

The School Board of Broward County, Florida
 MULTICULTURAL, ESOL AND PROGRAM SERVICES DEPARTMENT

K-2 CLASSIFICATION UPDATE/EXIT FORM

Date: _____

School Year: _____

School/Cluster: _____

Name and Title of Person Completing this Form: _____

**NOTE: Schools must update the following information in the appropriate TERMS panels.
 Exited students are coded LF during the 2-year monitoring period.**

Last Name	First Name	Grade*	FSI #	Progress Monitoring		Exit	
				IPT Listening/Speaking Percentile Scores	Classification and ELL Code	Basis of Exit**	Exit Date

*Current Grade Placement

**Choose one: A = Aural/Oral
 L = ELL Committee

Copy: Information Management Technician