Bloom-Carroll High School
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Nathan Conrad, Principal
Jan Wisecarver, Jr., Assistant Principal
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Junior ACT Opt-Out Form

Date of ACT Testing: March 10, 2026

Student Information:

Name: _____
Grade Level: 11
Student ID: _____
School: BCHS
Date: _____

Acknowledgement and Consent:

By signing this form, I, the undersigned, acknowledge that I am aware that my child is eligible to take the state-funded ACT test on March 10th, 2026. I understand that by opting out, my child will not participate in the ACT testing on that date, and no alternative testing arrangement will be provided.

I understand that the ACT is used for purposes including college admissions, and scholarship opportunities. Opting out means my child will miss the opportunity to take this test without incurring any cost. Students can register through ACT.org if they decide to take the ACT at a later date. Students opting out of the ACT are required to attend school on March 10th, 2026.

Student Acknowledgement:

I understand the implications of opting out of the state-funded ACT test.

Student Signature: _____ Date: _____

Parent/Guardian Acknowledgement:

I acknowledge that I have discussed this decision with my child and agree to their choice to opt out of the ACT.

Parent/Guardian Signature: _____ Date: _____

Submission Deadline:

This form must be submitted to the high school office by March 1st.

If you have any questions or need further assistance, please contact Mr. Kelley, ACT Coordinator, at Noah.Kelley@BloomCarroll.org