English

Decision to Place Child back into English Learner Program or Services

Havre Public Schools

Decision to Place Child back into English Learner Program or Services

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

School: _____

Dear Parent or Guardian:

You informed your child's school on _____ *(mm/dd/yyyy)* of your desire to refuse the English Learner program or services provided by Title I, Title III, or both.

We understand that you would like to change that decision and would now like to have your child placed back into the English learner program or services provided. The English learner services we provide are designed to help your child become proficient in English and succeed in school. 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.

The method of instruction used in your child's English Learner Services provided by Title I, Title III, or both is:

- ❑ **Bilingual*, including Dual Language, Two-Way Immersion, Transitional Bilingual, and Developmental Bilingual programs*:** Instruction is provided in both English and your child's home language.
- ❑ **Heritage Language:** Instruction is provided in a native, home, or ancestral language that is also used to help your child become proficient in English.
- ❑ **Content-based English Learner Program, English as a Second Language (ESL), or Sheltered English, *including Sheltered English Instruction, Structured English Immersion, and Specially designed academic instruction delivered in English*:** Instruction is provided in English only and adapted to the student's English proficiency level. This instructional method is used to make academic instruction in English understandable to English learners. This will help them acquire proficiency in English while at the same time achieving in content areas.
- ❑ **Pull-out English Learner or ESL:** Students leave their English-only classroom during the day for English learner or ESL instruction.
- ❑ **Other:** _____

Additional information about the English learner programs marked above is attached.

- ❑ Please place my child back into all of the English learner programs and services offered to my child.
- ❑ Please place my child back into some of the English learner programs or services offered to my child. Please place my child in the following program: _____

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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