Student Last Name		Student First Name		Student Middle Name	
G. I . I			D . E . Higgs		
Student ID			Date Entered US Sch	100l	
Address			Language(s) listed or	n Home Language Survey	
				, ·	
Gender	Date of Birth		Groups Education		
			Education		
		Immigra	nt		
		Refugee			
		Migrant			
Guardian 1 Information					
Last Name First Name					
Home Phone Number Wo		Work Phone	Number	Cell Phone Number	
Guardian 2 Inform	nation				
Last Name		First N	Vame		
Home Phone Numb	oer .	Work Phone I	Number	Cell Phone Number	
Other Contact Info	ormation				
Relationship to Stud	dent				
Last Name First Na			Vame		
Home Phone Number Work Phon		Work Phone I	Number	Cell Phone Number	
Guardian Commu	nication Preferen	ce			
Language Preference		Commu	nication Preference		

Last Grade	Interrupted	Limited	No formal	
Completed	Education	Schooling	Schooling	

^{*}If available, attach past academic data (report cards, standard assessments, etc.)

Initial Screener Language Proficiency Assessment Detail

Grade Level	Screener	Date	Score
Kindergarten	WIDA Screener for Kindergarten		
Grades 1 -12	WIDA Screener Online		

Attach copy of HLS and score report to PSP

Annual Language Proficiency Assessment Detail

Date Test Taken:	Tier:	Composite Resul	lt:
	Listening	Scale Score:	Result:
	Literacy	Scale Score:	Result:
	Reading	Scale Score:	Result:
	Speaking	Scale Score:	Result:
	Writing	Scale Score:	Result:

Assessment Participation and Accommodations (check all that apply)								
Ann	Annual English Language Proficiency Assessment (ACCESS)							
State-Required Assessment and Accountability Program Participation only KSA accountable								
Accommod	ations will	l be provided (che	eck all tha	ıt apply)				
Reader	Scribe	Bilingual/ English Dictionary	Oral Native Language Support		Exten	ded Time	Extended Time Allotment: Time and Half Double Time	
Acco	ommodatio	ons will not be pro	vided					

Date Identified EL	Expected Exit Date	
EL Services (check all that apply)		
Parents waived services or withdrew student	from services	
Content Area Tutoring		
Content-based ESL		
Developmental Bilingual Education		
Dual Language		
Early-Exit Bilingual Education		
English Literacy Development		
Heritage Language		
Newcomer Program		
Pull-Out ESL/Resource		
Sheltered English Instruction		
Structured English Immersion		
Transitional Bilingual Education		
Two-Way Immersion		
Comments		
Program Exit Date		
Expected Date of Graduation (grades 9-12 only)		

Adapted Materials/Technology	Adapt Pace of Instruction
Assistive Technology	Bilingual or English Dictionary
Bilingual or English Glossary	Build Background Knowledge
Engage in Academic Conversations	Extended Time
Interaction Opportunities	Link Instruction to Prior Learning
Meta-Cognitive Strategies	Model Language/Task Completion
Oral Native Language Support	Prompting/Cueing
Provide Content Objectives	Provide Visuals/Organizers
Provide Language Objectives	Reader
Read Text in Primary Language	Scaffold Responses
Scribe Response	Simplified Language
Small Group/Single Form Test	Use Computer/Software
Use Spellcheck	Read Text in English

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Parents Right to opt Out: As EL parent(s) I understand I have the right under Title VI and the Equal Educational Opportunities Act (EEOA) to decline or opt my child out of the school district's program for ELs or out of language services within the program. If I decline services, my child is still required to take the ACCESS each year.

PARENT NOTIFICATION

Parent notification must be provided no later than **30 calendar days** after the beginning of the school year or within the first two weeks of placement in EL program if enrolled after the start of the school year. (ESEA Section 1112(e)(3)(A), 1112(e)(3)(B)).

Signatures and	dates of persons i	involved in	the develo	opment of the	Program Service Pla	an:
Name	S	Signature		Title	Da	te