English

English Learner Program Exit Letter

Havre Public Schools

English Learner Program Exit Letter

Student Name:_____ Date: _____
(mm/dd/yyyy)

School: _____

Dear Parent or Guardian:

A recent English proficiency test showed significant improvement in your child's ability to read, write, speak and listen in English. Proficiency in a language is a measure of a person's ability to understand and communicate in that language or in a person's preferred mode of communication. Your child was tested with the following state and district test(s):

- ❑ ACCESS 2.0 for ELLs
- ❑ ELPA21 Summative
- ❑ Other Assessment: _____ *(Test used to measure level of English proficiency)*

Your child's English language proficiency has improved. As a result, your child will no longer participate in the school district's English Learner Services provided by Title I, Title III, or both.

Your child will:

- ❑ Continue to attend: _____ *(name of school)*
- ❑ Be transferred to: _____ Beginning: _____
(name of school) (mm/dd/yyyy)

Thank you for your help as your child exits English Learner Services. If you have any questions or concerns, please call your child's school or teacher. Your child's academic progress will be tracked for at least four years to ensure that he or she is succeeding academically.

Sincerely,

Lisa Passon	Testing Coordinator
Name	Title
406-395-8550	passonl@blueponyk12.com
Phone	Email

Parent or Guardian: Please complete the section below and return the <u>entire</u> form to your child's school.

I agree with the plan to exit _____ *(student name)* from English Learner Services. I understand that my child will now receive an education without English Learner supports.

Parent or Guardian Signature:_____ Date: _____
(mm/dd/yyyy)

Parent or Guardian Name:_____

Phone: _____ Email: _____

OFFICE USE ONLY				
Student ID #	Dist. Student #	Grade Level	Student Name	Faculty Name
Faculty #	Birthdate	Home Phone	Home Language	First Date Student Attended School in the U.S.

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