

**THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA  
 MULTICULTURAL, ESOL AND PROGRAM SERVICES DEPARTMENT  
 ENGLISH LANGUAGE LEARNER STUDENT EDUCATION PLAN (ELLSEP)**

**ATTACHMENT #7**

<b>Name</b> _____ (Last) (First) (Middle) <b>Date of Birth</b> _____ <b>Place of Birth</b> _____ <b>Student Language</b> _____ <b>Parent/Guardian Language</b> _____ <b>Home Language Survey Date *(REFDTE)</b> _____ (Date parent completes registration form)	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;">School</th> <th style="width:20%;">Year</th> <th style="width:50%;">Grade</th> </tr> </thead> <tbody> <tr><td>_____</td><td>20 ____ 20 ____</td><td>_____</td></tr> <tr><td>_____</td><td>20 ____ 20 ____</td><td>_____</td></tr> <tr><td>_____</td><td>20 ____ 20 ____</td><td>_____</td></tr> <tr><td>_____</td><td>20 ____ 20 ____</td><td>_____</td></tr> <tr><td>_____</td><td>20 ____ 20 ____</td><td>_____</td></tr> <tr><td>_____</td><td>20 ____ 20 ____</td><td>_____</td></tr> </tbody> </table>	School	Year	Grade	_____	20 ____ 20 ____	_____	_____	20 ____ 20 ____	_____	_____	20 ____ 20 ____	_____	_____	20 ____ 20 ____	_____	_____	20 ____ 20 ____	_____	_____	20 ____ 20 ____	_____
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This is an **initial** ELLSEP  Yes  No

Date \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_ Signature \_\_\_\_\_  
 (ESOL Contact/Designee) (Parent Signature)

<b>Initial Placement Information</b>  <b>Listening/Speaking Language Assessment (K – 12)</b> Instrument _____ Assessment Date *(CLASS) _____  <b>Reading/Writing Assessment (FES Grades 3 – 12)</b> Instrument _____ Reading Percentile _____ Writing (Language) Percentile _____ Assessment Date *(CLASS) _____  <b>ESOL Program Entry Date *(ENTRY)</b> _____	<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="4" style="text-align: center;"><b>Language Classifications</b></th> </tr> <tr> <th colspan="4" style="text-align: center;"><b>Initial Language Classification</b> _____</th> </tr> </thead> <tbody> <tr> <td>Date _____</td> <td>From ____ to ____</td> <td>or Status Unchanged ____</td> <td>Grade ____ School _____</td> </tr> <tr> <td>Date _____</td> <td>From ____ to ____</td> <td>or Status Unchanged ____</td> <td>Grade ____ School _____</td> </tr> <tr> <td>Date _____</td> <td>From ____ to ____</td> <td>or Status Unchanged ____</td> <td>Grade ____ School _____</td> </tr> <tr> <td>Date _____</td> <td>From ____ to ____</td> <td>or Status Unchanged ____</td> <td>Grade ____ School _____</td> </tr> <tr> <td>Date _____</td> <td>From ____ to ____</td> <td>or Status Unchanged ____</td> <td>Grade ____ School _____</td> </tr> </tbody> </table>	<b>Language Classifications</b>				<b>Initial Language Classification</b> _____				Date _____	From ____ to ____	or Status Unchanged ____	Grade ____ School _____	Date _____	From ____ to ____	or Status Unchanged ____	Grade ____ School _____	Date _____	From ____ to ____	or Status Unchanged ____	Grade ____ School _____	Date _____	From ____ to ____	or Status Unchanged ____	Grade ____ School _____	Date _____	From ____ to ____	or Status Unchanged ____	Grade ____ School _____
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**Recommendations for continued placement in ESOL Program**

\_\_\_\_\_ 2<sup>nd</sup> Year in ESOL Program      Date \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Signature \_\_\_\_\_  
 (ESOL Contact/Designee)

\_\_\_\_\_ 3<sup>rd</sup> Year in ESOL Program      Date \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Signature \_\_\_\_\_  
 (ESOL Contact/Designee)