Miami-Dade County Public Schools Supplemental Monitoring Form For Use in ESOL and ESE Classrooms

For Use in ESOL and ESE Classrooms						
School Name			School #			
Assessment Program		Test Subject		Room #		
Classroom Type: ESOL ESE Number of Students						
Please circle your response to the following questions based on your observations and information provided by the School Assessment Coordinator and/or Test Administrator.						
1.	Were student's IEP's, 504 plans a for individual accommodations?	nd or LEP plans revie	wed in planning	Yes	No	
English for Speakers of Other Languages (ESOL) Classrooms						
1.	Were LEP Students tested in a se heritage language teacher acting			Yes	No	Not Observed
2.	Were dictionaries made available	to LEP students durin	ng testing?	Yes	No	Not Observed
	If yes, were only word to word dic	tionaries used by the	students?	Yes	No	Not Observed
3.	Were LEP students provided with assessment?	additional time to con	nplete the	Yes	No	Not Observed
4.	Did the test administrator provide heritage language?	test directions to stud	ents in their	Yes	No	Not Observed
5.	Were LEP students provided with in their heritage language during		on-one basis in	Yes	No	Not Observed
6.	Did the ESOL Test Administrator individual LEP students did not in taking of the other students in the	terfere with the conce		Yes	No	Not Observed
Exceptional Student Education Classrooms*						
1.	Were ESE students answering te methods (such as Braille, signing	1 0		Yes	No	Not Observed
	If yes, please list the observed read	sponse format(s) on th	ne back of this form.			
2.	Were ESE students provided with assessment?	n additional time to cor	nplete the	Yes	No	Not Observed
3.	Was the test session divided into	shorter test administra	ation segments?	Yes	No	Not Observed
4.	Did the ESE Test Administrator a individual ESE students did not in test taking of the other students in	terfere with the conce	,	Yes	No	Not Observed

Comments: Please explain any procedures or occurrences that may have seemed unusual on the back of this form.

Monitor Print Name

Monitor's Signature

Date

*Students classified as disabled under Section 504 Rehabilitation ACT of 1973 are also entitled to receive these accommodations.