



Marysville Joint Unified School District:

Annual Monitoring of EL Student Progress K-8

DIRECTIONS: The student progress of all ELs is monitored annually to evaluate students' language growth and academic performance. Please review information on this form to determine if the student is making adequate progress. If student's progress is unsatisfactory, a parent conference is needed. Complete sections and place original in green folder.

Student Name _____ SSID number _____

| Grade | CLEDT/ELPAC Was there growth? | CAASPP | STAR Reading/ Early Literacy | Progress in class Circle one | Recommendation Circle one and provide detail if needed |
|---|---|--------|--|---|--|
| TK EL Facilitator Initial | Initial: _____ List: _____ SPK: _____ Read: _____ Write: _____ Overall: _____ | NA | Beginning of the Year GE End of the Year GE | Satisfactory Unsatisfactory Teacher's Initial | Reclassification Student making expected Progress Intervention needed: Provide Details |
| K EL Facilitator Initial | Initial Prior Year ELPAC List: _____ SPK: _____ Read: _____ Write: _____ Overall: _____ Growth: NA Y N | NA | Beginning of the Year GE End of the Year GE | Satisfactory Unsatisfactory Teacher's Initial | Reclassification Student making expected Progress Intervention needed: Provide Details |
| 1st EL Facilitator Initial | Initial Prior Year ELPAC List: _____ SPK: _____ Read: _____ Write: _____ Overall: _____ Growth: NA Y N | NA | Beginning of the Year GE End of the Year GE | Satisfactory Unsatisfactory Teacher's Initial | Reclassification Student making expected Progress Intervention needed: Provide Details |
| 2nd EL Facilitator Initial | Initial Prior Year ELPAC List: _____ SPK: _____ Read: _____ Write: _____ Overall: _____ Growth: NA Y N | NA | Beginning of the Year GE End of the Year GE | Satisfactory Unsatisfactory Teacher's Initial | Reclassification Student making expected Progress Intervention needed: Provide Details |
| 3rd EL Facilitator Initial | Initial Prior Year ELPAC List: _____ SPK: _____ Read: _____ Write: _____ Overall: _____ Growth: NA Y N | NA | Beginning of the Year GE End of the Year GE | Satisfactory Unsatisfactory Teacher's Initial | Reclassification Student making expected Progress Intervention needed: Provide Details |

