



## English Language Academic Support Program Enrollment Agreement

The **English Language Academic Support Program** provides assistance and accommodations to meet students' unique academic learning needs. The goal of this program is to equip students to achieve their full potential while participating in the general education classroom to the greatest extent.

Enrollment into the **English Language Academic Support Program** at UC Academy has been recommended for your child. He/she will receive specialized support and/or instruction within our differentiated English support program. This program will support the needs of our English learners in language development while supporting their classroom instruction. UC Academy values academic success and has provided this program to assist students to gain the confidence and knowledge in building language proficiency. If your family desires to be part of the program, please provide the below information needed to confirm your child's participation in the **English Language Academic Support Program** and email back to **Darlene Plant, ASP Director [dplant@ucacademy.org](mailto:dplant@ucacademy.org)**

**Student Name:** \_\_\_\_\_

**School Year & Grade:** \_\_\_\_\_ **Teacher** \_\_\_\_\_

**Native Language** \_\_\_\_\_ **Home Language Spoken** \_\_\_\_\_

**Start Date** \_\_\_\_\_ **Subject of support requested** \_\_\_\_\_

### Support Includes:

- Facilitate collaboration of faculty, families and other stakeholders to design learning pathway
- Initial language assessment
- Scheduled progress monitoring
- Academic weekly pull-out intervention to facilitate growth in reading, writing, listening, and speaking (2-3 pull out sessions per week) (30-minute sessions)
- Test reader accommodations for in-class assessments as needed in core classes
- Instructional accommodations as determined by academic team (k-8<sup>th</sup>)
- Individualized learning program that supports life skills/academic support, vocabulary and language development
- Monthly checkpoints with instructional teacher(s)
- Afternoon open study sessions
- Gradebook monitoring
- ASP teacher observations within classrooms
- Observation/ Session Notes

**Cost Per Month: (k-12<sup>th</sup>) \$400 plus one-time materials fee**

My signature below gives consent for my child to be enrolled in the Academic Success Program. We assume responsibility for costs associated with this enrollment, and we understand that our school account will be billed each month unless otherwise arranged with the finance office. Additionally, signed consent acknowledges that students receiving services during an elective may receive a null grade for the course, which will not impact a student's weighted GPA. Services can begin only after a completed form has been submitted, and pull-out services begin only once intervention times have been confirmed by the teachers and family.

**Parent/Guardian Name (Print):** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**ASP Representative:** \_\_\_\_\_

**Date:** \_\_\_\_\_