

# **ENGLISH AS A SECOND LANGUAGE HANDBOOK**

23 Pennsylvania Avenue, Newark, New Jersey

### **English as a Second Language Handbook**

Link Community Charter School (LCCS) offers English as a Second Language (ESL) to students in kindergarten through grade 8 whose primary language is not English, as well as to learners who are still developing proficiency in the English language. Student eligibility is determined through the administration of the New Jersey approved WIDA screener, and individual progress of English Language Learners (ELL) is monitored through the administration of the annual ACCESS for ELL 2.0 standardized test. Students enrolled in the program receive supplemental instruction exclusively in English through a proficiency-based approach, and develop linguistic concepts, as well as the academic language necessary across content areas.

The identification of students eligible for ESL is done upon enrollment with the Home Language Survey and a records review process. Students identified as having a second/multiple languages are then assessed through the WIDA screener assessment. This identification process helps the ESL teacher(s) identify students who are at risk for not meeting grade-level learning goals. A composite score of 4.0 and below indicate language services are needed. A score of 4.5 and higher means proficiency in the English language is attained. Exit from ELL status is based on the proficiency assessment and observation.

For ELL identification, parents/guardians must be notified in writing in English and in the language in which they possess a primary speaking ability, within 30 days of the beginning of the school year or 14 days from the time of identification for mid-year enrollees.

Relevant Documents to be attached in Appendix.

#### APPENDIX

Home Language Survey, English

Home Language Survey, Spanish

ESL Entitlement Letter, Initial Entry to English Language Development Instruction

ESL Initial Entry, Demonstrating English Language Proficiency (Non-Entitled)

ESL Placement for English Language Development Instruction

Parent/Guardian Waiver to Opt A child Out of ELL Program



#### **HOME LANGUAGE SURVEY**

The Home Language Survey must be completed as part of the enrollment process in compliance with state and federal mandates related to the Bilingual/ELL Program. Once the form is completed, the information will be entered into your child's record file in PowerSchool, our student database.

| Student Name   |                         |          |                            | _ Grade     |                                |
|--|-------------------------|----------|----------------------------|-------------|--------------------------------|
| Student Date of Birth  | Age                     | Plac     | ce of Birth                |             |                                |
| 1. What language(s) are spoken at  | : home?                 | С        | English<br>heck if "Yes."  |             | r languages<br>at home.        |
| 2. What language(s) did your child   | first speak?            |          | English<br>Check if "Yes." |             | ther languages<br>ken at home. |
| 3. What language(s) does your chi use when speaking with siblings outside of the home? |                         |          | English<br>Check if "Yes." |             | ther languages<br>ken at home. |
| 4. If your child is new to Link this y   | vear, what school did   | he/she   | attend previousl           | y?          |                                |
| 5. In your child's previous school(s student)?   | s), was your child ever | r identi | fied as an English         | Language Le | earner (ELL/ESL                |
|  | Yes □                   | No [     |                            |             |                                |
| 6. When did your child enter the l   | J.S.?                   | D        | ay                         | Year        |                                |
| 7. When did your child first attend  |                         | Month    | Da                         | пу          | Year                           |
| Parent/Guardian Name (Printed) _   |                         |          |                            |             |                                |
| Phone  | E                       | Email A  | ddress                     |             |                                |
| Parent/Guardian Signature  |                         |          |                            | Da          | te                             |



# **ENCUESTA DE IDIOMAS DEL HOGAR**

La encuesta sobre el idioma del hogar debe completarse como parte del proceso de inscripción de acuerdo con los mandatos estatales y federales relacionados con el Programa Bilingüe / ELL. Una vez que se complete el formulario, la información se ingresará en el archivo de registro del estudiante en PowerSchool, nuestra base de datos de estudiantes.

| Nombre del Estudiante   | Gı                    | Grado                                      |  |  |
|---|-----------------------|--|--|--|
| Fecha de Nacimiento Edad Lug  | gar de Nacimiento     |  |  |  |
| 1. ¿Qué idioma(s) se habla(n) en casa?  | Ingles<br>Marque "Si" | Lista de otros idiomas<br>hablado en casa. |  |  |
|   |                       |  |  |  |
| 2. ¿Qué idioma(s) habló su hijo(a) por primera vez?   | Ingles<br>Marque "Si" | Lista de otros idiomas<br>hablado en casa. |  |  |
|   |                       |  |  |  |
| 3. ¿Qué idioma(s) usa su hijo(a) con más frecuencia cuando habla con hermanos, amigos u otras personas fuera del hogar?     | Ingles<br>Marque "Si" | Lista de otros idiomas<br>hablado en casa. |  |  |
| 4. Si su hijo(a) es nuevo en Link este año, ¿a qué escuela as   | istió anteriormente?  |  |  |  |
| 5. ¿Se ha mudado su hijo(a) recientemente de otro distrito identificado como un aprendiz del idioma inglés? Sí $\square$ No | ·                     | ónoma donde fue                            |  |  |
| 6. ¿Cuándo entró su hijo(a) a los Estados Unidos de Améric  | a?/                   |  |  |  |
| 7. ¿Cuándo asistió su hijo(a) a la escuela por primera vez el   |                       | de América?/<br>mes día año                |  |  |
| Nombre del Padre/Tutor (Impreso)  |                       |  |  |  |
| Número de teléfono  |                       |  |  |  |
| Firma del Padre/Tutor   | Fecha                 | 1  |  |  |



#### ENTITLEMENT LETTER: INITIAL ENTRY TO ENGLISH LANGUAGE DEVELOPMENT INSTRUCTION

| Date:  |   |
|--|---|
| Dear Parent/Guardian of,   |   |
| Your child is entitled to receive English language development (ELD) instructi<br>School (Link), in addition to core academic instruction based on his/her home<br>assessed level of English language proficiency (ELP). Link values the learning th<br>students in the families' preferred language(s). This letter includes information<br>the ELD instructional model recommended for your child.   | language, as well as his/her recently at takes place in the homes of all our  |
| MY CHILD IS AN ENGLISH LANGUAGE LEARNER. WHAT DOES THIS MEAN? Link follows state and federal procedures to provide students of all language backgrounds with a tailored high-quality education and to match students with appropriate language assistance services, as relevant. At student registration, we provide parent/guardians with a Home Language Survey (HLS) to identify the language(s) used in the child's home. Students who use | English language learners (ELLs): Students who benefit from targeted English Language instruction to achieve state standards and beyond. The student's native language development remains important for the child in school and at home. |
| a language in addition to English then participate in a state assessment of English language proficiency.  | English language proficiency (ELP):<br>Measurement of a student's ability to<br>use and understand English in a school  |
| You indicated on the HLS at registration that your child uses a language in addition to English. Your child then participated in a NJ state assessment of English language proficiency, Kindergarten WIDA Access Placement Test (K W-Apt) or WIDA Screener Online for grades 1 through 8 on (date) Your child achieved an overall score at the level of, which entitles him/her to ELD instruction.  | English language development (ELD): Process of acquiring English language skills. This process occurs at different rates for different students.  |

#### HOW WILL LINK SUPPORT MY CHILD'S LANGUAGE DEVELOPMENT?

Link proposes to place your child as an English Language Learner (ELL) in the indicated program:

#### **English Language Program**

- Part-time program of instruction to improve English reading, writing, speaking, and listening; and
- At least 1 period/day and a tutorialor ESL reading class.

#### HOW LONG WILL MY CHILD PARTICIPATE IN AN ELD PROGRAM?

Link is committed to providing high quality language assistance programming for the duration of your child's Englishlanguage development in reading, writing, speaking, and listening. Each spring your child will participate in an annual state exam of his/her English proficiency, ACCESS 2.0 for ELLS. Students who attain a score of 4% or higherand meet multiple additional criteria will be considered to have achieved a proficient level of English language development. Students achieving proficiency will exit from language assistance mandates and transition into a mainstream instructional model.

You have the right to opt out of the language program chosen for your child. Federal and state laws, however, require that the school provide your child with support so he/she can successfully participate in instruction taught in English and develop his or her English skills. If you choose to opt out, your child's teachers will support your child in a monolingual English classroom, without ESL or bilingual support. ESL and bilingual instruction is research-based and proven to accelerate student achievement of core content area standards as well as English language development standards. For more information on opting out of ELL services, please contact us.

#### **HOW CAN I FIND OUT MORE?**

We are available to speak or meet with you about your child's assessment, placement, and the school's ELD programs. We strongly encourage you contact us if you have any questions.

Sincerely,

Jeannette Rios ESL Needs Assessment Coordinator/ESL Teacher <u>irios@linkschool.org</u> 973-642-0529 Hannah M. Kennedy, M.Ed. Principal hkennedy@linkschool.org 973-642-0529



# INITIAL ENTRY: DEMONSTRATED ENGLISH LANGUAGE PROFICIENCY (NON-ENTITLEMENT)

Date:

| Date:   |   | English language learners (ELLs): Students who benefit from targeted   |
|---|---|--|
| Dear Parent/Guardian of   | ,   | English Language instruction to achieve state standard and beyond. The student's native language development |
| Link Community Charter School (Link) follows state a provide students of all language backgrounds with a education and to match students with appropriate laservices, as relevant. At student registration, we prowith a Home Language Survey (HLS) to identify the lachild's home. Students who use a language in addition participate in a state assessment of English language | remains important for the child in school and at home.  English language proficiency (ELP): Measurement of a student's ability to use and understand English in a school setting.  English language development (ELD): Process of acquiring English language skills. This process occurs at different rates for different students. |  |
| addition to English. Your child then participated in a  |   | rates for different students.  |
| English language proficiency, Kindergarten WIDA Acc<br>(K W-Apt) or WIDA Screener Online for grades 1 thro<br>overallscore of "Reaching/Proficient ", inc<br>successfully participate in English instruction withou   | ugh 8 on<br>licating that he or she is En   |  |
| We are available to speak or meet with you about th any questions.  | is decision. We strongly en   | courage you contact us if you have   |
| Sincerely,  |   |  |
| Jeannette Rios  | Hannah M. Kennedy, M.   | Ed.  |
| ESL Needs Assessment Coordinator/ESL Teacher  | Principal   |  |
| jrios@linkschool.org  | hkennedy@linkschool.o   | œ  |
| 973-642-0529  | 973-642-0529  |  |



# PLACEMENT FOR ENGLISH LANGUAGE DEVELOPMENT INSTRUCTION

| Date:  |  |
|--|--|
| Dear Parent/Guardian of,   |  |
| high-quality education and to match students with "Entitlement Letter" sent to you previously by Linl  | e and federal procedures to provide all students with a tailored, nappropriate language assistance services, as relevant. As per the k, your child was identified as an English language learner (ELL) mpleted when you first registered your child at Link, as well as an ency. |
| Your child will receive English Language Developm model base on language proficiency assessments   | ent Instruction (ELD) support through the following instructional as well as through our communications with you:  |
| Eng  | lish Language Program  |
| <ul> <li>Part-time program of instruction toimprove</li> <li>At least 2 periods/day and a tutorialor ESL</li> </ul>  | e English reading, writing, speaking, and listening; and reading class.  |
| Parent Guardian Waiver As per the waiver that you submitted to Link, nota of the ELL program.  We are available to speak or meet with you about strongly encourage you to contact us if you have a | your child's placement and the school's EDL program. We  |
| Sincerely,   |  |
| Jeannette Rios ESL Needs Assessment Coordinator/ESL Teacher jrios@linkschool.org   | Hannah M. Kennedy, M. Ed. Principal hkennedy@linkschool.org  |

973-642-0529

973-642-0529



# PARENT/GUARDIAN WAIVER TO OPT A CHILD OUT OF ELL PROGRAM

Date:

| Dear Parent/(                  | Guardian of  |
|--------------------------------|--|
|                                | , you informed Link Community Charter School (Link) that you would like to   |
| decline the En                 | nglish Language Learner (ELL) program proposed for your child.   |
| and based on                   | dians have the right to opt their children out of ELL programs. The decision must be voluntary a full understanding of the ELL child's rights, the service, and the benefits of such service to the ents/guardian decides to opt his or her child out of ELL programs, the child will still be monitored lent.   |
| are opted out<br>student does  | nue to monitor the English language proficiency (ELP) and academic progress of students who of the ELL program, including through annual ELP testing (such as ACCESS 2.0 for ELLs.). If a not demonstrate appropriate growth in ELP or maintain appropriate academic levels, Link must ts/guardians in a language they understand and offer the ELL service.                   |
| Doing so will i each of the st | h to opt your child out of the ELL program, please initial next to each item on the checklist below. Indicate that you fully understand and agree with each statement. After you have initialed next to atements, please sign, date, and return the form to Link. We will keep this document on file stating declined or do not want the indicated ELL service for your child. |
| Please put yo                  | ur initials on the line in front of each statement.  |
|                                | I am aware of my child's English language assessment score and other information about my child's current academic progress and understand why he/she was recommended for additional English language instruction.   |
|                                | I am familiar with the ELL program that Link has available for my child.   |
|                                | I have had the opportunity to discuss the available ELL program with the school.   |
|                                | I understand that Link believes its recommendation is the most academically beneficial for my child.   |
|                                | I understand that my child will still be designated as "English Language Learner" and have his or<br>her English proficiency assessed once per year until he/she no longer meets the definition of an<br>English Language Learner.   |

| All of this information has been presented to me in a language I fully understand.                   |  |  |
|--|--|--|
| I, (print parent/guardian name) of the above information, wish to DECLINE (do not w                  | , with a full understanding ant) the ELL program offered to my child as follows: |  |
| I DECLINE  | E ESL service for my child.  |  |
| Child's Full Name  | Student ID   |  |
| Parent/Guardian Signature  | Date   |  |
| Notary   | Date   |  |
| Notary's Seal:   |  |  |
|  |  |  |
| Sincerely,   |  |  |
| Jeannette Rios ESL Needs Assessment Coordinator/ESL Teacher <u>jrios@linkschool.org</u> 973-642-0529 | Hannah M. Kennedy, M.Ed. Principal hkennedy@linkschool.org 973-642-0529          |  |

School Personnel: Please note that this form must be printed double-sided (both pages on either side of one sheet of paper.)