

**English Language Learners (suspected of a health, behavior, emotional and learning issues)  
Student Information Form for A/BIT:**

Student Name \_\_\_\_\_ DOB \_\_\_\_\_  
Date \_\_\_\_\_ Birthplace \_\_\_\_\_  
Native Language \_\_\_\_\_ US Entry Date \_\_\_\_\_  
Grade Completed in Native Country \_\_\_\_\_ Grade Assigned in US \_\_\_\_\_  
Number of years/months in US school when initiating this form \_\_\_\_\_  
Has this child had a history of movement from the US back to the native country? \_\_\_\_  
Days Absent \_\_\_\_\_ Days Present \_\_\_\_\_ at the time this form is completed.

**Initial Placement Language Assessment Screening Results at the Testing Center**

Date of screening: \_\_\_\_ Assessment Test: \_\_\_\_\_; Scores Oral \_\_, Reading \_\_ Writing \_\_\_\_

**History of Annual Assessment Information:**

**School Year \_\_\_\_\_; Grade \_\_\_\_\_**

Date \_\_\_\_\_ ELDA: \_\_ Listening \_\_; Speaking \_\_; Reading \_\_; Writing \_\_; Comprehension \_\_\_\_:  
Composite \_\_

Date \_\_\_\_\_ iLEAP/LEAP/GEE (circle one) ELA \_\_\_\_; Math \_\_\_\_; Sci \_\_\_\_; SS \_\_\_\_

Or FOUNTAS AND PINNELL Scores Date/Scores:

Date \_\_\_\_\_; Date \_\_\_\_\_; Date \_\_\_\_\_;

Date \_\_\_\_\_; Date \_\_\_\_\_; Date \_\_\_\_\_;

**School Year \_\_\_\_\_; Grade \_\_\_\_\_**

Date \_\_\_\_\_ ELDA: \_\_ Listening \_\_; Speaking \_\_; Reading \_\_; Writing \_\_; Comprehension \_\_\_\_:  
Composite \_\_

Date \_\_\_\_\_ iLEAP/LEAP/GEE (circle one) ELA \_\_\_\_; Math \_\_\_\_; Sci \_\_\_\_; SS \_\_\_\_

Or FOUNTAS AND PINNELL Scores Date/Scores:

Date \_\_\_\_\_; Date \_\_\_\_\_; Date \_\_\_\_\_;

Date \_\_\_\_\_; Date \_\_\_\_\_; Date \_\_\_\_\_;

**School Year \_\_\_\_\_; Grade \_\_\_\_\_**

Date \_\_\_\_\_ ELDA: \_\_ Listening \_\_; Speaking \_\_; Reading \_\_; Writing \_\_; Comprehension \_\_\_\_:  
Composite \_\_

Date \_\_\_\_\_ iLEAP/LEAP/GEE (circle one) ELA \_\_\_\_; Math \_\_\_\_; Sci \_\_\_\_; SS \_\_\_\_

Or FOUNTAS AND PINNELL Scores Date/Scores:

Date \_\_\_\_\_; Date \_\_\_\_\_; Date \_\_\_\_\_;

Date \_\_\_\_\_; Date \_\_\_\_\_; Date \_\_\_\_\_;

**School Year \_\_\_\_\_; Grade \_\_\_\_\_**

Date \_\_\_\_\_ ELDA: \_\_ Listening \_\_; Speaking \_\_; Reading \_\_; Writing \_\_; Comprehension \_\_\_\_:  
Composite \_\_

Date \_\_\_\_\_ iLEAP/LEAP/GEE (circle one) ELA \_\_\_\_; Math \_\_\_\_; Sci \_\_\_\_; SS \_\_\_\_

Or FOUNTAS AND PINNELL Scores Date/Scores:

Date \_\_\_\_\_; Date \_\_\_\_\_; Date \_\_\_\_\_;

Date \_\_\_\_\_; Date \_\_\_\_\_; Date \_\_\_\_\_;

## Response to Intervention

### Tier I

Description of Differentiated Instructional Strategies used with student in instruction:

---

---

---

Description of Concern:

---

---

---

Date/From \_\_\_ To \_\_\_ Frequency \_\_\_\_\_

Conference with A/BIT Date \_\_\_\_\_

A/BIT Recommendations:

---

---

---

Date of Parent Conference: \_\_\_\_\_; Bilingual Interpreter Present? Yes No

### Tier II

Baseline Assessment \_\_\_\_\_ Date/From \_\_\_ To \_\_\_ Frequency \_\_\_\_\_

Post Assessment Results \_\_\_\_\_ Date of Post Assessment Results \_\_\_\_\_

Description of Tier II Intervention:

---

---

---

Teacher Observations/Notes (be specific):

---

---

---

Conference with A/BIT Date \_\_\_\_\_

A/BIT Recommendations:

---

---

---

Date of Parent Conference: \_\_\_\_\_; Bilingual Interpreter Present? Yes No

### Tier II

Baseline Assessment \_\_\_\_\_ Date/From \_\_\_ To \_\_\_ Frequency \_\_\_\_\_

Post Assessment Results \_\_\_\_\_ Date of Post Assessment Results \_\_\_\_\_

Description of Tier II Intervention:

---

---

---

\_\_\_\_\_  
Teacher Observations/Notes (be specific):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Conference with A/BIT Date \_\_\_\_\_  
A/BIT Recommendations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date of Parent Conference: \_\_\_\_\_; Bilingual Interpreter Present? Yes No

**Tier III**

Baseline Assessment \_\_\_\_\_ Date/From \_\_\_\_ To \_\_\_\_ Frequency \_\_\_\_\_

Post Assessment Results \_\_\_\_\_ Date of Post Assessment Results \_\_\_\_\_

Description of Tier III Intervention:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Teacher Observations/Notes (be specific):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Conference with A/BIT Date \_\_\_\_\_  
A/BIT Recommendations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date of Parent Conference: \_\_\_\_\_; Bilingual Interpreter Present? Yes No

Recommendation for Evaluation Yes No