



Language Reclassification Analysis & Results 2019-2020

Part I. Student Identified for Reclassification Review

First Name	Middle Name	Last Name
Date of Birth	Grade	School
Date of Entry in US Schools	EL = 4 years or < in US AR-LTEL = 5 years in US LTEL = 6 or more years in US	
	Circle 1: EL	AR-LTEL LTEL

Part II. Reclassification Criterion

Criteria	Criterion	Scores/Evidence and Date
English Language Proficiency (ELPAC)	<u>Overall</u> ELPAC score of Well Developed (PL 4) - Spring 2019 Overall ELPAC score of Well Developed/Moderately Developed (4 or 3+) - Spring 2018 Overall CELDT score of 4 or 5 - Spring 2017	2018-19 Overall: _____ 2017-18 Overall: _____ 2016-17 Overall: _____
Standardized Testing	Gr. TK–3 rd : 70% or better average on district writing assessments. Gr. 4 th -12 th : Score of Standard Met (SM) or Standard Exceeded (SE) OR a score of Standard Nearly Met (NM) with average of 70% on CVUSD Writing Assessments. Gr. 10 th -12 th : SRI Reading Inventory (if no CAASPP scores available)	Writing Average Score: _____ Score #1: _____ Date: _____ Score #1: _____ Date: _____ CAASPP Score: _____ Date: _____ SRI Reading Inventory Score: _____ Date: _____
ELA Report Card Grades	<u>Gr. TK– 6th: 2, 3, or 4 for two consecutive trimesters</u> <u>Gr. 7th-12th: C, B or A for two consecutive semesters</u>	ELA report card grades: #1 _____ #2 _____
Parent Notification	<i>Parent Consultation & Initial Notification</i> form completed, signed, and attached, if returned. ELSA telephones parent/guardian about right to attend LAT meeting and indicates date of call.	Date Notificationsent: _____ Form Returned? YES (attached) NO Phone Call Notification of LAT Meeting: Date: _____
Parent Attendance	Verify parent in attendance for LAT meeting to discuss reclassification criteria and evidence	Parent attended LAT? YES NO
ELD Teacher Input	Teacher Recommendation: based on overall student performance and teacher's observation	<u>Recommend reclassification?</u> YES NO ELD Teacher's name: _____

Part III. Language Appraisal Team Recommendation

- Reclassify
- Do not reclassify student because (reason):

_____ Signature	_____ ELD Teacher	_____ Date
_____ Signature	_____ ELA Teacher	_____ Date
_____ Signature	_____ Special Ed. Lead	_____ Date
_____ Signature	_____ Migrant Ed. Liaison	_____ Date
_____ Signature	_____ EL TOSA	_____ Date
_____ Signature	_____ EL Mentor	_____ Date
_____ Signature	_____ ELSA	_____ Date
_____ Principal's Signature		_____ Date

Part IV: Parental Notification of Reclassification Results

The *Parental Notification of Reclassification Results* letter must be sent home within three days of the LAT meeting.

Date sent to parent/guardian: _____

Date returned to ELSA: _____