(Insert date)

Dear (Insert Parent or Guardian),

Upon enrollment, a language other than English was noted on (child’s name) Home Language Survey (HLS) prompting a screening of his or her English language proficiency as required by the Office for Civil Rights and in accordance with the Every Student Succeeds Act.

Based on assessment results on (date), (child’s name) has been **identified** as an English Learner (EL) and is eligible for EL services based on the following WIDA screener results:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Listening | Reading | Speaking | Writing | Composite |
| (insert score) | (insert score) | (insert score) | (insert score) | (insert score) |

The criteria for English language proficiency is an Overall Composite Score of 4.7 or higher. This information is for you to review and keep.

Based on this information, the district will design an instructional program that will meet your child’s needs and the state standards. As a parent, assistance will be available in considering the instructional program of your child. Under ESEA, you have the right to refuse enrollment of your child in the program.

If you have any questions regarding the screener results or your child’s instructional program, please contact the school.

(Insert School Signature here)

(Insert School contact information here)