

School year: 2017-2018 2018-2019 2019-2020 2020-2021

Reason for appointment: Initial Assessment/Orientation Follow up

FOR OFFICE USE ONLY	
Student ID number _____	
ESL placement score: _____ Level: _____	
Orientation: <input type="checkbox"/> Y <input type="checkbox"/> N	
Assessment: <input type="checkbox"/> Y <input type="checkbox"/> N	
Ed Plan completed: <input type="checkbox"/> Y <input type="checkbox"/> N	
CELSA: <input type="checkbox"/> Y <input type="checkbox"/> N	

Student full name: _____ Date of birth: _____ Today's date: _____

Student goal. Check all that apply:

- Earn a Career Technical Education Certificate without Transfer
- Pursue educational development (intellectual, cultural)
- Formulate career goals/Prepare for new career (acquire job skills)
- Transition from Noncredit to Credit courses
- Advance in current job/career (update job skills)

CORE COURSES

School year	Term		Certificate ESL Beginning		
	Fall	Spring	ESLN Core Skills Level 10	Completed	Needed
			ESLN 10A Beginning ESL A	<input type="checkbox"/>	<input type="checkbox"/>
			ESLN 10B Beginning ESL B	<input type="checkbox"/>	<input type="checkbox"/>
			or		
			ESLN 10L Beginning ESL-Long	<input type="checkbox"/>	<input type="checkbox"/>

Certificate awarded, date: _____

School year	Term		Certificate ESL High Beginning		
	Fall	Spring	ESLN Core Skills Level 20	Completed	Needed
			ESLN 20 High Beginning ESL A	<input type="checkbox"/>	<input type="checkbox"/>
			ESLN 25* High Beginning ESL B	<input type="checkbox"/>	<input type="checkbox"/>
			or		
			ESLN 20L Beginning ESL-Long	<input type="checkbox"/>	<input type="checkbox"/>

Certificate awarded, date: _____ *Students placed into ESLN25 - have ESLN20 waived.

School year	Term		Certificate ESL Low Intermediate A		
	Fall	Spring	ESLN Core Skills Level 30	Completed	Needed
			ESLN 30 Low Intermediate ESL A	<input type="checkbox"/>	<input type="checkbox"/>
			or		
			ESLN 30L Low Intermediate ESL-Long	<input type="checkbox"/>	<input type="checkbox"/>

Certificate awarded, date: _____

School year	Term		Certificate ESL Low Intermediate B		
	Fall	Spring	ESLN Core Skills Level 35	Completed	Needed
			ESLN 35 Low Intermediate ESL B	<input type="checkbox"/>	<input type="checkbox"/>
			or		
			ESLN 35L Low Intermediate ESL-Long	<input type="checkbox"/>	<input type="checkbox"/>

Certificate awarded, date: _____

School year	Term		Certificate Academic ESL Preparation		
	Fall	Spring	ESLN Core Skills Level 40	Completed	Needed
			ESLN 40A Credit ESL Preparation A	<input type="checkbox"/>	<input type="checkbox"/>
			ESLN 40B Credit ESL Preparation B	<input type="checkbox"/>	<input type="checkbox"/>
			or		
			ESLN 40L ESL Credit Preparation-Long	<input type="checkbox"/>	<input type="checkbox"/>

Certificate awarded, date: _____

Sequence Credit ESL – Level 50, Level 60, Level 70, Level 80: See a counselor for details

SPECIALTY CLASSES

School year	Term		Certificate Listening/Speaking Skills A		
	Fall	Spring		Completed	Needed
			ESLN 20L/S: High Beginning Listening and Speaking	<input type="checkbox"/>	<input type="checkbox"/>
			ESLN PRON: Noncredit ESL Pronunciation	<input type="checkbox"/>	<input type="checkbox"/>
			ESLN40L/S: Low Intermediate listening and Speaking	<input type="checkbox"/>	<input type="checkbox"/>

Certificate awarded, date: _____ *Choose at least two of these courses to complete the certificate.

School year	Term		Certificate ESL for Customer Service		
	Fall	Spring		Completed	Needed
			ESLV 001 ESL for Customer Service	<input type="checkbox"/>	<input type="checkbox"/>
			ESLV 011 Intermediate ESL for Customer Service	<input type="checkbox"/>	<input type="checkbox"/>

Certificate awarded, date: _____

School year	Term		Certificate ESL for Childcare Workers		
	Fall	Spring		Completed	Needed
			ESLV 004 English for Childcare A	<input type="checkbox"/>	<input type="checkbox"/>
			ESLV 005 English for Childcare B	<input type="checkbox"/>	<input type="checkbox"/>

Certificate awarded, date: _____

Term	Section	Section/Course Title	Site/Rm	Day(s)	Start time	End time

Student's signature _____ Counselor initials _____ Date _____

Notes: