



# Refusal of Placement in English Learners (EL) Program

Multilingual Education Program

Frederick County Public Schools  
191 South East Street  
Frederick, Maryland 21701

Form #002-F12E  
July 2023

Clear Form

Date		State ID	
Last Name	First Name	M.I.	Local Student ID
School		Grade	

By checking “No” on the *Notification of Placement* letter you have indicated that you do not wish your child to participate in the EL program for the \_\_\_\_\_ school year. The purpose of this letter is to clearly communicate what your decision means about your child’s identification as an English learner (EL). Please read the information below, sign the acknowledgment of understanding at the bottom of the page, and return this letter to the ESOL teacher at your child’s school.

As required by federal legislation, a student whose overall proficiency level on the English language proficiency (ELP) assessment is below 4.5 **must be** identified as an EL in Maryland. A student identified as an EL must be offered ESOL Program services until he/she meets the state exit criteria.

As an EL, the student is eligible to receive the following components of the EL program:

1. Direct English language development (ELD) instruction which includes teaching strategies differentiated by ELP level
2. Support for other content-level and grade-level classes and progress monitoring
3. Accommodations through the implementation of an EL plan as required by federal legislation in all instruction and assessments, including classroom, local, and state assessments
4. Support in meeting the requirements for graduation
5. Invitations to all parent, family, and community engagement activities

**If you refuse EL Program services, the only one of these components that your child will not receive is No. 1 (direct ELD instruction). Your child will be tested annually with Maryland’s ELP assessment to measure his/her progress in learning and attaining English. He/she will be identified as part of the EL student group for all state testing requirements.**

You will be provided with your child’s ELP assessment results and informed of his/her eligibility or non-eligibility for the EL Program.

### ACKNOWLEDGEMENT OF UNDERSTANDING

I understand I must complete this refusal process every year my child is identified as an EL. If I wish to resume direct ELD instruction for my child, I will contact the ESOL professional listed below:

Name	Title	Phone Number

**I understand the information provided to me and the implications of the decision I am making. I refuse EL Program services for my child.**

Parent’s/Guardian’s Signature	Date