

**Two-Year Monitoring Documentation for ELP Student English
Speaker of Other Languages (ESOL) Program**

Sanford School Department

Student's Name _____ **Date Completed** _____

Current Grade _____ **Current School** _____ **Year of Monitoring:** ☐ One ☐ Two

This form completed by _____

Circle: Classroom teacher - Homeroom teacher - Learning Community - Other _____

Please indicate the student's performance in each of the following areas:

Does/Is the student:	1. Rarely	2. Sometimes	3. Usually	4. Often	5. Consistently
1. Able to communicate clearly?					
2. Understand classroom discussions without difficulty?					
3. Demonstrate comprehension of stories read aloud, content information, and oral presentations?					
4. Contribute to classroom discussions?					
5. Interact satisfactorily with other students in the classroom?					
6. Able to read, understand, and use content vocabulary (appropriate to grade level)?					
7. Read and understand grade level material in a variety of genres and content areas?					
8. Learning content subject material at a level comparable to peers?					
9. Demonstrate content knowledge by writing sentences and paragraphs (appropriate to grade level)?					
10. Able to write a variety of genres – narrative, persuasive/opinion, information/explanatory (appropriate to grade level)?					
11. Able to work independently?					
12. Complete assignments satisfactorily?					
13. Show evidence of academic problems due to language difficulty?					
14. Show evidence of academic problems due to acculturation process?					

If you scaled items one through thirteen with a 1 or 2, OR scaled items fourteen and fifteen with a 4 or 5, explain what strategies/interventions have been implemented to meet the needs of this student.

Name of Student _____ Year of Monitoring: ☐ One ☐ Two

ASSESSMENT SUMMARY – Grades and test scores can be viewed on Infinite Campus

ACCESS subtest results which enabled student to exit ESOL program with composite 4.5:

Listening: _____ Reading: _____ Speaking: _____ Writing: _____

This section needs to be completed by the ESOL teacher if he/she works with the student (direct instruction).

Name of ESOL teacher _____ Date _____

Student was seen:

☐ One-on-one ☐ Small Group ☐ Classroom ☐ Monitor ☐ Other _____

_____ times/week

_____ min. /hour per session

ESOL Teacher Observations/Interventions

Student Self-Reflection

Date completed_____

Name of Student_____

Year of Monitoring: One Tw

Parent Input