

# ENGLISH LANGUAGE DEVELOPMENT PROGRAM

## Parental Waiver Form

Student Name: \_\_\_\_\_

School: \_\_\_\_\_

Opt-out Date: \_\_\_\_\_

Grade: \_\_\_\_\_

Student ID#: \_\_\_\_\_

As required by federal law, your child has taken an English language proficiency test to determine if s/he qualifies for English Language Development (ELD) instruction in order to comprehend daily lessons and participate socially in school. Your child has been tested in English reading, writing, speaking and listening. The test scores indicate that s/he is eligible to receive ELD instruction in a program designed to help students acquire English language proficiency and access grade level content instruction.

**Parental Right to Refuse ELD Services:** The school has described in detail the ELD program they recommend for my child. I have considered the program(s) offered by the school and have chosen to decline separate, specialized ELD instruction for my child. Specialized services or classes are those provided only for English Learners (ELs), for example ELD pull-out classes, ESL tutoring, after-school English tutoring for ELs or content classes consisting of only ELs. This does not include a class composed of ELs and non-ELs in which ELD is supported through content instruction. By checking each item below, I acknowledge that I have read and understand each statement.

\_\_\_\_\_ I am aware of my child's English language assessment score and other information about my child's current academic progress, and understand why s/he was recommended for additional English language instruction.

\_\_\_\_\_ My decision to decline or opt-out of specialized ELD instruction is voluntary.

\_\_\_\_\_ The school district will report my child to the Pennsylvania Department of Education as an English Learner (EL) until my child attains English proficiency.

\_\_\_\_\_ Federal law requires that my child will be tested annually with the WIDA ACCESS for ELs 2.0 until s/he attains English proficiency and is no longer considered EL status.

\_\_\_\_\_ The school district will monitor my child's academic progress without benefit of receiving specialized ELD instruction until my child attains English proficiency, and four years after exit from EL status.

\_\_\_\_\_ The school district will continue to inform me of my child's progress in attaining English proficiency.

\_\_\_\_\_ I can change my preference at any time by notifying the school district in writing and allow my child to enroll in the ELD program(s) offered by the school.

I, \_\_\_\_\_ (parent/guardian name) with a full understanding of the above information, wish to

\_\_\_\_\_ Decline all of the specialized ELD programs and services offered to my child.

\_\_\_\_\_ Decline some of the ELD programs and/or particular ELD services offered to my child.

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**MPANGO WA UKUZAJI WA LUGHA YA KIINGEREZA**  
**Fomu ya Kutodai ya Mzazi**

Jina la Mwanafunzi: \_\_\_\_\_

Shule: \_\_\_\_\_

Tarehe ya Kutoka: \_\_\_\_\_

Gredi: \_\_\_\_\_

Nambari ya Kitambulisho cha Mwanafunzi: \_\_\_\_\_

Kama inavyotakiwa na sheria ya shirikisho, mtoto wako amefanya mtihani wa ustadi wa lugha ya Kiingereza ili kubaini kama anahitimu kupata mafundisho ya Ukuzaji wa Lugha ya Kiingereza (ELD) ili kuelewa masomo ya kila siku na kushiriki kijamii shuleni. Mtoto wako amejaribiwa katika kusoma, kuandika, kuzungumza na kusikiliza Kiingereza. Alama za mitihani zinaonyesha kuwa anastahiki kupokea mafundisho ya ELD katika mpango ulioundwa ili kuwasaidia wanafunzi kupata ujuzi wa lugha ya Kiingereza na kufikia mafunzo ya maudhui ya kiwango cha darasa.

**Haki ya Mzazi ya Kukataa Huduma za ELD:** Shule imeeleza kwa kina mpango wa ELD wanaopendekeza kwa mtoto wangu. Nimezingatia mipango inayotolewa na shule na nimechagua kukataa mafundisho maalum ya ELD kwa mtoto wangu. Huduma au madarasa maalum ni yale yanayotolewa kwa Wanafunzi wa Kiingereza (ELs), kwa mfano madarasa ya ELD, mafunzo ya ESL, mafunzo ya Kiingereza ya baada ya shule kwa EL au madarasa ya maudhui yanayojumuisha EL pekee. Hii haijumuishi darasa linalojumuisha EL na lisilo na EL ambapo ELD inatumika kupitia mafundisho ya maudhui. Kwa kutia alama kwenye kila kipengele hapa chini, ninakubali kwamba nimesoma na kuelewa kila taarifa.

\_\_\_\_\_ Ninajua alama za tathmini ya lugha ya Kiingereza ya mtoto wangu na maelezo mengine kuhusu maendeleo ya sasa ya mtoto wangu kitaaluma, na ninaelewa ni kwa nini alipendekezwa kwa mafundisho ya ziada ya lugha ya Kiingereza.

\_\_\_\_\_ Uamuzi wangu wa kukataa au kuchagua kutoka kwa mafundisho maalum ya ELD ni wa hiari.

\_\_\_\_\_ Wilaya ya shule itamripoti mtoto wangu kwa Idara ya Elimu ya Pennsylvania kama Mwanafunzi wa Kiingereza (EL) hadi mtoto wangu apate ujuzi wa Kiingereza.

\_\_\_\_\_ Sheria ya shirikisho inahitaji mtoto wangu ajaribiwe kila mwaka kwa WIDA ACCESS ya EL 2.0 hadi atakapopata ujuzi wa Kiingereza na asichukuliwe tena kuwa chini ya hali ya EL.

\_\_\_\_\_ Wilaya ya shule itafuatilia maendeleo ya masomo ya mtoto wangu bila manufaa ya kupokea mafundisho maalum ya ELD hadi mtoto wangu apate ujuzi wa Kiingereza, na miaka minne baada ya kuondoka kwenye hali ya EL.

\_\_\_\_\_ Wilaya ya shule itaendelea kunifahamisha kuhusu maendeleo ya mtoto wangu katika kupata ujuzi wa Kiingereza.

\_\_\_\_\_ Ninaweza kubadilisha mapendeleo yangu wakati wowote kwa kuarifu wilaya ya shule kwa maandishi, na kumruhusu mtoto wangu ajiandikishe katika mpango wa ELD unaotolewa na shule.

\_\_\_\_\_ (Jina la mzazi/mlezi) kwa ufahamu kamili wa maelezo yaliyo hapa juu, ningependa

\_\_\_\_\_ Kukataa mipango na huduma **zote** maalum za ELD zinazotolewa kwa mtoto wangu.

\_\_\_\_\_ Kukataa baadhi ya mipango ya ELD na/au huduma fulani za ELD zinazotolewa kwa mtoto wangu.

Saini ya Mzazi/Mlezi: \_\_\_\_\_

Tarehe: \_\_\_\_\_