

**PROGRAMS FOR LIMITED ENGLISH PROFICIENCY/
LANGUAGE MINORITY STUDENTS**
(Parental Notification for Children Identified as Limited English Proficient)

Your child, _____, has been identified as needing additional instruction to achieve English proficiency. The basis for this identification is _____

_____.

Using *(list assessment instruments and methods here)* _____

your child was identified at *(describe level of proficiency)* _____.

Additionally, your child's current academic achievement is *(describe GPA, standardized test scores, reading level, etc.)* _____

_____.

The Clinton School District #124 uses the following method(s) of language instruction *(list and explain the methods offered and how they compare with each other)* _____

_____.

We have chosen to place your child in a program using a _____ method. We believe this is the best method for improving your child's English proficiency because _____

_____.

Further, this/those method(s) will benefit your child academically and will help your child achieve at an age-appropriate level because/by _____

_____.

Your child will be exited from this program upon *(state exit criteria such as test scores, reading level, verbal ability, etc.)* _____

_____.

FILE: IGBH-AF2
Critical

We anticipate that your child will transition from this course of study by (*describe anticipated time line*) _____.

You have the right to remove your child from the program.

You have the right to choose among the various programs offered by the district. (*Only include if more than one (1) option is available.*)

You have the right to assistance by a district representative. The district representative will assist you in choosing a program and monitoring your child's progress within the program.

(*If child is also on an IEP*) This program will assist your child in meeting the following IEP objectives (*list objective and way in which the program will assist in meeting that objective*) _____

_____.

If you should have questions or require other assistance contact (*name, building location and other contact information*) _____
_____.

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Note: The reader is encouraged to review policies and/or procedures for related information in this administrative area.

Implemented: 02/18/2004

Clinton School District #124, Clinton, Missouri