

### Appendix C-4: Human Interpreter for Native Language Student Request Form

The Human Interpreter – Native Language Support is for English Learners. Complete and sign at the end of the document. For students who need Human Interpreter-Visual Communication, please complete Appendix A-4.

|                                     |   |  |
|-------------------------------------|---|--|
| Date:                               |   |  |
| Student Name:                       |   |  |
| Student ID:                         |   |  |
| District:                           |   |  |
| School:                             |   |  |
| Grade:                              |   |  |
| School Contact's Name:              |   |  |
| School Contact's Email:             |   |  |
| Select the appropriate assessments: | <input type="checkbox"/> DeSSA Social Studies<br><input type="checkbox"/> DeSSA Mathematics (both CAT and PT)<br><input type="checkbox"/> DeSSA Science | <input type="checkbox"/> DeSSA- <b>Alt</b> ELA (Alt only)<br><input type="checkbox"/> DeSSA-Alt Math<br><input type="checkbox"/> DeSSA-Alt Science |

|  |   |
|--|---|
| <b>Complete for English Learners</b>   |   |
| The student is literate in the language they will receive interpretation.  | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| Human or electronic interpretation and/or translated materials are provided to the students for instruction and/or assessment.   | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| The student is within the first 3 years of eligibility.<br>Eligibility Date:   | <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| What is the student's proficiency level in English?<br>Provide WIDA ACCESS test scores.<br>(ELs with an ACCESS Composite PL of 3.5 or lower and a Literacy PL of 3.0 or lower may qualify for human interpreter) |   |
| What is the student's <b>primary</b> language?   |   |
| What is the student's <b>secondary</b> language?   |   |
| In which language will the student receive interpretation?   |   |
| Indicate how the native or primary language is used for instructional purposes.  | <input type="checkbox"/> Interpretation support <input type="checkbox"/> Written translation<br><input type="checkbox"/> Print resources <input type="checkbox"/> Electronic resources<br><input type="checkbox"/> Other: _____ |

Signature/Title \_\_\_\_\_ Date \_\_\_\_\_

Name (print) \_\_\_\_\_

Note: This documentation is to be kept in the student's file. This form must be scanned and given to the District Test Coordinator to submit through the DOE Help Desk (KACE). Students may not be administered these supports without written approval from DOE. **Prior to the end of the test window, you will also be required to complete the Human Interpreter Certification Requirements Form for each interpreter (Appendix C-5).**