

**Initial Placement Form**  
**Alternative Language Services**

TO BE COMPLETED AT INITIAL PLACEMENT

**Student Information**

Last Name	First Name
Student Number	Grade
	Date of Birth

**Testing Information**

WIDA MODEL Testing Date(s):

**OVERALL Composite** Proficiency Level (35% Reading + 35% Writing + 15% Speaking + 15% Listening):**Domain Scores:**

Speaking Proficiency Level	Writing Proficiency Level
Listening Proficiency Level	Reading Proficiency Level

**Composite Scores:**

Oral Language Proficiency Level (50% Listening + 50% Speaking)

Literacy Proficiency Level (50% Reading + 50% Writing)

**Student Designation:****English Learner (EL)****ALL EL students must be enrolled in a regular grade level Language Arts class.**

Placement with an ESL endorsed teacher for one period direct English Language Development Instruction daily

Placement with an ESL endorsed teacher for one period of daily, sheltered Instruction in a core content area (Language Arts, math, science, social studies, health)

**Fluent English Proficient (FEP)**This student is **NOT** eligible for ALS direct services.**School ALS Fac./Admin Signature:** \_\_\_\_\_**Date:** \_\_\_\_\_**District ALS Facilitator Signature:**  \_\_\_\_\_**Date:** \_\_\_\_\_

Original: School ALS Facilitator – To be filed in student ALS Folder

Copy: District ALS File

Copy: To parent with Parent Notification Letter of Direct Services if eligible

Fluent Students: Copy in cumulative record