**Returning Student to**

**English Language Development Program**

**School Year [20XX-20XX]**

**[Use LEA or School Letterhead]**

[DATE]

Dear Parent/Guardian of [STUDENT NAME],

Your student previously received services through [DISTRICT]’s **English Language Development** (ELD) programin grade[GRADE(S) #].

Oregon school districts are required to monitor students who have been identified as English Learners (EL) by their scores on the **Oregon English Language Proficiency Assessment** (ELPA). Despite [STUDENT NAME]’s obtaining a proficient score on the exam, a meeting was requested to discuss your student’s progress in grade-level subjects.

During the meeting, school educators discussed having your student return to the English Language Development (ELD) instructional program, to ensure graduation requirements are met. We are pleased that you have agreed and are in support of the return of your student to the program.

**English Language Development (ELD) and core content instruction recommended for your student:**

**Instruction supporting English Language Acquisition**

**ELD Push-in** - Instruction is provided within the student’s mainstream or content-area classroom.

**ELD Pull-out** - Students spend a part of the day in their primary mainstream classroom and are “pulled out” for a portion of the day to receive services to learn English.

**ELD Class Period** - English instruction is provided during a class period.

**Newcomer ELD** - A specially designed class to support students who are:

* Newly enrolled in a US school
* Have beginning levels of English language proficiency
* Need to learn English quickly to be successful in school

**Grade and Subject Level Instruction**

**Dual-language** - Instruction is given in English and another language for at least 50% or more of the instructional time.

**Integrated ELD** - Language and content are taught together, using both **English Language Proficiency** (ELP) and content standards to guide planning, instruction, reflection, and assessment.

**Transitional Bilingual** - Most of the initial instruction is in the student’s home language and over [# OF YEARS] the instruction transitions to English

**Other Bilingual** - Classes are being offered with support to preserve the Heritage Language.

**Sheltered Instruction** - The teacher uses special instructional strategies to meet your student’s language needs in the following classes: [INSERT CLASSES]

**Newcomer / Core Content** - This is a specially designed program to support students who recently enrolled in a US school and need support to read, write, speak, and understand language. Instruction and supports are provided for one or more grade-level subjects.

If you have any questions, please contact the [DISTRICT/SCHOOL] [TITLE] [CONTACT NAME] at [PHONE NUMBER] or [EMAIL].

**Please complete the information below and return this form to your student’s school to confirm your student’s participation in the English Language Development (ELD) program outlined above. Once this form is received, your student will be enrolled in the ELD program.**

I approve reinstating [STUDENT NAME] as an active English Learner and having my student participate in the [DISTRICT] instructional program that is outlined above.

**Yes** – I would like my student to be reinstated as an active English Learner.

Your student will be enrolled in the ELD instructional program within a few days of the receipt of this form. This timeline allows the district time to adjust your student’s class schedule if necessary.

**No** – I do not want my student to be reinstated as an active English Learner. I understand the EL Instructional program is designed to help my student learn English and meet age-appropriate academic achievement standards, succeed in school, and meet requirements for graduation.

The district will continue to monitor your student’s progress in grade-level subjects and the English language.

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

**Parent/Guardian Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Email address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_