

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

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

Campus: \_\_\_\_\_

**EL INSTRUCTIONAL ACCOMMODATIONS**

<b>Beginning of Year (BOY)</b>	<b>Middle of Year (MOY)</b>	<b>End of Year (EOY)</b>
<b>Date:</b> ____/____/____	<b>Date:</b> ____/____/____	<b>Date:</b> ____/____/____
<ul style="list-style-type: none"> <li><input type="checkbox"/> peer and native language support</li> <li><input type="checkbox"/> gestures for added emphasis</li> <li><input type="checkbox"/> simple conversations (words/phrases)</li> <li><input type="checkbox"/> visuals and/or verbal cues to reinforce spoken or written words</li> <li><input type="checkbox"/> pre-tech vocabulary</li> <li><input type="checkbox"/> short sentences and single words</li> <li><input type="checkbox"/> provide phrases or simple sentence frames</li> <li><input type="checkbox"/> rephrase, repeat, or slow down</li> <li><input type="checkbox"/> wait time</li> <li><input type="checkbox"/> extra time for complex material and/or assignments</li> <li><input type="checkbox"/> non-participation in simple conversations</li> <li><input type="checkbox"/> word back of key vocabulary</li> <li><input type="checkbox"/> model pronunciation</li> <li><input type="checkbox"/> tiered sentence stems</li> <li><input type="checkbox"/> organize reading in chunks</li> <li><input type="checkbox"/> adapted text(s)</li> <li><input type="checkbox"/> clarification of word(s) or phrase(s)</li> <li><input type="checkbox"/> oral translation</li> <li><input type="checkbox"/> bilingual dictionary or glossary</li> <li><input type="checkbox"/> clarify directions</li> <li><input type="checkbox"/> translate word(s), phrase(s), or sentence(s)</li> <li><input type="checkbox"/> read and model think aloud</li> <li><input type="checkbox"/> drawing or pictorial representation</li> <li><input type="checkbox"/> writing on familiar, concrete topics</li> <li><input type="checkbox"/> scaffold writing assignments</li>   <li><input type="checkbox"/> other _____</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> peer and native language support</li> <li><input type="checkbox"/> gestures for added emphasis</li> <li><input type="checkbox"/> simple conversations (words/phrases)</li> <li><input type="checkbox"/> visuals 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<li><input type="checkbox"/> writing on familiar, concrete topics</li> <li><input type="checkbox"/> scaffold writing assignments</li>   <li><input type="checkbox"/> other _____</li> </ul>
<b>Teacher's Signature:</b> _____	<b>Teacher's Signature:</b> _____	<b>Teacher's Signature:</b> _____

Prior Year TELPAS:							
L		B		I		A	AH
S		B		I		A	AH
R		B		I		A	AH
W		B		I		A	AH

**TEACHER:** \_\_\_\_\_

**GRADE:** \_\_\_\_\_

**ACADEMIC YEAR:** \_\_\_\_\_

**CONTENT AREA:** \_\_\_\_\_

