|  |
| --- |
| **Post-Exit EL Monitoring Form (Elementary)** |
|  |  |  |
|  | *Pages 1 and 4 to be completed by the appropriate EL Education staff* |  |
|  |
| **Student Name** |  | Monitoring Year (circle):**1 2 3 4**  |
| **Grade**  |  | **Academic Year** |  |
| **Name of Classroom teacher 1st year monitoring** |  | *The classroom teacher is responsible for completing this form at quarterly intervals and returning it to the EL/Bilingual Education teacher for review.*  |
| **Name of Classroom teacher 2nd year of monitoring** |  |
| **Name of Classroom teacher 3rd year of monitoring** |  |
| **Name of Classroom teacher 4th year monitoring** |  |
| **Name of EL teacher** |  | *The EL teacher is responsible for reviewing this form each time that it is completed by the classroom teacher.*  |
| **EL Coordinator** (Responsible for ensuring that this form is completed each quarter and maintained in the student’s academic record) |  |
|  |
| **Exiting ACCESS for ELLs® Results:** |
| **Composite** | **Listening** | **Speaking** | **Reading** | **Writing** | **Literacy** | **Comprehension** | **Oral Language** |
|  |  |  |  |  |  |  |  |
|  |  |
| **WY-TOPP Results (Below basic, Basic, Proficient, Advanced):** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Plan** | **Explore** | **Compass** | **ACT** |
|  |  |  |  |

 |
| **Reading** | **Mathematics** | **Writing** |
|  |  |  |

|  |  |  |
| --- | --- | --- |
| **Is the student receiving any special services?** *(any academic services/programs in addition to the standard academic program)* | **NO** | **YES** |
| If so, describe the services: |  |  |

|  |
| --- |
| **Report Card Results:** |
|  | **1st**  | Comments | **2nd**  | Comments | **3rd**  | Comments | **4th**  | Comments |
| **ELA** |  |  |  |  |  |  |  |  |
| **Math** |  |  |  |  |  |  |  |  |
| **Science** |  |  |  |  |  |  |  |  |
| **Social Studies** |  |  |  |  |  |  |  |  |
| Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Monitoring Year (circle): **1 2 3 4**  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Language Arts** | Teacher’sInitials: | 1st\_\_\_\_\_\_ | 2nd\_\_\_\_\_\_ | 3rd\_\_\_\_\_ | 4th\_\_\_\_\_\_ |  |  |
| Quarter |
| **Rate the student’s performance in each of the following areas** (*1 = never 2 = seldom 3 = sometimes 4 = often 5 = always*) |  | 1st | 2nd | 3rd | 4th |
| 1. The student completes assignments on-time. - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student communicates effectively with teacher. - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student participates effectively in class projects.- - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student participates effectively in class discussions. - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student is able to work independently. - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student attends class regularly. - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student displays effort and enthusiasm in class. - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student requires additional assistance with assignments. - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student shows evidence of difficulty with language. - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student has discipline problems that interfere with his/her academic progress. - - - - - - - - - - - - -
 |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | 1st | 2nd | 3rd | 4th |
| Have EL strategies been implemented to respond to the language needs of the former EL? | **Y N**  | **Y N**  | **Y N**  | **Y N**  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you recommend that this student be considered for reclassification as an EL?  | **Y N**  | **Y N**  | **Y N**  | **Y N**  |

|  |
| --- |
| *If you have additional comments, attach them to this form when you return it into the EL teacher. Make sure you identify which monitoring year and quarter you are commenting on.* |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Mathematics** | Teacher’sInitials: | 1st\_\_\_\_\_\_ | 2nd\_\_\_\_\_\_ | 3rd\_\_\_\_\_ | 4th\_\_\_\_\_\_ |  |  |
| Quarter |
| **Rate the student’s performance in each of the following areas** (*1 = never 2 = seldom 3 = sometimes 4 = often 5 = always*) |  | 1st | 2nd | 3rd | 4th |
| 1. The student completes assignments on-time. - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student communicates effectively with teacher. - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student participates effectively in class projects.- - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student participates effectively in class discussions. - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student is able to work independently. - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student attends class regularly. - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student displays effort and enthusiasm in class. - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student requires additional assistance with assignments. - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student shows evidence of difficulty with language. - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student has discipline problems that interfere with his/her academic progress. - - - - - - - - - - - - -
 |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | 1st | 2nd | 3rd | 4th |
| Have EL strategies been implemented to respond to the language needs of the former EL? | **Y N**  | **Y N**  | **Y N**  | **Y N**  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you recommend that this student be considered for reclassification as an EL?  | **Y N**  | **Y N**  | **Y N**  | **Y N**  |

|  |
| --- |
| *If you have additional comments, attach them to this form when you return it into the EL teacher. Make sure you identify which monitoring year and quarter you are commenting on.* |
| Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Monitoring Year (circle): **1 2 3 4**  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Science** | Teacher’sInitials: | 1st\_\_\_\_\_\_ | 2nd\_\_\_\_\_\_ | 3rd\_\_\_\_\_ | 4th\_\_\_\_\_\_ |  |  |
| Quarter |
| **Rate the student’s performance in each of the following areas** (*1 = never 2 = seldom 3 = sometimes 4 = often 5 = always*) |  | 1st | 2nd | 3rd | 4th |
| 1. The student completes assignments on-time. - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student communicates effectively with teacher. - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student participates effectively in class projects.- - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student participates effectively in class discussions. - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student is able to work independently. - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student attends class regularly. - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student displays effort and enthusiasm in class. - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student requires additional assistance with assignments. - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student shows evidence of difficulty with language. - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student has discipline problems that interfere with his/her academic progress. - - - - - - - - - - - - -
 |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | 1st | 2nd | 3rd | 4th |
| Have EL strategies been implemented to respond to the language needs of the former EL? | **Y N**  | **Y N**  | **Y N**  | **Y N**  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you recommend that this student be considered for reclassification as an EL?  | **Y N**  | **Y N**  | **Y N**  | **Y N**  |

|  |
| --- |
| *If you have additional comments, attach them to this form when you return it into the ESL teacher. Make sure you identify which monitoring year and quarter you are commenting on.* |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Social Studies** | Teacher’sInitials: | 1st\_\_\_\_\_\_ | 2nd\_\_\_\_\_\_ | 3rd\_\_\_\_\_ | 4th\_\_\_\_\_\_ |  |  |
| Quarter |
| **Rate the student’s performance in each of the following areas** (*1 = never 2 = seldom 3 = sometimes 4 = often 5 = always*) |  | 1st | 2nd | 3rd | 4th |
| 1. The student completes assignments on-time. - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student communicates effectively with teacher. - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student participates effectively in class projects.- - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student participates effectively in class discussions. - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student is able to work independently. - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student attends class regularly. - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student displays effort and enthusiasm in class. - - - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student requires additional assistance with assignments. - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student shows evidence of difficulty with language. - - - - - - - - - - - - - - - - - - - - - - - - -
 |  |  |  |  |
| 1. The student has discipline problems that interfere with his/her academic progress. - - - - - - - - - - - - -
 |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | 1st | 2nd | 3rd | 4th |
| Have EL strategies been implemented to respond to the language needs of the former EL? | **Y N**  | **Y N**  | **Y N**  | **Y N**  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Do you recommend that this student be considered for reclassification as an EL?  | **Y N**  | **Y N**  | **Y N**  | **Y N**  |

|  |
| --- |
| *If you have additional comments, attach them to this form when you return it into the EL teacher. Make sure you identify which monitoring year and quarter you are commenting on.* |

|  |
| --- |
| Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Monitoring Year (circle): **1 2 3 4**  |

|  |
| --- |
| ***To be completed by appropriate EL staff*** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| I received and reviewed this completed form. | 1st  | 2nd  | 3rd  | 4th  |
| \_\_\_\_\_\_\_\_\_\_(Initial) | \_\_\_\_\_\_\_\_\_\_(Initial) | \_\_\_\_\_\_\_\_\_\_(Initial) | \_\_\_\_\_\_\_\_\_\_(Initial) |

***Complete the following items only if the information on this form indicates that the former EL is struggling:***

|  |
| --- |
| **I have collaborated with the classroom teacher to incorporate instructional strategies to respond to the language needs of the former EL.** *(if the answer is “Yes”, describe the collaboration in the comments section)* |
| **1st** | **Yes No** | *Comments:*  |
| **2nd** | **Yes No** | *Comments:* |
| **3rd** | **Yes No** | *Comments:* |
| **4th** | **Yes No** | *Comments:* |  |  |  |

***NOTE:*** *A student may not be recommended for reclassification if collaboration between the EL and classroom teacher has not taken place.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | 1st | 2nd | 3rd | 4th |
| I recommend that this student be reclassified as an EL. | **YES NO** | **YES NO** | **YES NO** | **YES NO** |

|  |
| --- |
| Additional Recommendation(s):  |

|  |  |  |
| --- | --- | --- |
| If a recommendation is made to reclassify, have the parents been notified?  | **YES** | **NO** |