

Teacher Information Form
Identifying English Language Learners with Speech-Language Concerns

I. General Information

Person Completing Form: _____ Date: _____

Last Name: _____ First Name: _____

School: _____ Grade: _____

Date of most recent language classification: _____

Language Classification: _____

II. Educational Information

A. The student was referred by: _____

Name	Title
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B. Primary reason for this referral?

C. What type of instruction is the student receiving?

- ☐ ESOL self-contained classes
- ☐ Basic Program using ESOL strategies
- ☐ ESOL self-contained classes and mainstreamed in content areas

D. Does the student initiate verbal interaction with peers? _____

If yes, in what language: _____

E. Is the student having academic difficulties? _____

If yes, please explain and state intervention strategies tried.

F. Has student demonstrated academic progress during the current school year? _____

III. Speech and Language Information						
Respond to each item below:						
Communication Behavior	English			Native Language		
	Yes	No		Yes	No	Don't Know
1. Articulates speech sounds correctly.						
2. Uses correct grammar.						
3. Uses voice appropriately.						
4. Describes experience accurately.						
5. Uses a variety of vocabulary words to express ideas.						
6. Sequences statements appropriately.						
7. Maintains topic of discussion.						
8. Follows teacher's instructions.						
9. Responds appropriately to questions.						
10. Speaks without excessive pauses, repetitions, false starts, etc.						

III. Speech and Language Information

Respond to each item below:

Communication Behavior	English		Native Language		
	Yes	No	Yes	No	Don't Know
1. Articulates speech sounds correctly.					
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9. Responds appropriately to questions.					
10. Speaks without excessive pauses, repetitions, false starts, etc.					

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