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[Your School Letterhead]
[Date]
[Parent/Guardian Name]
[Address]
[City, State, Zip Code]
Dear [Parent/Guardian Name],
We are excited to inform you that your child, [Child's Name], will
participate in the upcoming NWEA testing. This assessment is designed to
measure your child's academic progress and help us tailor our instruction
to better meet their needs.
**Testing Schedule:**
- **Date(s):** [Insert Dates]
- **Time: ** [Insert Start and End Time]
- **Location:** [Insert Testing Location]
Please ensure your child is prepared by:
- Getting plenty of rest the night before.
- Eating a healthy breakfast on the day of the test.
- Arriving on time, with any necessary materials.
If you have any questions or concerns, please don't hesitate to reach out
to me at [Your Phone Number] or [Your Email Address].
Thank you for your support!
Sincerely,
[Your Name]
[Your Title]
[School Name]
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[Contact Information]