** Language Observation Checklist – Part A**

**This form must be completed by English speaking teacher(s) in collaboration with program staff familiar with the student.**

**Student Name:**      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Alaska Student ID #**

(Last Name, First Name)

**School:**       **Grade:**        **Language:**

(home language other than English)

Compared to *Standard English-speaking* students of the same age, does the student consistently exhibit any of the following characteristics when listening, speaking, reading or writing?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Characteristics** | **Oral** | **Oral** | **Written** | **Written** |
| 1. Uses pronouns, genders correctly. | Yes | No | Yes | No |
| 1. Uses tenses correctly. | Yes | No | Yes | No |
| 1. Uses singular & plural forms correctly. | Yes | No | Yes | No |
| 1. Uses prepositions correctly. | Yes | No | Yes | No |
| 1. Understands teacher directions. | Yes | No | Yes | No |
| 1. Uses appropriate sentence structure. | Yes | No | Yes | No |
| 1. Uses developmentally appropriate vocabulary. | Yes | No | Yes | No |

**Reading – Please check one:**

Non-Reader (not reading)  Developing Reader (reading below grade level)  Fluent (at or above grade level)

Comments:

**Writing – Please check one:**

Non-Writer (not writing)  Developing writer (writing below grade level)  Fluent (at or above grade level)

Comments:

**Oral – Please check one:**

Non-Speaker (non-English speaker)  Developing speaker (speaks below grade level)  Fluent (at or above grade level)

Comments:

Printed Name:       Position:

Signature:       Date (Month/Day/Year):

Printed Name:       Position:

Signature:       Date (Month/Day/Year):