**Parent Notification Letter of Ineligibility for ESOL Services**

|  |  |
| --- | --- |
| Date:  | Student Name:  |
| Grade:  | School:  |

Dear Parent(s)/Guardian(s),

When you registered your student for school, you completed the Home Language Survey and indicated that your child:

* has a first language other than English; and/or
* most frequently speaks a language other than English; and/or
* lives in a home where a language other than English is spoken by adults.

Based on your “yes” answer(s) on the Home Language Survey, we are required by Federal/State regulations (F.A.C. 6A-6.0902) to test your student for proficiency in the English language to determine if he/she qualifies for English for Speakers of Other Languages (ESOL) services.

|  |  |
| --- | --- |
| Listening  |  |
| Speaking |  |
| Reading  |  |
| Writing  |  |
| Composite |  |

**This is to notify you that your student was assessed as “English Proficient” and does not qualify for the ESOL Program based on the following criteria:**

[ ]  Proficient score (27 or above) on the W-APT (Kindergarten)

[ ]  Proficient score (a composite score of 4.0 or higher and a reading score of 4.0 or higher) on the WIDA Screener (Grades 1-12)

[ ]  Other criteria such as:

 [ ]  Extent and nature of prior educational experience, social experience, and a student interview

[ ]  Written recommendations and observations by current and previous instructional

and supportive services personnel

 [ ]  Level of mastery of basic competencies/skills in English and home language according to

 appropriate local, state, and national criterion-referenced standardized tests

[ ]  Grades from current or previous years

For further information, please contact the school at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administrator