 2 - August 2025

5335 - CARE OF STUDENTS WITH CHRONIC HEALTH CONDITIONS

Students with chronic health conditions will be provided with a free appropriate public education if determined eligible under the Individuals with Disabilities Act ("IDEA") or Section 504 of the Rehabilitation Act of 1973 ("Section 504"). If their impairment does not require specially designed instruction for them to benefit educationally, they will be eligible for accommodations/modifications/interventions of the regular classroom, curriculum, or activity (~~h.e.i.e.~~, the school setting) so that they have the same access to an education as students without disabilities. Such accommodations/modifications/interventions may be provided pursuant to a Section 504 Plan, as needed (Form 2260.01 F13).

Chronic health conditions, for the purposes of this policy, shall include:

- A. ☒ "peanut" and other food allergies;
- B. ☒ allergies;
- C. ☒ asthma;
- D. ☒ diabetes;
- E. ☒ cystic fibrosis; and
- F. ☒ seizure disorders.

All information regarding student identification, health care management, and emergency care shall be safeguarded as personally identifiable information in accordance with Policy 8330 and Policy 8350.

A parent, guardian, foster parent, or kinship placement may not be denied access to the health records of their minor child unless a court order blocks access, the minor child has graduated high school or equivalent, the minor child is emancipated, or the minor child is married. No release, authorization, or any form of permission by the minor child may be required or requested for a parent or legal guardian to obtain the records.

The District will coordinate school health practices for management of a chronic health condition and shall provide for:

- A. identification of individuals with chronic health conditions;
- B. development of individualized health care action plans ("IHP");

- C. coordination of health care management activities by school staff;
- D. communication among school staff who interact with children with chronic health conditions;
- E. development of protocols to prevent exposure/episodic reactions;
- F. awareness and training of school staff regarding Board policy on acute and routine management of chronic health conditions, information on signs and treatment of chronic health conditions, medication and administration, and emergency protocols for dealing with reactions in "unusual" situations such as field trips.

School health practices shall provide students with chronic health conditions the opportunity for:

- A. full participation in physical activities when students are well;
- B. modified activities as indicated by the student's IHP, 504 plan, or Individualized Education Plan (IEP);
- C. access to preventative medications before activity (as prescribed by their medical providers) and immediate access to emergency medications during activity;
- D. communication regarding student health status between parents, physicians, teachers (particularly physical education teachers), and coaches.

Healthcare management activities shall include:

- A. procedures to obtain, maintain, and a written IHP, signed by the child's parents and physician, for each student with a chronic health condition;
- B. a standard emergency protocol in place for students experiencing a distress reaction if they do not have a written IHP on-site;
- C. established communication strategies for students to use to tell an adult they may be having a health-related problem;
- D. procedures for students to have immediate access to medications in accordance with Policy 5330 and AG 5330 that allow students to self-care and self-administer medications, inhalers, and Epi-pens, as prescribed by a medical professional and approved by parents/guardians;
- E. prevention strategies to avoid causal elements;
- F. case management for students with frequent school absences, school health office visits, emergency department visits, or hospitalizations due to chronic health conditions;
- G. management and care of the student's chronic health condition in the classroom, in any area of the school or school grounds, or at any school-related activity or event.

Designated staff will be trained about chronic health conditions and their control at a minimum annually in each school in which there is a student with a chronic health condition.

This training shall include:

- A. education about chronic health conditions;
- B. the management procedures that the student and/or school personnel will be responsible for during the school day;
- C. the early warning signs of chronic health conditions;
- D. what to do in case of a distress reaction;

E. special planning needed for functions such as parties, field trips, before and after-school activities, particularly those involving physical activity or exercise;

F. reporting procedures for changes in the student's physical or emotional behavior and condition;

G. access to appropriate consulting health professionals to address questions about chronic health conditions. Designated staff who have responsibility for specialized services such as giving inhaler treatments or injections, or conducting glucose and/or ketone tests shall be provided training specific to the procedures, at least annually, by a licensed health professional.

The (☒) school nurse (☐) principal **[end of options]** shall maintain a copy of the training program and the records of training completed by school employees.

HEALTH CARE PLAN AND EMERGENCY ACTION PLAN

All students receiving specialized health care procedure(s) during the school day and school-related events shall require a health care plan.

The certified school RN shall prepare the health care plan based on assessment of the student and/or a written order by a licensed prescriber and in collaboration with the parent/guardian. The health care plan may be shared with other school personnel for legitimate educational reasons as indicated in The Family Education Rights and Privacy Act (FERPA) (20 U.S.C. §1232g; 34 CFR Part 99) such as, but not limited to, Individualized Education Program (IEP) Team, Section 504 of the Rehabilitation Act of 1973 (Section 504) Team, Student Assistance Team meetings, classroom teachers providing oversight and care to the student, and Medicaid billing, etc.

The health care plan shall guide the certified school RN's care of the student. The certified school RN will develop and revise the health care plan using best practices such as North American Nursing Diagnosis Association International nursing diagnosis. The health care plan will be reviewed and revised on an annual basis or as necessary with any change in the student's condition or provider's order.

The plan shall include:

- A. nursing assessment;
- B. nursing diagnosis;
- C. goals and expected outcomes;
- D. interventions; and
- E. evaluation.

Emergency action plans may be included at the discretion of the certified school RN to guide designated school personnel, classroom teachers, and school bus operators in providing emergency care and/or specialized health care procedures for students.

☐ Administrative guidelines shall provide guidance for the implementation of this policy.

West Virginia Board of Education policy 2422.7
WV Code 16-29-3

Cross References

po5330 - USE OF MEDICATIONS
po8330 - STUDENT RECORDS
po8350 - CONFIDENTIALITY

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West Virginia Board of Education policy 2422.7

WV Code 16-29-3

Cross References

po5330 - USE OF MEDICATIONS

po8330 - STUDENT RECORDS

po8350 - CONFIDENTIALITY

Book Public Comment Period 4/29/26 thru 5/12/26

Section Vol 16-2/Vol 17-2 Ready for TAA/Director

Title STUDENT ACCIDENTS/CARDIAC ARREST

Code po5340

Status

Adopted May 26, 2015

Revised/Renamed Policy - Volume 16, No. 2 - December 2024

5340 - STUDENT ACCIDENTS/CARDIAC ARREST

Student Accidents

The Board of Education believes that school personnel have certain responsibilities in case of accidents ~~which~~ that occur in school. Those responsibilities extend to the administration of first aid by trained personnel, summoning of medical assistance, notification of administrative personnel, notification of parents, and the filing of accident reports.

Employees should administer first aid within the limits of their knowledge of recommended practices. All employees should make an effort to increase their understanding of the proper steps to be taken in the event of an accident.

It should be noted that in West Virginia, no person, including a person licensed to practice medicine or dentistry, who in good faith renders emergency care at the scene of an accident or to a victim at the scene of a crime, without remuneration, shall be liable for any civil damages as the result of any act or omission in rendering such emergency care.

The Superintendent shall develop administrative guidelines to include the reporting of accidents, when appropriate.

Cardiac Emergency Response Plans

(a) For the purposes of this section, the following terms are defined:

"Cardiac Emergency Response Plan" or "the plan" means a written document that establishes the specific steps to reduce death from cardiac arrest.

"Automated External Defibrillator" means a lightweight, portable device that delivers an electric shock through the chest to the heart.

"School" means any elementary or secondary school ~~with an athletic department or organized athletic program~~ under the jurisdiction of a county board of education.

"Sudden Cardiac Arrest" means when the heart malfunctions and stops beating unexpectedly.

"Youth Sports League Team" means any team that is a member of an entity that organizes and establishes rules for competitive youth sports activities other than the West Virginia Secondary School Activities Commission or any other entity that organizes and establishes rules for competitive youth sports activities exclusively for teams that are created by and represent schools.

(b) A school shall develop a cardiac emergency response plan that provides for the following:

(1) A school with an athletic department or organized athletic program shall develop a cardiac emergency response plan that addresses the appropriate use of school personnel to respond to incidents involving an individual experiencing sudden cardiac arrest or a similar life-threatening emergency while attending or

participating in an athletic practice or event while on school grounds; and that is venue specific and practiced annually;

(2) A school shall develop a cardiac emergency response plan that addresses the appropriate use of school personnel to respond to incidents involving an individual experiencing sudden cardiac arrest or a similar life-threatening emergency while on school grounds outside of athletic events; and

(23) School staff trained in first-aid, CPR, and automated external defibrillator use that follow evidence-based guidelines including but not limited to licensed coaches, school nurses, and athletic trainers.

(c) Prior to the start of each athletic season, a school subject to this section shall hold an informational meeting for students, parents, guardians, or other persons having care or charge of a student, regarding the warning signs of sudden cardiac arrest for children of all ages.

(d) No student may participate in an athletic activity until the student has submitted to a designated school official, a form signed by the student and the parent, guardian, or other person having care or charge of the student, stating that the student and the parent, guardian, or other person having care or charge of the student have received and reviewed a copy of the cardiac emergency response plan developed by the school and posted on its webpage. A completed form shall be submitted each school year in which the student participates in an athletic activity.

(e) No individual may coach an athletic activity unless the individual has completed, on an annual basis, the sudden cardiac arrest training course approved by the Department of Education.

(f) A student shall not be allowed to participate in an athletic activity if either of the following is the case:

(1) The student is known to have exhibited syncope or fainting at any time prior to or following an athletic activity and has not been evaluated and cleared for return after exhibiting syncope or fainting; or

(2) The student experiences syncope or fainting while participating in, or immediately following, an athletic activity.

(g) If a student is not allowed to participate in or is removed from participation in an athletic activity under subsection (f) of this section, the student shall not be allowed to return to participation until the student is evaluated and cleared for return in writing by any of the following:

(1) A physician authorized under §30-3-1 et seq. and §30-14-1 et seq. of WV Code;

(2) A certified nurse practitioner, or certified nurse specialist; or

(3) A physician assistant licensed under §30-3E-1 et seq. and §30-14A-1 et seq. of WV Code.

(h) School officials shall work directly with local emergency service providers to integrate the plan into the community's EMS responder protocols, which shall include, at a minimum, the following:

(1) Establishing a cardiac emergency response team;

(2) Activating the team in response to a sudden cardiac arrest;

(3) Implementing automated external defibrillator placement and routine maintenance within the school;

(4) Disseminating the plan throughout the school campus;

(5) Maintaining ongoing staff training in CPR/AED use;

(6) Plan for practicing skills learned;

(7) Integrating local EMS with the plan;

(8) Ongoing and annual review and evaluation of the plan; and

(9) Appropriate automated external defibrillator placement.

(i) The State Board of Education may promulgate a legislative rule pursuant §29A-3B-1 et seq. of WV Code to ensure compliance with this section by county school boards.

(j) A county board of education may accept gifts, grants, and donations, including in-kind donations designated for the purchase of an automatic external defibrillator that meets the standards established by the United States Food and Drug Administration and for the costs incurred to inspect and maintain such device and train staff in the use of such device.

(k) Coaches and any other personnel supervising a youth sports league team that plays or practices on school grounds shall:

- (1) Receive a copy of the cardiac emergency response plan;
- (2) Locate and be aware of the automated external defibrillator placement on the school grounds;
- (3) Maintain ongoing staff training in CPR/AED use; and
- (4) Practice the skills learned.

WV Code 18-5-22e

~~55-7-15, Code of West Virginia~~

WV Code 55-7-15

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55-7-15, Code of West Virginia

WV Code 18-5-22e

Book	Public Comment Period 4/29/26 thru 5/12/26
Section	Volume 18-1 Ready for TAA/Director
Title	Revised Policy - Volume 18, No. 1 - January 2026 - PROMOTION, ACCELERATION, PLACEMENT, AND RETENTION
Code	po5410
Status	
Adopted	May 26, 2015
Last Revised	July 23, 2024

Revised Policy - Volume 18, No. 1 - January 2026

5410 - PROMOTION, ACCELERATION, PLACEMENT, AND RETENTION

The Board of Education recognizes that the personal, social, physical, and educational growth of children will vary and that they should be placed in the educational setting most appropriate to their needs at the various stages of their growth.

A transcript or other credential provided by a public school program, private school program, homeschool program, microschool program, or HOPE scholarship program shall be accepted by the County as a record of a student's previous academic performance for the purposes of placement and credit assignment.

It shall be the policy of the Board that each student be moved forward in a continuous pattern of achievement and growth that is in harmony with his/her own development. The teacher's recommendation relating to whether a student should be promoted to the next grade level shall be a primary consideration when making such determination.

[x] Such pattern shall coincide with the system of grade levels established by this Board and the instructional objectives established for each.

PROMOTION

A student shall be promoted to the succeeding grade level when s/he has:

- A. **(x)** completed the course and State-mandated requirements at the presently assigned grade;
- B. **(x)** in the opinion of the professional staff, achieved the instructional objectives set for the present grade;
- C. **(x)** demonstrated sufficient proficiency to permit him/her to move ahead in the educational program of the next grade;
- D. **(x)** demonstrated the degree of social, emotional, and physical maturation necessary for a successful learning experience in the next grade.

ACCELERATION AND PLACEMENT

[x] A student may be accelerated when his/her demonstrated achievement, as well as measured ability, significantly exceeds that of his/her grade level peers. Consideration may be given to promoting him/her to a grade other than the next succeeding one, or permitting him/her to enroll in a course other than the next one in the academic sequence. A student shall be accelerated in this manner when s/he has:

- A. **(x)** achieved the grade/course objectives and State-mandated requirements, if applicable, for the grade/course in which s/he is presently enrolled as well as for the grades(s)/course(s) that will be skipped;

- B. ☒ in the opinion of the professional staff, achieved the instructional objectives set for the present grade/course as well as the succeeding one(s);
- C. ☒ demonstrated sufficient proficiency to permit him/her to be accelerated in the educational program;
- D. ☒ demonstrated the degree of social, emotional, and physical maturation necessary for a successful learning experience in the grade/course to which s/he shall be promoted or enrolled.

☐ However, following sound principles of child development, the Board discourages the skipping of grades.

RETENTION

A student may be retained at his/her current grade level when s/he has:

- A. ☒ in the opinion of the professional staff, failed to demonstrate proficiency in ☒ mathematics ~~and or~~ reading ☒ ~~and the core subjects of _____~~;
- B. ☒ in the opinion of the professional staff, failed to achieve the instructional objectives set forth at the current grade level that are requisite for success at the succeeding grade level;
- C. ☐ scored at the below **basic level** on any State-mandated proficiency test.

Beginning July 1, 2026, third-grade students who demonstrate a minimal understanding of grade-level English language arts (ELA) or mathematics as indicated on the West Virginia General Summative Assessment (WVGSA) shall upon the recommendation of the classroom teacher, the Student Assistance Team (SAT), and the Individual Education Program (IEP) team (if applicable) be retained for the next school year. "Minimal understanding" is defined as achieving a score in the "does not meet standard" range for ELA, mathematics, or both subjects on the WVGSA. The recommendation for retention will be made based on the student's score on the WVGSA, proficiency with the subject matter, and preparedness for the next grade level. Before recommending a third-grade student for retention, the following eight (8) exemptions outlined in state code must be considered. If an exemption to retention is applicable, parents should be notified that the student scored as having minimal understanding of grade level material, but that retention is not recommended based on the exemption.

- A. **Exemption 1:** A student with disabilities whose IEP indicates participation in the statewide alternative summative assessment.
- B. **Exemption 2:** A student with disabilities who participates in the statewide summative assessment, has an Individual Education Program or Section 504 plan that reflects that the student has received intensive intervention for more than two (2) years (seven [7] continuous benchmark assessment periods) and still demonstrates a deficiency or who was previously retained in any of the grades kindergarten through grade three (3), making this third grade retention the second retention.
- C. **Exemption 3:** A student who is in the process of a special education referral or evaluation for placement in special education, has been diagnosed as having a significant impairment, including dyslexia or dyscalculia, or is a child with a disability if the student's individualized education program team and the student's parent or guardian agree that promotion is appropriate based on the student's Individualized Education Program.
- D. **Exemption 4:** A student identified as an English language learner who has had less than three (3) years instruction in English as a second language.
- E. **Exemption 5:** A student who has received intensive intervention for two (2) or more years, still demonstrates a deficiency, and who was previously retained in any of the grades kindergarten through grade three (3) for a total of two (2) years: Provided, That the student shall continue to receive intensive intervention in grade four (4).
- F. **Exemption 6:** A student who demonstrates an acceptable level of performance on an alternative standardized assessment approved by the State Board (the third grade WVGSA – West Virginia General

Summative Assessment).

- G. **Exemption 7:** A student who attends an extended year learning program following the third grade and has attained proficiency on an alternative standardized assessment approved by the State Board (the third grade WVGSAs – West Virginia General Summative Assessment).
- H. **Exemption 8:** A student may receive a good cause exemption if the parent or guardian submits a request within the deadline set by the County Board, and the Superintendent, or their designee, determines that the exemption is in the student's best interest. The good cause exemption is intended for special circumstances where promotion may be appropriate even when a student has minimal understanding as reflected on the WVGSAs, attended extended year summer learning opportunities, and retook the WVGSAs when provided the second opportunity. However, it is not designed to override a teacher's professional judgment, which will include factors beyond assessment (WVGSAs) scores, such as a student's overall mastery of content, classroom performance, and readiness for the next grade.

Students who are third graders in the 2026-27 school year would require promotion/retention recommendations and decisions prior to the beginning of the 2027-28 school year.

A student may be placed at the next grade level when retention would no longer serve any good purpose.

The Superintendent shall develop administrative guidelines for promotion, acceleration, placement, and retention of students that:

- A. require school personnel to notify parents upon discovery of a student's learning deficiencies, provide updates on the student's progress, and provide strategies to support learning at home;
- B. (x) require the recommendation of the relevant staff members for promotion, acceleration, placement, or retention;
- C. (x) require that parents are informed in advance of the possibility of retention of a student at a grade level;
- D. (x) require that the parent(s) give their consent to the acceleration of their child;
- E. (x) assure that efforts shall be made to remediate the student's difficulties before s/he is retained;
- F. (x) assign to the principal the (x) final responsibility for determining the promotion, acceleration, placement, or retention of each student;
- G. () provide parents the opportunity to request the acceleration, assignment, or retention of their child;
- H. () provide parents the opportunity to appeal the decision about their child's acceleration, assignment, or retention.

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Legal

WV Code 18-5-46

West Virginia Board of Education policy 2510

Cross References

po5111 - ELIGIBILITY OF RESIDENT/NONRESIDENT STUDENTS FOR ENROLLMENT

po5421 - GRADING

po9270 - HOME INSTRUCTION