

SAMPLE IAP

English Language Learner Individualized Academic Plan (IAP) for: _____

Date of Birth:

Grade:

Date of U.S. Entry:

Country of origin:

School:

Primary Language in the home:

Number of years receiving ESL instruction:

Parents require translation in native language:

School Year:

IAP Meeting Date:

Teacher observations and input about the student:

Student ELD Goals

Reading:

Writing:

Listening:

Speaking:

Post-secondary Transition

Post-secondary Goal: employment

trade school

2 year college

4 year college

Area of interest:

Student will graduate by:

full credit

EL IAP Goals/describe plan

English Language Proficiency Assessments

	WIDA Screener	ACCESS (Year 1)	ACCESS (Year 2)	ACCESS (Year 3)	ACCESS (Year 4)	ACCESS (Year 5)	ACCESS (Year 6)
Speaking Proficiency Level							
Listening Proficiency Level							
Reading Proficiency Level							
Writing Proficiency Level							
Oral Language Proficiency Level							
Comprehension Proficiency Level							
Overall Proficiency Level							

State Summative Assessments

Year/Content	English Language Arts Achievement Level	Mathematics Achievement Level	Science Achievement Level
Grade 3			N/A
Grade 4			N/A
Grade 5			
Grade 6			N/A
Grade 7			N/A
Grade 8			
EOC – English II		N/A	N/A
EOC – Algebra I	N/A		N/A
EOC - Biology	N/A	N/A	