



DISTRICT SCHOOL BOARD OF PASCO COUNTY
ENGLISH FOR SPEAKERS OF OTHER LANGUAGES (ESOL)
NOTIFICATION OF PROGRAM INELIGIBILITY

MIS Form #583
10/12

To the Parent/Guardian of _____ Student I.D. # _____

School _____ Grade _____ Notification Date _____

When you registered your child for school, you filled out the Home Language Survey and indicated that a language other than English is spoken in the home. All available assessment data have been received to determine your child's eligibility for the school district's English for Speakers of Other Languages (ESOL) program services. Based on the criteria checked below, your student is not eligible for ESOL services.

- 1. Score on Aural/Oral Language Proficiency Test (CELLA Online)
 - Beginning
 - Low Intermediate
 - High Intermediate
 - Proficient

- 2. Norm-referenced test scores in reading and writing (Grades 3-12)
 - Beginning
 - Low Intermediate
 - High Intermediate
 - Proficient

- 3. Recommendation of ELL Committee based on other criteria such as
 - Prior educational and social experiences
 - Written recommendations and observations by current and previous instructional and supportive service staff
 - Level of mastery of basic competencies or skills in English and home language according to appropriate local, state, and national tests
 - Grades from current or previous years
 - Test results other than those indicated in #1 and #2

If you have questions concerning your child's ineligibility for the ESOL program, please contact your child's school to schedule a conference.

_____ ESOL Resource Teacher ELL Chairperson

_____ Phone Number

_____ Principal (or designee)