

**ELL FOCUS Data Entry Form**

<b>Student Name:</b>	<b>Student ID #:</b>	<b>Grade:</b>
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**ELL Screen on FOCUS:**

<b>Home Language Survey Date (Yr. 1 ONLY):</b>		<b>First Basis of Exit:</b> <i>(Only 1 needed)</i>					
<b>English Language Learner:</b> <input type="checkbox"/> K-12 tested or pending [LP] <input type="checkbox"/> LEP in LEP classes [LY] <input type="checkbox"/> Exited - 2 year follow-up [LF] <input type="checkbox"/> LA - Years 3 & 4 follow-up [LA] <input type="checkbox"/> Exited - more than 4 years [LZ] <input type="checkbox"/> Not applicable [ZZ] <input type="checkbox"/> Tested - not eligible [TZ] <input type="checkbox"/> To be tested [TT]		<b>ELL Program Participant:</b> <input type="checkbox"/> English Speakers of Other Languages [E] <input type="checkbox"/> Not applicable [Z] <b>Basis of Entry: (Only fillable year 1)</b> <input type="checkbox"/> Aural/Oral [A] <input type="checkbox"/> ELL (LEP) Committee [L] <input type="checkbox"/> Reading/Writing [R] <input type="checkbox"/> Temporarily placed in a program [T] <input type="checkbox"/> Not applicable [Z]		<input type="checkbox"/> ELL Committee through meeting two of five criteria [L] <input type="checkbox"/> For grades 10-12, qualifying exit scores on the English Language Assessments and a grad req score on G10 FCAT Reading or FSA ELA or concordant score [J] <input type="checkbox"/> For grades 3-10, qualifying exit scores on the English Language Assessments, including an AL of 3+ on FCAT Reading or FSA ELA [I] <input type="checkbox"/> For grades K-2, qualifying exit scores on the English Language Assessments [H]			
<b>Student Plan Date</b> _____ <b>LEP Review Date</b> _____ <b>Re-Evaluation Date</b> <i>(beyond end of year 3)</i> _____		<b>1st Monitor Date</b> <i>(1st report card after exit)</i>	<b>2nd Monitor Date</b> <i>(2nd report card after exit)</i>	<b>3rd Monitor Date</b> <i>(End of 1st school year or 4th report card after exit)</i>	<b>4th Monitor Date</b> <i>(End of 2nd school year after exit)</i>		
<b>ELL Fund Source:</b>		<b>Classification Date</b> <i>(Date of Initial Placement Test)</i>	<b>ELL Exit Date</b> <i>(Date of Initial ELL Exit)</i>	<b>ELL Entry Date</b> <i>(Date of Initial ELL Placement)</i>			
<input type="checkbox"/> Does not receive funds [Z] <input type="checkbox"/> Title III, Part A, LEP & Immigrant Student Funds [E]		<b>Will Student participate in Standardized State Assessments?</b>					
<b>Extension of Instruction:</b>		<b>Native Parent Language</b>	<b>Primary Home Language</b>	<b>Student Language</b>	<b>Date Entered US School (DUESS)</b>		
<input type="checkbox"/> Not applicable [Z] <input type="checkbox"/> Yes [Y]		<b>English Language Learners:</b> <i>(Tier Placement)</i> <input type="checkbox"/> Tier A [A] <input type="checkbox"/> Tier D [D] <input type="checkbox"/> Tier B [B] <input type="checkbox"/> Tier Z [Z] <input type="checkbox"/> Tier C [C]					
<b>Reclassification Date</b> <i>(Only for students re-entering by ELL Committee decision)</i>		<b>Reclassification Exit Date</b> <i>(Only for students re-exiting by ELL Committee decision)</i>					

**Go to the ESE screen in FOCUS:**  
*\*This is for testing purposes only - you are not placing in ESE\**

**\* DOE Test Accommodations Field:**     Other Testing Accommodation (e.g., flexible scheduling, flexible setting) [Y]

**ELL Test Accommodations:** ELL Flex Schedule, ELL Setting, ELL Assisted Language, ELL Approved Dictionary

NGSS EOC Biology     EOC Civics     EOC US History     FCAT/NGSS Science     PERT     EOC Algebra     EOC Geometry

**ELL Information for Testing Information:**

**TEST:**

LAS Links [LLK]     Alternate ACCESS for ELLs [AAE]     WIDA ACCESS for ELLs 2.0 [AFE]     CELLA [CEL]     Dade County Oral Lang. Proficiency Scale [DLD]  
 Idea Oral Language Proficiency Test [IPT]     WIDA Kindergarten ACCESS for ELLs [KAC]     WIDA Screener [WIS]     W-APT Assessment [WPT]

<b>Administration Date</b>	<b>School Year</b>	<b>Form</b>	<b>Test Level</b>	<b>Include in Transcript:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>District Administered:</b>	<b>School Administered:</b> <input type="checkbox"/> 0011 <input type="checkbox"/> 0060 <input type="checkbox"/> 0042 <input type="checkbox"/> 0089 <input type="checkbox"/> 0043 <input type="checkbox"/> 0091 <input type="checkbox"/> 0051 <input type="checkbox"/> other:
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<b>LEP Information:</b>	<b>Test Parts:</b>
<input type="checkbox"/> Entry [1] <input type="checkbox"/> Exit [2] <input type="checkbox"/> Reclassification [3] <input type="checkbox"/> Reclassification Exit [4] <input type="checkbox"/> Annual Progress [5] <input type="checkbox"/> Annual Progress Exit [6] <input type="checkbox"/> Annual Progress Reclassification Exit [7]	<b>Language:</b> <i>(Reading/Writing)</i> <b>L/P Level:</b> <i>(Listening/Speaking)</i>

_____ <i>Data Entry Form Completed By?</i>	_____ <i>Signature/Data Entry Operator &amp; Date Entered</i>
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# SUWANNEE COUNTY SCHOOL DISTRICT



## Distrito Escolar del Condado de Suwannee

English for Speakers of Other Languages (ESOL) Title III English Language Learner (ELL) Program  
Programa de inglés para hablantes de otros idiomas (ESOL)/ Título III estudiantes del idioma inglés (ELL)

### ELL Committee Conference Report

**Student:** \_\_\_\_\_ **Student ID #:** \_\_\_\_\_ **Grade:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Parent Name:** \_\_\_\_\_ **Date Parent Notice Sent:** \_\_\_\_\_

**Date of Meeting:** \_\_\_\_\_ **Members in Attendance:**  Teacher(s)  Administrator/Designee  Guidance Counselor  
 Bilingual Paraprofessional  Parent  Other: \_\_\_\_\_

**Purpose of Meeting:**  Placement  Plan Update/Change  Extension of Services  Committee Exit  
 Post Exit Reclassification  Other: \_\_\_\_\_

The ELL Committee will review the student's academic record holistically, considering assessment results and the criteria below to determine whether the student is English Language Proficient (6A-6.0902). For consideration of Extension of services, a review of the five criteria below and an assessment must be conducted/reviewed annually after the 3rd year. The previous year's ACCESS for ELLs score is acceptable until October 1. After this date the student must be administered the LAS LINKS (LLK) no earlier than 30 days before the ELL Committee meeting.

Assessment:	Assessment Date:	Overall:	Speaking:	Listening:	Reading:	Writing:
<input type="checkbox"/> ACCESS for ELLs						
<input type="checkbox"/> Las Links (LLK)						

**Considerations** (According to F.A.C. 6.0903, for Committee entry, exit or reclassification the Committee shall include each of the criteria below, TWO of which must support the Committee's decision.) **Attach evidence of reviewed criteria.**

- Extent and nature of prior educational or academic experience, social experience, and a student interview.
- Written recommendation and observation by current and previous instructional and support services staff.
- Level of mastery of basic competencies or skills in English and/or heritage language according to state or national criterion-referenced standards, if any.
- Grades from the current or previous years.
- Test results from tests other than Las Links (LLK) and ACCESS for ELLs.

**Meeting Minutes** (If the Committee recommends for ESOL/ELL services to be extended beyond three years, the narrative must include specific strategies that will target the student's English language development. If the Committee recommends entry, exit, or re-classification, the narrative must include specific support for agreed upon placement.)

### ELL Committee Signatures (\*required signatures)

_____	_____	_____
<i>*Administrator/Designee</i>	<i>*ELA (ESOL) Teacher</i>	<i>Paraprofessional</i>
_____	_____	_____
<i>*Guidance Counselor</i>	<i>Parent</i>	<i>Other</i>



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Programa de Inglés para Hablantes de Otros Idiomas (ESOL)/ Título III Estudiantes del Idioma Inglés (ELL)

### Parent Notification of ELL Committee Meeting

Student: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Date: \_\_\_\_\_

Dear Parent/Guardian,

You are invited to attend an English Language Learner (ELL) Committee meeting that has been scheduled to discuss information regarding your child's English language proficiency, academic progress, and educational program placement. It is important for you to attend, to become informed about your child's progress, and participate in important educational decisions for your child. If you are unable to attend, would like to participate by telephone, or would like to reschedule, please contact the school at \_\_\_\_\_.

**Purpose of ELL Committee Meeting:**

Placement  Plan Update/Change  Extension of Services  Committee Exit  Other:

**The meeting is scheduled for:**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

### Notificación de los padres de la reunión del Comité ELL

Estudiante: \_\_\_\_\_ Escuela: \_\_\_\_\_ Grado: \_\_\_\_\_

Fecha: \_\_\_\_\_

Estimados Padres/Tutor,

Usted está invitado a asistir a una reunión del Comité de Aprendizaje de Idioma Inglés (ELL) que ha sido programada hablar de la información sobre el dominio del idioma inglés de su hijo, el progreso académico y la colocación del programa educativo. Es importante que usted asista, se informe sobre el progreso de su hijo y participe en las decisiones educativas importantes para su hijo. Si no puede asistir, le gustaría participar por teléfono, o desea cambiar la fecha, comuníquese con la escuela en la \_\_\_\_\_.

**Propósito de la reunión del Comité de ELL:**

Colocación  Actualización del plan/Cambiar  Extensión de Servicios  Salida del Comité  Otro:

**La reunión está programada para:**

Fecha: \_\_\_\_\_ Hora: \_\_\_\_\_ Lugar: \_\_\_\_\_

Sincerely/Atentamente,

**Invitation By Phone:**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ Caller: \_\_\_\_\_

Parent Will attend: YES NO By Phone Rescheduled for: \_\_\_\_\_



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Programa de Inglés para Hablantes de Otros Idiomas (ESOL)/ Título III Estudiantes del Idioma Inglés (ELL)

### Parent Notification of Program Exit

Student: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Date: \_\_\_\_\_

Dear Parent/Guardian,

Your child has been a participant in our district ESOL/ELL program. According to state and federal law, our school district is required to annually assess the English language proficiency of your child in listening, speaking, reading, and writing. Based on the following criteria, we are pleased to inform you that your child has demonstrated English language proficiency and is no longer eligible for English Language Learner services:

#### Exit Criteria Options:

**Option 1 - Assessment** (check one/ELL Committee Meeting Not Required):

- Basis of Exit for Grades K-2:** ACCESS for ELLs score of 4.0 or higher on Overall and Reading domains.
- Basis of Exit for Grades 3-9:** ACCESS for ELLs score of 4.0 or higher on Overall and Reading domains and a passing score of level 3 on the FSA English Language Arts.
- Basis of Exit for Grades 10-12:** ACCESS for ELLs score of 4.0 or higher on Overall and Reading domains and a passing score of level 3 on the FSA English Language Arts or an equivalent concordant score pursuant to 1008.22, F.S.
- Basis of Exit for Students who took Alternative Assessment and FSAA:** Alternative Assessment score of P1 and passing score on FSAA.

**Option 2 - ELL Committee** (At least 2 of the following 5 criteria must be checked and documented in the student's ESOL folder/ELL Committee Meeting Required/ ACCESS for ELLs results or LLK Screener no earlier than 30 days before Committee decision):

- Extent and nature of prior educational experience and student interview.
- Written observation and recommendation by current and previous instructional and support services staff.
- Level of mastery of basic skills in English and/or heritage language according to state or national criterion-referenced standards, if any.
- Grades from current or previous years.
- Results from assessments other than ACCESS for ELLs or FSA.

Although your child is no longer eligible for ESOL/ELL services, academic achievement will continue to be monitored for two years from the time English language proficiency was attained. If you have any questions about your child's placement or the type of program options available to you, please contact the following person at your child's school:

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Sincerely,



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Programa de Inglés para Hablantes de Otros Idiomas (ESOL)/ Título III Estudiantes del Idioma Inglés (ELL)

### Notificación de Padres de la Salida del Programa ESOL/ELL

Estudiante: \_\_\_\_\_ Escuela: \_\_\_\_\_ Grado: \_\_\_\_\_

Fecha: \_\_\_\_\_

#### Estimados Padres/Tutor,

Su hijo ha participado en nuestro programa ESOL/ELL del distrito. De acuerdo con las leyes estatales y federales, nuestro distrito escolar está requerido a evaluar anualmente el nivel de idioma inglés de su hijo en las áreas de: escuchar, hablar, leer, y escribir. En base en los siguientes criterios, nos complace informarle que su hijo ha demostrado el dominio del idioma inglés y ya no es elegible para los servicios de aprendizaje del idioma inglés:

#### Opciones de criterios de salida:

**Opción 1 - Evaluación** (Marque uno / No se requiere reunión del comité ELL):

- Base de Salida de Grados K-2:** ACCESS para los ELLs con un puntaje de 4.0 o más en Dominios Generales y Lectura.
- Base de Salida de Grados 3-9:** ACCESS para los ELLs con un puntaje de 4.0 o más en Dominios Generales y Lectura y puntaje de aprobación de nivel 3 en FSA Artes del Lenguaje Inglés.
- Base de Salida de los grados 10-12:** ACCESS para los ELLs con un puntaje de 4.0 o más en los Dominios Generales y Lectura puntaje de aprobación de nivel 3 en FSA Artes del lenguaje inglés o un puntaje concordante equivalente de conformidad con 1008.22, FS
- Bases de Salida para Estudiantes que tomaron la Evaluación Alternativa y FSAA:** Puntaje de evaluación alternativa de P1 y puntaje de aprobación en FSAA.

**Opción 2 –Comité ELL** (Por lo menos 2 de los 5 siguientes criterios deben ser revisados y documentados en la carpeta del estudiante ESOL/ Requiere Reunión del Comité ELL/ Resultados de ACCESS para los estudiantes de ELLs o Evaluación de LLK no antes de los 30 días, y antes de la decisión del Comité):

- Extensión y características de la experiencia educativa previa y la revisión de los estudiantes
- Observación escrita y recomendación de personal actual y anterior de servicios de instrucción y apoyo
- Nivel de dominio de las habilidades básicas en inglés y / o idioma del lenguaje tradicional de acuerdo con las normas estatales o nacionales referidos a criterios, si corresponde
- Grados de años actuales o anteriores
- Resultados de evaluaciones distintas de ACCESS para ELL o FSA.

Aunque su hijo ya no es elegible para los servicios de ESOL/ELL, el rendimiento académico continuará siendo monitoreado durante dos años desde el momento en que se logró el dominio del idioma inglés. Si tiene alguna pregunta sobre la ubicación de su hijo o el tipo de opciones de programas disponibles para usted, por favor comuníquese con la siguiente persona en la escuela de su hijo:

**Nombre:** \_\_\_\_\_ **Título:** \_\_\_\_\_ **Teléfono:** \_\_\_\_\_

**Correo electrónico:** \_\_\_\_\_

Atentamente,

**English for Speakers of Other Languages (ESOL)  
Title III English Language Learner (ELL) Program  
Former ELL Student (LF) - 2 Year Follow-Up**

<b>Student Name:</b>	<b>Student ID #:</b>	<b>Exit Date:</b>
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<p><b>First Basis of Exit:</b> <i>(Only 1 needed)</i></p> <p><input type="checkbox"/> ELL Committee - through meeting two of five criteria [L]  <input type="checkbox"/> For grades 10-12, qualifying exit scores on the English Language Assessments and a grad req score on G10 FCAT Reading or FSA ELA or concordant score [J]  <input type="checkbox"/> For grades 3-10, qualifying exit scores on the English Language Assessments, including an AL of 3+ on FCAT Reading or FSA ELA [I]  <input type="checkbox"/> For grades K-2, qualifying exit scores on the English Language Assessments [H]  <input type="checkbox"/> Not applicable [Z]</p>	<p><b>ELL Fund Source:</b> [Z] None of the above  <b>ELL Program Participant:</b> [Z] Not applicable  <b>Extension of Instruction:</b> [Z]  <b>English Language Learner:</b> [LF] Exited 2-year follow-up  <b>English Language Learners: Tier Placement:</b>  [Z] Kindergarten or LF, LA, or LZ</p>
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**Write the TENTATIVE Monitor Dates Below:**  
*Do not record into FOCUS until the monitoring has taken place. Attach report card for monitor date and update monitor date on MIS Update Form for Data Clerk to enter into FOCUS.*

<b>1st Monitor Date</b> <i>(1st report card after exit)</i>	<b>2nd Monitor Date</b> <i>(2nd report card after exit)</i>	<b>3rd Monitor Date</b> <i>(End of 1st school year or 4th report card after exit)</i>	<b>4th Monitor Date</b> <i>(End of 2nd school year after exit)</i>
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**First Monitor Date:** \_\_\_\_\_

Making appropriate progress; continue in regular program  
 Refer to ELL Committee  
 Other (specify): \_\_\_\_\_

Monitor completed by & date: \_\_\_\_\_

DATA entry by & date: \_\_\_\_\_

**Third Monitor Date:** \_\_\_\_\_

Making appropriate progress; continue in regular program  
 Refer to ELL Committee  
 Other (specify): \_\_\_\_\_

Monitor completed by & date: \_\_\_\_\_

DATA entry by & date: \_\_\_\_\_

**Second Monitor Date:** \_\_\_\_\_

Making appropriate progress; continue in regular program  
 Refer to ELL Committee  
 Other (specify): \_\_\_\_\_

Monitor completed by & date: \_\_\_\_\_

DATA entry by & date: \_\_\_\_\_

**Fourth Monitor Date:** \_\_\_\_\_

Making appropriate progress; continue in regular program  
 Refer to ELL Committee  
 Other (specify): \_\_\_\_\_

Monitor completed by & date: \_\_\_\_\_

DATA entry by & date: \_\_\_\_\_

**After Fourth Monitor Date, English Language Learner code should be Exited-2 year ESSA reporting (LA) on the MIS Update Form**