ACCOMMODATIONS DOCUMENTATION FOR ENGLISH LANGUAGE LEARNERS (ELLs)

This form must be completed or updated within 45 calendar days from start of school year or student date of enrollment.

Student School Grade

Last name First name MI

Assessment(s) for which accommodation(s) is/are being proposed

Entry date: MSA Reading Exemption: Yes No  Math scores to be excluded: Yes  No

(Date first enrolled in a school in US school system)

Last English Language Proficiency (ELP) assessment date

Scores: Oral Reading Writing Proficiency level

**Assessment Accommodations below reflect accommodations also used in daily instruction.**

ACCOMMODATION(S) PROVIDED(Check where appropriate):

|  |  |
| --- | --- |
| **1. Presentation**  **None**  1-F. Human reader, audio tape, or compact disk recording for verbatim Reading of entire test  1-G. Human reader, audio tape, or compact disk recording for verbatim Reading of selected sections of the test  1-M. Screen reader for verbatim Reading of entire test  1-N. Screen reader for verbatim Reading of selected sections of test  1-Q. Talking materials  1-R. Other—proposed by Local Accountability Coordinator; Section or ELL staff; and approved by MSDE Assessment Office and ELL staff | **2. Response  None**  2-A. Scribe  2-E. Electronic Note Takers and Word Processors  2-F. Tape recorder  2-G. Respond on test booklet  2-H. Monitor test response  2-K. Spelling and grammar devices (not permitted to be  be used on the English HSA)  2-N. Bilingual dictionaries  2-O. Other—proposed by Local Accountability Coordinator; Section or ELL staff; and approved by MSDE Assessment Office and ELL staff |
| **3. Timing and Scheduling  None**  3-A. Extended time  3-B. Multiple or frequent breaks  3-C. Change schedule or order of activities-Extend over multiple days  3-D. Change schedule or order of activities-Within one day  3-E. Other—proposed by Local Accountability Coordinator; Section or ELL staff; and approved by MSDE Assessment Office and ELL staff | **4. Setting  None**  4-A. Reduce distractions to the student  4-B. Reduce distractions to other students  4-C. Change location to increase physical access or to use special equipment within school building  4-E. Other—proposed by Local Accountability Coordinator; Section or ELL staff; and approved by MSDE Assessment Office and ELL staff |

Additional accommodations currently used in the classroom (e.g., notes, outlines and instructions, recorded books, etc):

**Recommended by the following members of the ELL Team:** (Check where appropriate) **Date**

ESOL Teacher Classroom Teacher Reading Specialist ESOL Contact Personnel

Other (Please describe)

Committee Chair’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name printed Date

Principal’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name printed Date

Parent/guardian’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name printed Date

MSDE recommends that an attempt be made to involve parents and have their signatures on file. However, if parent signatures are not available, then this form should be mailed to them and an explanation provided if requested.