Bilingual-Bicultural Education/ English Language Learner Programs
(Parental Notification for Children Identified as English Language Learners)

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 Sitka School District 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:

_____________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________

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.) ______________________________________________________
_____________________________________________________________________________________________________________________

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

_____________________________________________________________________________________________________________________

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

You have the right to choose among the various program offered by the District.  
(Only include if more than one 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 the child is also on an IEP) This program will assist you child in meeting the following IEP objectives (list objective and the way in which the program will assist in meeting that objective) ________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

If you should have questions or require other assistance, contact:

   a. Name:  _______________________________________________________________________

   b. Building Location:  _______________________________________________________________________

   c. Other Contact Information:  _______________________________________________________________________

   

SITKA SCHOOL DISTRICT
Implementation Date:  October 10, 2003