



School District/Borough/Number (6-digit): _____ Student ID #: _____ Today's Date: _____

ELL Parent Survey and Program Agreement

Your child _____ who is enrolled in grade _____ at _____ (first name) (last name) (school name) has been identified as entitled to receive English language learner (ELL) services (bilingual education and/or English as a new language).

There are 2 types of bilingual education: dual language and transitional bilingual education:

- In **dual language (DL)** programs, students are taught in two languages: English and their home language, such as Spanish, Chinese, or French, among others. The goal of this program is for students to be able to read, write, and speak in both English and their home language. In dual language classes, the home language and English are used equally. Even after your child is no longer an English language learner, he/she will remain in the program to continue to learn in and develop both languages. This program includes an English as a new language class.
- In **transitional bilingual education (TBE)** programs, include reading, writing, and other classes in English and in your child's home language. As students' English improves, time spent learning in English increases and time spent learning in the home language decreases. Once your child is no longer identified as an English language learner, he or she will exit the program. This program includes an English as a new language class.

All ELLs receive the following:

- In **English as a new language (ENL)** programs, students are provided instruction in English with support in the students' home language so that they can learn to read, write, and speak English. Students in this program can come from many different language backgrounds, and English may be the only common language among them.

If there are not enough students to create a bilingual education program at the school in which the student is enrolled, transportation can be provided to a school within the district that has such a program. If there is no bilingual education program available, your child will be placed in an English as a new language program. If there is a bilingual program available in your school, your child will be placed in that program unless you choose to opt out of the bilingual program. **ENL is mandated and you may not opt out of ENL as per New York State Education Department.**

	STEP 1: ELL Program Availability				
School completes this section	The following ELL programs are currently available at this school: <input type="checkbox"/> English as a new language program (ENL) <input type="checkbox"/> Transitional bilingual education (TBE) <input type="checkbox"/> Dual language program (DL)				
	<input type="checkbox"/> The following TBE and DL programs are available in this district:				
	School DBN	Program Type (TBE, DL, both)	Language	Grade(s)	Address

School completes this section	STEP 2: Provisional Placement
	Your child has been provisionally placed in: <input type="checkbox"/> English as a new language only program (ENL) <input type="checkbox"/> Transitional bilingual education (TBE) <input type="checkbox"/> Dual language program (DL)

Parent/Guardian completes STEPS 3, 4, and 5

Parent completes this section	STEP 3: Parent Agreement
	<p>Please complete the following (check <u>ONE</u>):</p> <p>I have received ELL program information and...</p> <p><input type="checkbox"/> accept my child's placement in a transitional bilingual education (TBE) program.</p> <p><input type="checkbox"/> accept my child's placement in a dual language (DL) program.</p> <p><input type="checkbox"/> I am exercising my right to place my child in an English as a new language program.</p> <p><input type="checkbox"/> I understand that currently there is no bilingual program in my school, and I understand that my child will receive ENL only. However, I would like to be placed on <u>a list</u> so that when there is enough students to form the bilingual program, my child will be placed in that bilingual program. I want my child to remain in this school.</p> <p><input type="checkbox"/> I understand that currently there is no bilingual program in my school, and I understand that my child will receive ENL. However, I would like to request a <u>bilingual transfer</u>. I understand that before my child is transferred, I will receive more information on where the bilingual program is and if there are available seats. Once I receive the information, I will grant final authorization to proceed with the transfer. (<i>NOTE: Principal will initiate bilingual program transfer</i>)</p>

Parent completes this section	STEP 4: Parent Information									
	<p><input type="checkbox"/> I have read all information above and I understand that if I do not return this form by _____ my child may be placed in a bilingual program (transitional bilingual education or dual language) at the current school. Otherwise, my child will be placed in an English as a new language (ENL) program at the current school.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="height: 30px; vertical-align: top;">Parent/Guardian Name:</td> </tr> <tr> <td colspan="2" style="height: 30px; vertical-align: top;">Address:</td> </tr> <tr> <td style="width: 50%; height: 30px; vertical-align: top;">Telephone:</td> <td style="width: 50%; height: 30px; vertical-align: top;">Alternate Telephone:</td> </tr> <tr> <td colspan="2" style="height: 30px; vertical-align: top;">Email Address:</td> </tr> <tr> <td style="width: 50%; height: 30px; vertical-align: top;">Signature:</td> <td style="width: 50%; height: 30px; vertical-align: top;">Date:</td> </tr> </table>	Parent/Guardian Name:		Address:		Telephone:	Alternate Telephone:	Email Address:		Signature:
Parent/Guardian Name:										
Address:										
Telephone:	Alternate Telephone:									
Email Address:										
Signature:	Date:									

The New York City Department of Education considers your participation in your child's education a key to his or her success. This survey is crucial in confirming that you have received all of the information necessary to select the appropriate ELL program for your child as you make your selection (see page two). Please fill out the form completely and return it to *[name and title of person]* at your school.

Parent completes this section	STEP 5: Parent Survey	Check One	
		1. Did you receive information on the dual language, transitional bilingual education and English as a new language (ENL) programs available in your child's school and/or other schools in the district?	<input type="checkbox"/> Yes How was the information presented? <input type="checkbox"/> School orientation <input type="checkbox"/> Phone call <input type="checkbox"/> One-on-one Meeting <input type="checkbox"/> Other (please explain)
	2. Did you view the parent orientation video in your preferred language of communication?	<input type="checkbox"/> Yes	<input type="checkbox"/> No Were you offered an interpreter? <input type="checkbox"/> Yes <input type="checkbox"/> No
	3. Did you have the opportunity to ask questions and receive answers about the different programs available for your child?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	4. Were you informed that your child has a right to placement in a bilingual class in his or her school if there are sufficient numbers of students with the same home language and grade level (if the parents have chosen a bilingual program)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	5. Were you informed that if there are not sufficient students to form a bilingual program in your school, you have the option of transferring your child to another school in the district that has a Dual Language and/or Transitional Bilingual Education program; and if you choose not to transfer your child, he or she will remain at the school and be placed in an ENL program?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	6. Were you informed that your child's placement is for the entire school year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	7. Were you informed that staying in the same program that you select until your child is no longer entitled to receive services would help your child succeed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	8. Were you informed that your child would be placed in an age-appropriate class for no longer than ten days until his or her service needs are identified?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

School completes this section	Step 6: School Certification	
	To be completed by school officials:	
	I certify that I have reviewed the above information and that the parent or guardian is fully informed regarding ELL programs and the student has been placed in the appropriate program and in accordance with CR Part 154 as outlined in the NYC DOE's <i>ELL Policy and Reference Guide</i> . I have accurately entered this information into the ELPC screen in ATS.	
	Print Name:	Print Title:
Signature:	Date:	