*<INSERT DISTRICT OR SCHOOL INFORMATION & LOGO>*

Initial Eligibility for Supplemental Language Support

**SAMPLE PARENT NOTIFICATION LETTER**: This letter is offered by the New Hampshire Department of Education as a form of Technical Assistance to the Local Educational Agencies (LEAs) we support. LEAs may choose to customize this letter to align with local programming. We strongly recommend that LEAs: date the letter, obtain signatures, and retain a signed copy in the student’s cumulative file.

This sample includes the minimum standards required under *ESEA* §1112(e)(3) and (e)(4), 20 USC 6312 (2015) to meet compliance requirements for parent notification. The parent notification letter must be provided to the parents of all EL students within 30 calendar days at the beginning of the school year or within 14 calendar days after the beginning of the school year.

Name of Student: Date:

(mm/dd/yyyy)

School: Grade:

Dear Parent or Guardian:

When you registered your child for school you were asked to complete a Home Language Survey form. On that form you indicated that a language other than English is spoken in your home. Based on this information, the school gave your child a test to measure academic English Language Proficiency (ELP). The purpose of the test is to determine an ELP level for multilingual students to ensure that language is not a barrier in accessing grade-level academic content.

The ELP assessment used in New Hampshire is the WIDA Screener. As you know, language development is an on-going process for all. The ELP Screener measures where your child is in the English language development process. Full Performance Definitions for each level of English language proficiency are included as an attachment to this letter for your reference.

Your child earned an overall composite score of \_\_\_\_\_\_\_\_\_\_\_\_\_ on a scale of 1-6. You can find more details on the attached score report.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1-Entering | 2-Beginning | 3-Developing | 4-Expanding | 5-Bridging | 6-Reaching |

In New Hampshire, any child who obtains an overall composite score of **4.4 or below** is identified as an “English learner” (EL). Federal law requires public schools to offer a supplemental Language Instruction Educational Program (LIEP) or “EL program” for all eligible English learners. Based on your child’s ELP test results, **your child is eligible for these services**.

As a parent/guardian, your input is critical in the decision-making process. You have the legal right to choose an EL program among those offered by the school or district or to decline those services. Below you will find an overview of the EL program types available to your student.

|  |  |  |
| --- | --- | --- |
| **English Language Development**: Direct English language instruction focused on developing academic vocabulary. Instruction may happen within the classroom as “push-in” support or students may be “pulled out” of the classroom for small group or 1:1 instruction that targets specific language goals.  **Content Classes with Integrated EL**: The EL and classroom teachers collaborate to use academic content as a means to support language development within the classroom.  **Structured English Immersion or Newcomer Program (SEI)**: Programs designed to meet the academic and transitional needs of newly arrived immigrants or for Students with Limited or Interrupted Formal Education (SLIFE). Typically, students attend these self-contained programs before they enter other types of EL programs. Often build foundational skills in content areas, as well as instruction to familiarize newcomers with American culture and educational settings.  **Transitional Bilingual**: Program where content instruction is initially provided in English and the heritage language of the student. Bilingual programs are permitted with prior approval from the NH State Board of Education.  **Dual Language**: A bilingual instructional program with goal to support students as they develop language proficiency in two languages. Students receive instruction in English and another language in a classroom that is usually half primary-English speakers and half primary speakers of the other target language. Bilingual programs are permitted with prior approval from the NH State Board of Education. | | |
| **Our team proposes to support your child’s English development with the LIEP or EL program indicated below. Program placement may change based on your child’s progress. The school will notify you of any changes.** | | |
| EL Program in District | Proposed Placement |  |
|  |  | English Language Development  Pull-out Push-In  Combo |
|  |  | Content Classes with Integrated EL Support |
|  |  | Structured English Immersion or Newcomer |
|  |  | Transitional Bilingual |
|  |  | Dual Language |
|  |  | Other: |

Please note, federal law requires ALL EL students take an annual English language proficiency assessment to measure student progress in developing English proficiency. In NH, proficiency is met when students earn an overall composite score of 4.5 or higher on the WIDA ACCESS or a P2 on the Alternate ACCESS test.

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***Parent or Guardian: Please complete this section and return the entire form to your child’s school. A final copy will***

***be kept on file at the school and a copy will be sent home for your records as well.***

Please initial:

|  |  |
| --- | --- |
|  | I am aware of my child’s English language proficiency scores and understand why my child was recommended for additional language instruction. |
|  | I am familiar with the EL programs the school has available. |
|  | I understand that my child will still be required to take the annual English proficiency assessment (i.e., the “ACCESS” test), even if I decline EL services. |
|  | I understand that I can change my decision at any point in the school year. |
|  | This information has been presented to me in a language I fully understand. |

**Yes**, I want my child to participate in the EL program indicated above for the \_\_\_\_\_\_\_\_\_\_\_ school year.

**No**, I do not want my child to participate in the English learner program for the \_\_\_\_\_\_\_\_\_\_\_ school year.

Name of Parent or Guardian: Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:

Please contact the teacher below, if you have any questions.

<INSERT CONTACT INFORMATION>