

1. STUDENT INFORMATION

## **BIE English Language Academic Plan (ELAP) for SY**

Student Name												Assessme	ent:	Date:		Perforr	nance L	evel:					
Student NASIS				SCHOOL ID:						BIE ELA				E	Below B	asic		В	asic				
	Schoolin			OL ID.			Н					Proficient		t	Advanced		d						
Native Langua												N	Name of Assessment:					Score:					
ERC:										NRT'	*												
Name of Scho	ol:																						
<b>Grade Level:</b>				Dat	te Ide	entifi	ed as	EL:				Ш	NRT*	•									
Does the student have an IEP or 504 in place?	YES	If yes, has this ELAP been  developed in collaboration wit the student's IEP or 504 team?				YES		NO			NRT= Locally-administered norm-referenced chool year or in spring semester of the previ												
3. INITIAL IDENTIFICATION ELP ASSESSMENT SCORE  4. CURRENT ANNUAL ELP ASSESSMENT SCORES																							
						300					10DE1		4. CURRENT ANNUAL ELP ASSESSMENT SCORES					Alternate ACCESS					
Assessment:	PKS			Screen		2 2		eener			10DEL		Assessme	ent:		( ACC			ACCESS		Alt	ernate	ACCESS
Date:			KST Scc		1	2 3	4	5 6	7	8	9 10		Date: Tier:  K ACCESS, ACCESS, or Alternate ACCESS Score:										
K Screener*, Screener, or MODEL Score:																							
Reading:		Speaking:					H	Reading:							Co		osite:						
Listening:		v	Vriting:					Comp	osite:				Listening		cala		Writi	ng:	Voor o	vnoo	tod to		
*Note that students in the first semester of kindergarten are to be administered the Reading and Listening portions only of the K Screener  Current-year scale  score target:  exit EL services:																							
5. ENGLISH	LANGU	AGE D	DEVELO	OPME	NT	(ELC	) GO	ALS					Is the student on track to exit EL status?  YES						YES	NO			
the WIDA EL	D standard	rrent ACCESS test data or placement test information and day, establish appropriate WIDA Can Do* targets in the								Is the student on track to graduate on time? (If applicable) YES					NO								
table below.																							
Domain:	Key Use A	rea:	ELP Le	evel:	Can	Do 1	arget	:															
Listening:																							
Speaking:																							

2. CURRENT / NRT ASSESSMENT INFORMATION

Reading:									
Writing:									
*WIDA Can E	Do descriptors are	available for	reference on ti	he wida.wisc.edu	website	e.			
	AGE INSTRUCT			ucational progra	n being	g provided and describe how this choice best meets the educational nee	ds of the student.		
Indicate all applicable descriptions of services:									
	ional Bilingual Pro	_		Semester class: YES NO	)	Content Classes with Integrated ESL Support: core	Semester class: YES NO		
	taught in student's native language with periods focused on English language acquisition				)	content utilizing ESL Strategies	Year-long class: YES NO		
<b>Dual Language or Two-way Immersion:</b> students are taught both content and language in two languages						Newcomer Program (If applicable): classes primarily emphasizing English language acquisition	Semester class: YES NO		
ESL/ELD: students are provided instruction outside the core content classroom ("pull-out" or ESL Classes)									
Other language instruction educational service (explain below)									
Comments:									
7. PARTICIPATION IN STATE ASSESSMENTS									
Chæk the assessment(s) below in which the student will participate during the spring testing window (select one EL test).									
The student will participate in:									

Alternate ACCESS for ELLs Assessment (Please review the WIDA Accessibility and Accommodations Supplement and verify participation criteria)

Kindergarten ACCESS or ACCESS for ELLs assessment without WIDA-approved accommodations
Kindergarten ACCESS or ACCESS for ELLs assessment with WIDA-approved accommodations

Oklahoma Alternative Assessment Program (OAAP) assessment

Oklahoma School Testing Program (OSTP) assessments or CCRA assessment without EL accommodations

Oklahoma School Testing Program (OSTP) assessments or CCRA assessment with state approved EL accommodations

## BIE English Language Academic Plan (ELAP) for School Year\_\_\_\_\_

**8. ACCOMMODATIONS** To meet the needs of this student the indicated accommodations will be used prior to and during the process. These accommodations must be appropriate to the student's English language proficiency level and reflective of the student's individual needs.

Non-Linguistic (check all that apply to the left):	Linguistic (check all that apply to the left):						
S1. Individual testing	EL1. Provide the assistance of a qua	alified oral language  EL2. Provide the assistance of a qualified oral language  translator* to translate test items and answer choices					
S2. Small group testing (8-10 maximum)	translator to translate or clarify tes	that do not assess reading competency*					
S3. Preferential seating	EL3. Simplify, repeat, and clarify te	st instructions* EL4. Text-to-Speech or Human Reader*					
S4. Separate location	EL5. Student may read the test alor	ud to themselves EL6. Scribe for student's response*					
T1. Flexible schedule (same day)*	EL7. Word-to-Word Dictionaries	EL8. Oral Language Translations in (Native Language) for test items and answers					
T2. Administer subject area test over several sessions or "chunking"*	EL9. Translated Test Instructions in	(Native Language)					
T3. Allow frequent breaks during testing (maximum 10-15 minute duration)*							

<sup>\*</sup>NOTE: Certain accommodations carry specific requirements necessary to maintain assessment validity. Additionally, some accommodations may not be allowable for ELs at higher levels of English language proficiency. Please consult the WIDA accommodations for English Learners manual located on the website for additional assistance.

## 9. INSTRUCTIONAL ACCOMMODATIONS IN THE REGULAR CLASSROOM

To meet the individual needs of this student the following indicated accommodations will be used in regular classroom instruction.

## Check all that apply to the left:

Substitute project for test.	Provide student with take-home materials to practice concepts.
Allow for written responses at the student's ELP level.	Provide alternative homework assignments that meet that standard or objective.
Make instruction visual to aid in understanding. Use graphic organizers, pictures, maps, and graphs.	Use the overhead or other type of projector, and provide students with copies of teacher transparencies/notes/lectures.
Use technology (including on-line testing and instruction).	Provide interpretation/translation (oral/written assistance) by qualified staff.
Provide extended time to complete tests and assignments.	Highlight/color code tasks, directions, or letters home.
Provide a resource lending library for students.	Reword, rephrase, or summarize test directions and/or test items in English.
Allow for individual or small-group test administration.	Reduce language complexity of test questions.
Label items in the room and/or school.	Provide assignments that emphasize both oral language and literacy development.
Use leveled readers.	Increase wait time, and ask questions at student's ELP level.
Give both oral and written instructions.	Allow student opportunities to read and speak aloud successfully.
Use audiobooks or electronic readers	Use manipulatives (both student and teacher).
Student participates in group assignments.	Record material, including classroom instruction and notes, for student listening and review.
Break assignments into a series of smaller assignments.	Notify resource teacher (language specialist) when work is not being completed
Other:	Other:

NOTE- Not all accommodations are appropriate for ELs of all proficiency levels. Any instructional accommodation(s) provided should be determined through collaboration within the student's instructional team.

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BIE English Language Academic Plan (ELAP) for School Year	CONFIDENTIAL

10. SIGNATURES  The following must be completed by those individuals involved with the completion and the responsibility for implementation of this ELAP.								
Name of staf document:	ff completing this		Position / Title:					
Signature:				Date:				
	ff responsible for ELAP tion and compliance:		Position / Title:					
Signature:				Date:				
Name of sup administrato	_		Position / Title:					
Signature:				Date:				
	FAL OPT-OUT	ted only if a parent or guardian chooses to waive supplement	al FL services and sunno	nrts.				
		peen identified as an English Learner and I choose to dec			cas and supports for the current			
school year.	I understand that decli	ining these supplemental EL services does not affect my assessment (e.g., Kindergarten ACCESS, WIDA ACCESS fo	student's EL status of	and that my	student will participate in the			
Name:			R	Relationship:				
Signature:				Date:				