



**Department of
Education**

Joel I. Klein
Chancellor

ASSESSMENT MEMORANDUM #2, 2008-2009

DATE: September 3, 2008

TO: COMMUNITY SUPERINTENDENTS
AND PRINCIPALS OF ALL SCHOOLS

FROM: Grace Pepe, Director of Assessment Operations 
Office of Accountability (OA)

SUBJECT: Administration of the Language Assessment Battery-Revised (LAB-R) and the Spanish LAB for General and Special Education Students

PURPOSE

The revised Language Assessment Battery reflects the current diagnostic trends in determining if a student is in need of bilingual education or English as a Second Language (ESL) services. LAB-R will be administered only once to a student to determine eligibility for bilingual education or English as a Second Language (ESL) services. New York State developed the New York State English as a Second Language Achievement Test (NYSESLAT), which is administered in the spring, to determine whether the student will continue to receive services for the next school year.

All LAB-R eligible new entrants must be tested in Fall 2008. **LAB-R eligible students must be tested within the first ten days of initial enrollment.** Refer to LAB-R Teacher Directions regarding procedures for administering the exam.

Service eligibility for new entrants is determined by cut scores on LAB-R. For Levels III, IV, & V, neither the Speaking Subtest nor the Writing Rubric for Level V is mandatory. If a student has been administered the LAB-R in error, the student must test out of services on the NYSESLAT. LAB-R may not be given again.

The following procedures for the identification and placement of new English Language Learners (ELLs) must be used for all new entrants who are starting school in 2008-2009. Please refer to Attachment #2 for details regarding procedures from the New York State Education Department (SED) for details regarding procedures for identification and placement of new ELLs.

NEW FOR 2008: Pre-slugged answer documents for kindergarten with Home Language "Yes" for fall will only be distributed in August.

NOTE: REMEMBER TO USE ONLY FORM "B" OF THE LAB-R AND THE REVISED HOME LANGUAGE IDENTIFICATION SURVEY (HLIS) Attachment #3.

See the attached memorandum dated April 28, 1999 (Attachment #1) regarding procedures for determining appropriate service language for students with disabilities who had previously scored at or below the 40th percentile on the old LAB but who had not been serviced, and for new entrants with disabilities who scored below the appropriate cut scores on the LAB-R.

A student who is classified as disabled and scores at or below the 40th percentile on the old LAB, or at or below the appropriate cut scores on the LAB-R, may not necessarily be an English Language Learner (ELL) as the score may be the result of a disability rather than a limited language skill.

Only the revised 2006 home language identification survey and criteria may be used to determine whether new entrants are LAB-R eligible.

CALENDAR

PLEASE NOTE: FOR 2008-09 THERE WILL BE 3 FALL PICK-UPS OF LAB-R AND CONTINUOUS PICK-UPS IN JANUARY, MARCH, AND JUNE. ALL LAB-R SCORES WILL BE POSTED IN ATS AS FALL 08 LAB.

Week of August 25	A supply of test booklets, blank answer documents and pre-slugged answer documents (level one kindergarten English students only) for LAB-R (Form B) and Spanish LAB (Form B) will be <u>DELIVERED</u> to schools.
September 2 through September 19	<u>ADMINISTER</u> LAB-R (Form B) or Spanish LAB (Form B) when appropriate to new entrants who were admitted between September 2 nd and 19 th .
September 19 by 12:00 noon	Completed answer documents are to be <u>RETURNED</u> to your Integrated Service Center.
September 22 through October 17	<u>ADMINISTER</u> LAB-R (Form B) Spanish LAB (Form B) when appropriate to new entrants who were admitted between September 22 nd and October 17 th .
October 17 by 12:00 noon	Completed answer documents are to be <u>RETURNED</u> to your Integrated Service Center.
October 20 through November 7	<u>ADMINISTER</u> LAB-R (Form B) Spanish LAB (Form B) when appropriate to new entrants who were admitted between October 20 th and November 7 th .
November 7 by 12:00 noon	Completed answer documents are to be <u>RETURNED</u> to your Integrated Service Center.
November 10 through January 16	<u>ADMINISTER</u> LAB-R (Form B) Spanish LAB (Form B) when appropriate to new entrants who were admitted between November 10 th and January 16 th .
January 16 by 12:00 noon	Completed answer documents are to be <u>RETURNED</u> to your Integrated Service Center.

January 20 through March 6 **ADMINISTER** LAB-R (Form B) Spanish LAB (Form B) when appropriate to new entrants who were admitted between January 20th and March 6th.

March 6 by 12:00 noon Completed answer documents are to be **RETURNED** to your Integrated Service Center.

March 9 through June 12 **ADMINISTER** LAB-R (Form B) Spanish LAB (Form B) when appropriate to new entrants who were admitted between March 9th and June 12th.

June 12 by 12:00 noon Completed answer documents are to be **RETURNED** to your Integrated Service Center.

TESTS TO BE ADMINISTERED

LAB-R (Form B)

LEVEL	TEST	GRADE	TIME (MINUTES)	ITEMS	TEST ANSWER DOCUMENT COLOR
I	Listening & Speaking	K-1	25	25	Green
I	Reading	K-1	12	15	Green
II	Listening	2-3	8	16	Orange
	Speaking		10	16	
	Reading		15	16	
	Writing		15	16	

* There is no time limit for any subtest in Levels I or II.
Times shown are approximate administration times.
All parts of Levels I and II are individually administered.

III	Listening (Parts I & II)	4-5	30	20	Blue
	Reading		35	25	
	Writing		20	25	
	Speaking (Individually Administered)		20	26	
IV	Listening (Parts I & II)	6-8	30	20	Blue
	Reading		35	25	
	Writing		20	25	
	Speaking (Individually Administered)		20	26	
V	Listening (Parts I & II)	9-12	30	20	Blue
	Reading		35	25	
	Writing		20	25	
	Writing Sample		20	1	
	Speaking (Individually Administered)		20	26	

For Spanish LAB (Form B), see Examiner's Directions for times, items, and group/individual administration.

CUT SCORES (LAB-R)**FALL 2008****Students Scoring At or Below These Cut Scores Are Eligible For Bilingual/ESL Services.**

LEVEL	GRADE	MAXIMUM SCORE EXCLUDING SPEAKING	LAB-R SCORE	LAB-R SCORE	MAXIMUM SCORE INCLUDING SPEAKING	LAB-R SCORE
I	K	NA	NA	NA	26	0-17
I	1	NA	NA	NA	33	0-21 (Beg/Inter)
II	2	NA	NA	NA	48	0-32
II	3	NA	NA	NA	53	0-37 (Beg/Inter)
III	4	54	0-29	NA	80	
III	5	58	0-33 (Beg/Inter)	NA	84	
IV	6	53	0-28	NA	78	
IV	7	56	0-31	NA	82	
IV	8	59	0-34 (Beg/Inter)	NA	85	
V	9	51	0-11	12-25	74	
V	10	53	0-14	15-28	79	
V	11	57	0-16	17-32	83	
V	12	58	0-17 (Beginner)	18-33 (Intermediate)	84	

LAB-R AND SPANISH LAB ANSWER DOCUMENTS**Grade MUST be bubbled on all LAB-R and Spanish LAB Documents**

On LAB-R answer documents, there is a bubble in the Test Status field that says "Tested But Unable to Answer Any Questions." If you fill in this bubble on the LAB-R answer document, the student's score will automatically be entered as a score of 0.

All Spanish LAB answer documents with shading in the subtest areas may be used, regardless of the year of printing.

EXTENT OF THE TESTING PROGRAM (including Special Education students)

NOTE: Parents of all new entrants are required to complete the Home Language Identification Survey (HLIS.) All new entrants whose HLIS form indicates a language other than English must take the LAB-R.

HLIS Identification

A student is considered to have a home language other than English when:

- One question (Part I: questions 1-4) indicates that student uses a language other than English.
- AND
- Two questions (Part I: questions 5-8) indicate that student uses a language other than English.

All new entrants whose HLIS responses indicate a home language of Spanish and scores at or below LAB-R cut scores must be administered the Spanish LAB only once at the time of initial enrollment.

English Creole speakers are NOT LAB-R eligible under the "Lau Plan." LAB-R may be administered to identify special program needs, but ANSWER DOCUMENTS MUST NOT BE SUBMITTED FOR MACHINE SCORING.

ABSENTEES

If a student who is officially on your register should be LAB-R tested and is absent during the entire fall testing period, an answer document must be submitted. Fill out the biographical information on the appropriate answer document and fill in the bubble next to "Absent." If Absent is not filled in and no response is indicated for one or more test items, no score (NSC) will be reported on rosters and no entitlement decision will be made. See LAB-R AND SPANISH LAB ANSWER DOCUMENTS on page 4 for students who are unable to answer any questions. Only one answer document for each version (English/Spanish) must be submitted for any one student. A student either took a version of the LAB-R test or was absent.

ADMINISTRATION PROCEDURES

Be familiar with instructions in the LAB-R Administration Manuals.

LAB-R must be scored in the school or Integrated Service Center in order to expedite appropriate student placement, and to determine whether or not there is a need to test students with the Spanish LAB. Be sure that No extraneous marks were made on the answer documents. Verification of hand scoring will take place by machine scanning all documents.

For Fall 2008 new entrant entitlement decisions, you must use the LAB-R Form B.

Fall 2008 Spanish LAB Form B norms were issued in Fall 1991.

LAB -R Form B is administered only once within the first ten days of initial enrollment.

For information on the use of test modifications, please refer to Assessment Memorandum #1, dated August 25, 2008.

TESTING SEQUENCE AND PROGRAM ENTITLEMENT

If you have any questions regarding LAB-R, Spanish LAB eligibility, and/or ELL entitlement, call your ELL Content Specialist or your Assessment Implementation Director (AID).

The testing sequence for program entitlement for General Education students appears below. (Note: The following procedures for program entitlement have been developed by the Office of English Language Learners in accordance with current legal decisions.) Refer to Assessment Memorandum #1, dated August 25, 2008 for test modifications for students with disabilities, students who have been decertified from Special Education with test accommodations, and General Education students with 504 Plans, for test accommodations.

State Education Commissioner's Regulations/CR Part 154 states that schools must administer the LAB-R to all new entrants whose home language is other than English.

Spanish LAB

All Spanish-speaking new entrants to a NYS school who score at or below the cut scores on the LAB-R must be administered the Spanish LAB only once during the same testing period in order to determine language dominance for instructional planning in providing bilingual and ESL services.

Spanish LAB scores are NOT used to determine entitlement under CR Part 154.

Continued Entitlement

Students who come from a home where a language other than English is spoken and who are entitled based on LAB-R testing, remain entitled until they test out by scoring at the appropriate level on a spring administration of the NYSESLAT.

TEST SECURITY

All test materials must be stored in a secure, locked facility at all times whether in the Integrated Service Center or in the school. The security of test materials in the school is the responsibility of the principal. This responsibility begins with the receipt of test materials. Under no circumstances should test materials be removed from the school or used for classroom instruction.

All test materials, including answer documents, must be collected and secured by the principal or designee at the end of each day's testing.

SECURITY VIOLATIONS MUST BE REPORTED IMMEDIATELY TO THE OFFICE OF THE SPECIAL COMMISSIONER OF INVESTIGATION (SCI) (212) 510-1500, AND TO THE AIDs. THE SED MUST BE CONTACTED FOR STATE TESTING IRREGULARITIES (518) 474-8220.

Student Cheating: Do not permit students to obtain information from or give information to other students in any way during the test. If you suspect that such an attempt has occurred, warn the students that any further attempts will result in the termination of their tests. If necessary, move the students to another location. If these steps fail to end attempts to obtain or give information, notify the principal immediately and terminate the students' tests. At the conclusion of the test, all suspected cheating must be reported to the principal. If, in the judgment of the principal, a student has given aid to or obtained aid from another person during the test, the principal must follow the school's disciplinary procedure for student cheating and invalidate the student's test. In addition, the principal must report the incident to the SED by fax to (518) 402-5596. Invalidated tests may not be scored.

RETURN OF ANSWER DOCUMENTS

In order to ensure the return of accurate test results, bubble in the following information on every answer document: Name, ID, Borough, District, School, Grade, Primary Language, Sex, and Date of Birth.

NOTE: IF YOUR ANSWER DOCUMENTS ARE NOT FILLED OUT CORRECTLY, THEY WILL NOT BE SCANNED.

Assemble the answer documents by grade, separating English from Spanish documents. Separate General Education from Special Education. (Include answer documents for absent students.) Include a signed copy of the principal's certification (Attachment #4).

Schools should package score documents following the procedures found in Attachments #5 and #6.

QUESTIONS

Refer any questions regarding this testing program to your ELL Content Specialist or to your AID.

Your continuing cooperation is greatly appreciated.

This memorandum is available at:
http://schools.nyc.gov/daa/testmemos_0809/default.asp.

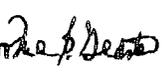
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Attachments

c: Marcia Lyles
James Liebman
Bonnie Brown
Arthur VanderVeen
Assessment Implementation Directors

MEMORANDUM

April 28, 1999

To: ALL SUPERINTENDENTS

From: Francine B. Goldstein  Executive Director -
Division of Student
Support Services

Burton Sacks  Chief Executive -
Community School District Affairs,
Monitoring & Municipal Relations

Subject: **Determining Appropriate Service Language for Students with Disabilities Who Score at or Below the 40th Percentile on the Language Assessment Battery**

Introduction

General education students who have an other than English home language as determined by the Home Language Identification Survey (HLIS) and who score at or below the 40th percentile on the Language Assessment Battery (LAB) are considered to be limited English proficient (LEP). However, students who are classified as disabled and score at or below the 40th percentile on the LAB may not necessarily be LEP as their score may be the result of a disability rather than limited language skill.

Appropriate Assessment Services

After determining that a student has a disability and needs special education services, Committees on Special Education (CSEs)/School Based Support Teams (SBSTs) must consider all variables as they make decisions regarding appropriate instructional services and service language. Variables to consider include language proficiency, educational/experiential background, cultural experiences, and learning characteristics.

Students who have other than English home languages as determined by the HLIS and who score at or below the 40th percentile (if testable) on the LAB, must be assessed:

- in both their native language and English by a bilingual clinical assessment team;
- using culturally non-biased assessments (refer to the *Test Resource Guide(s)* for guidance on the limitations and appropriate use of standardized tests);

- using information from parents, bilingual/ESL teachers, bilingual clinicians and others which includes observational data, social emotional behavior data, sociocultural information, and academic/educational test data; and
- using language assessments in both the native language and English, where possible, to determine the student's development in all areas including listening, speaking, reading and writing, etc.

Range of Service Language Options

CSEs/SBSTs have the responsibility to determine the appropriate service language for students determined to have a disability that scored at or below the 40th percentile on the LAB. Previously, if a student scored at or below the 40th percentile on the LAB that student was entitled to receive bilingual special education services or special education services with English as a Second Language. **Effective immediately, CSEs/SBSTs may now recommend a service language based upon individual needs. The recommendation may include:**

- **bilingual services; or**
- **monolingual services with ESL; or**
- **monolingual services without ESL.**

Such a determination must be appropriately documented and reviewed by the Regional Bilingual Coordinator.

Factors to Consider When Determining Appropriate Service Language

All clinicians should consider the following factors when determining the appropriate language of service for students with disabilities:

- home language use based on the HLIS responses and follow-up interviews with the parents and student;
- the levels of proficiency, both expressive and receptive, in the native language and English;
- scores on the LAB, including scores on the Spanish version of the LAB, and other available native language reading test scores (e.g., Spanish Reading Test-ELE, Chinese Reading Test, etc.) as appropriate;
- teacher observations of students' work over an extended period of time;
- portfolios and other samples of oral and written student work, both native language and English;
- informal student assessment information, including language samples and interviews in the native language and English; and
- school history including whether previous schooling has been interrupted, the number of years a student has received bilingual/ESL services, as well as a review of report cards and cumulative records.

Decision Making Process

Based on analysis and review of factors outlined above, CSE/SBST staff will reach one of three determinations:

1. bilingual instructional services are required; or
2. bilingual instructional services are not required but ESL instructional services are required to enable the student to continue to progress in acquiring the English language and to further develop English linguistic competence; or
3. bilingual and ESL instructional services are not required since the social history and other information reveal that there is no other language impacting on the student's language development, or the student has appropriate language skills required to ensure academic and social success in an English language setting.

Assurances

After the CSE/SBST determines the appropriate service language, the Regional Bilingual Coordinator must review the student's file.

The language service option chosen must reflect the needs of the student and may not be selected on the basis of availability of personnel, programs, or financial resources. These are never appropriate criteria for determining instructional services.

Students recommended to receive bilingual or ESL-only services will continue to require a bilingual assessment for any re-evaluation. For students who are recommended to receive an English monolingual program without ESL, future assessment will be conducted solely in English.

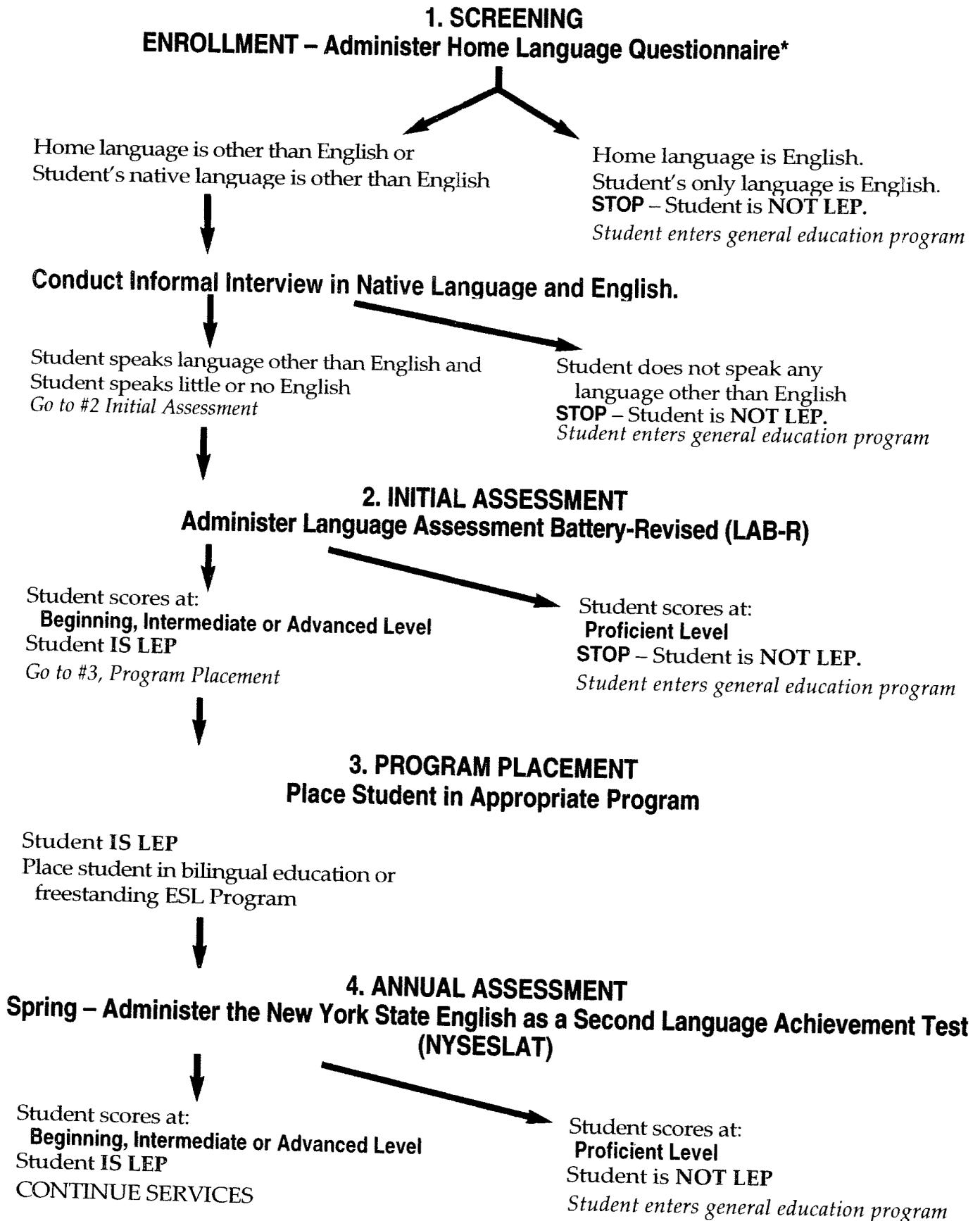
These procedures are to be implemented immediately. If you have any questions about the procedures described in this memorandum, please contact your Regional Bilingual Coordinator.

Thank you in advance for your cooperation in implementing these procedures.

BS/FG:me

c: Judith Rizzo
Margaret Harrington
Ronald Woo
Nilda Soto Ruiz
Lillian Hernandez
CSE Chairpersons/SBST Members
Executive Assistants to the HS Superintendents
District Administrators for Special Education
Regional Bilingual Coordinators
High School District Managers

New York State – LEP Identification Process



**The New York City Department of Education
Parent/Guardian Home Language Identification Survey**

Dear Parent or Guardian,

In order to provide your child with the best education possible, we need to determine how well he or she understands, speaks, reads, and writes English. In order to keep you informed, we would also like to know your language preference when receiving important information from the school. Your assistance in answering the questions below is greatly appreciated.

Thank You

TO BE COMPLETED BY ENROLLMENT OR SCHOOL PERSONNEL					
Region:	District:	Date:			
School:	Name of Student:				
Grade:	Class:	Student ID No.:			
Relationship of person providing information for survey (check one): Mother <input type="checkbox"/> Guardian <input type="checkbox"/> Father <input type="checkbox"/> Other <input type="checkbox"/> (specify):					
If an interview is conducted, list interviewer's name and title or relationship.					
In what language?					
If an interpreter is provided, list name and position/relationship:					
Is the interpreter trained/qualified (e.g., bilingual teacher, Translation & Interpretation Unit staff)? Yes <input type="checkbox"/> No <input type="checkbox"/>					
Eligible for LAB-R testing? Yes <input type="checkbox"/> No <input type="checkbox"/>					
Person determining LAB eligibility and signature:					
Lab Coordinator name and signature:					
OTELE ALPHA CODE: <table border="1" style="width:100%; height:20px;"> <tr> <td style="width:33%;"></td> <td style="width:33%;"></td> <td style="width:33%;"></td> </tr> </table>					
Program Placement: Transitional Bilingual Education <input type="checkbox"/> (Is this a transfer? Yes <input type="checkbox"/> No <input type="checkbox"/> Dual Language <input type="checkbox"/> Freestanding ESL <input type="checkbox"/>					

PART 1. LAB-R ELIGIBILITY: This information will establish eligibility for the English Language Assessment Battery-Revised (LAB-R). (✓) the box that applies. If another language is used, please specify.

1. What language does the child understand ?		
English <input type="checkbox"/>	Other <input type="checkbox"/>	
2. What language does the child speak ?		
English <input type="checkbox"/>	Other <input type="checkbox"/>	
3. What language does the child read ?		
English <input type="checkbox"/>	Other <input type="checkbox"/>	Does not read <input type="checkbox"/>
4. What language does the child write ?		
English <input type="checkbox"/>	Other <input type="checkbox"/>	Does not write <input type="checkbox"/>

**The New York City Department of Education
Parent/Guardian Home Language Identification Survey**

5. What language is spoken in the child's home or residence <u>most of the time</u> ?
English <input type="checkbox"/> Other <input type="checkbox"/> :
6. What language does the child speak with parents/guardians <u>most of the time</u> ?
English <input type="checkbox"/> Other <input type="checkbox"/> :
7. What language does the child speak with brothers, sisters, or friends <u>most of the time</u> ?
English <input type="checkbox"/> Other <input type="checkbox"/> :
8. What language does the child speak with other relatives or caregivers (e.g., babysitters) <u>most of the time</u> ?
English <input type="checkbox"/> Other <input type="checkbox"/> :

PART 2. INSTRUCTIONAL PLANNING: Responses to these supplementary questions will be used for instructional planning. Enter the correct response for each of the following questions concerning your child.

1. Is this the first time the child has attended a school in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No
IF NO:
Where did he/she go to school?
How long did he/she attend school?
Which language was used for instruction?
2. Has the child attended school in <u>another country</u> ? <input type="checkbox"/> Yes <input type="checkbox"/> No
IF YES:
Where did he/she go to school?
How long did he/she attend school?
Which language was used for instruction?
3. Did the child participate in any group experience prior to entering school (e.g., daycare, pre-school)? <input type="checkbox"/> Yes <input type="checkbox"/> No
IF YES: What language was used?
4. Does the child use any other form(s) of communication, such as American Sign Language or Augmentative Communication Device (e.g., Communication Board-manual/electronic)? <input type="checkbox"/> Yes <input type="checkbox"/> No
IF YES: Which ones?

PART 3. PARENT INFORMATION: Responses to these supplementary questions will be used so that the NYC Department of Education can communicate with you in the language of your choice.

1. In what language would you like to receive written information from the school?
2. In what language would you prefer to communicate orally with school staff?
Parent Signature _____ Date _____

LAB-R (ENGLISH)
AND
SPANISH LAB SHORT TEST – FALL 2008

Principal's Certification

(Return with answer documents)

TO: Office of Accountability Testing Section

The LAB-R and Spanish LAB answer documents enclosed have been completed and assembled according to directions. The answer documents have been carefully checked to see that the following information has been entered:

- Student Name
- Student NYC, ID Number
- Grade of Student
- Primary Language
- Special Education or Resource Room (if appropriate)

All answer documents are placed in an Office of Accountability pre-printed envelope with the appropriate information entered on the envelopes.

I am aware that **GRADE** information is absolutely necessary to compute final student scores. If this information is not correct on each answer document, no entitlement decision will be made.

The school contact person is _____ Phone # _____

Borough _____ District _____ School _____

Principal's Signature

Date

It is the teacher's responsibility to make certain that the biographical side of each answer document is complete and correct. Before each test administration begins, all biographical information must be completed for all students. The teacher must verify each student's NYC ID Number, Name, and Date of Birth. This can be accomplished by consulting the student's official record card ID label. See your Pupil Accounting Secretary when questions arise.

ALL BIOGRAPHICAL INFORMATION MUST BE EXACTLY THE SAME ON BOTH THE ENGLISH VERSION AND SPANISH ANSWER DOCUMENTS. If both are needed.

FOR VERIFIED PRE-SLUGGED/PRE-PRINTED ANSWER DOCUMENTS, ONLY ENTER THE CHECKED () ITEMS INDICATED BELOW. FOR BLANK ANSWER DOCUMENTS, ALL ITEMS MUST BE ENTERED AND BUBBLED.

1. **NAME (Last, First, MI)-Left - justify. Enter and fill in. Make certain that the first letter of the last name is entered in the first box. DO NOT LEAVE ANY SPACES OR USE HYPHENS, APOSTROPHES, ETC.**
2. **NYC ID NUMBER - Carefully enter the 9 digit number. DO NOT OMIT. This item must be entered completely and accurately. See your Pupil Accounting Secretary when questions arise, OR refer to student's official record card ID label.**
3. **SEX - Fill in Male or Female.**
4. **DATE OF BIRTH - Fill in month, day and year.**
5. **GRADE - Fill in the grade. If grade is not filled in, the test can not be scored.**
6. **PRIMARY LANGUAGE - (Home Language) - Fill in the appropriate bubble for the student's Home Language. If this item is omitted, entitlement cannot be determined.**
7. **TEST STATUS**
TESTED WITH MODIFICATION - Fill in for Resource and Special Education students who are tested with modification (see other codes). ABSENT-Fill in only for a student who is not present during the scheduled test administration.
8. **CATEGORY - Fill in for any students participating in a Resource Room or Special Education program.**
9. **OTHER CODES**
COLUMN B - For grades 1 and 2 students ONLY, fill in Kindergarten experience: (1) All - day Kindergarten; (2) Half - day Kindergarten; (3) No Kindergarten.

COLUMN C - Fill in modification(s) students are tested with; (1) Time limit extended or waived; (2) Examination administered in special location; (3) Questions read aloud; (4) Answer recorded in any manner; (5) Braille and large type.
10. **FORM - BUBBLE IN "B".**
11. **BOROUGH, DISTRICT, SCHOOL NO., CLASS - Fill in the appropriate bubbles. (Only three digit class code may be used).**

M E M O R A N D U M

DATE: September, 2008

TO: **PRINCIPALS OF ELEMENTARY, INTERMEDIATE AND JUNIOR HIGH SCHOOLS, HIGH SCHOOL PRINCIPALS, ASSESSMENT IMPLEMENTATION DIRECTORS, AND BILINGUAL COORDINATORS**

FROM: Grace Pepe, Director of Assessment Operations
Office of Accountability (OA)

SUBJECT: **RETURN OF SCORE DOCUMENTS
LANGUAGE ASSESSMENT BATTERY (LAB-R) & SPANISH LAB
GRADES K - 12**

General Education score documents are to be grouped together by grade, one grade per polybag with a completed grade header sheet inserted on top. Bubble "**Grade Number**" (i.e. Grade One) for teachers name and 000 for class.

Special Education students' score documents, in both self-contained and **District 75** programs are to be grouped by grade, one grade per poly bag, with one completed grade header inserted. Bubble "**Special Education**" for teacher's name and **000** for class.

Completed grade sets of score documents must be placed into individual polybags and then in the Document Return envelopes with Borough, District, and School clearly marked. A separate envelope is needed for LAB-R and Spanish LAB documents.

Your cooperation is greatly appreciated since the proper and orderly return of your school's score documents will assist us in processing these documents quickly and accurately.

Questions pertaining to the use of these materials should be directed to the Assessment Implementation Directors (AIDs) at your Integrated Service Center (ISC).

GP: am
Enclosures