

YOUR LETTERHEAD

(DATE)

Dear Parent/Guardian:

We are writing to ask for your support in an important effort that [DISTRICT] is undertaking to strengthen teaching and learning for our District's English Learners or ELs (students who are learning English while they learn academic subjects).

A team of leaders from the District and community will visit schools during the week of [DATE] to better understand the learning opportunities and experiences of ELs. We will observe some EL students individually as they move through the school day, to understand their opportunities for learning English and academic subjects.

We are asking for your help in the following way. At each school we visit, we will select several EL students to follow during the school day. We will follow each selected student at a distance for part or all of the school day. Observers will note how these students engage in learning and use language. We will *not* evaluate students, teachers, or schools in these observations. We will also not talk to the students or interrupt their learning, although we may briefly explain what we are doing if the student asks us.

After we observe students' learning, we will analyze our observations, then put them together to form a picture of the experience of ELs. Students will not be identified, and all information gathered will be confidential and anonymous. Only unidentifiable, summary information will be shared in order to describe current EL student experiences and identify areas for improving students' language- and academic-learning opportunities.

Please indicate your willingness to have your student be observed by completing the attached form, signing and dating it, and returning it to the school office by [DATE].

If you have further questions, please contact [DISTRICT CONTACT] at [phone number] or [email]. We hope you will support us in this effort to strengthen the success of our English Learners. Thank you very much for considering this request.

Sincerely,

YOUR LETTERHEAD

Strategic Improvement Plan for EL Success: School Site Visit

[DATE]

Please check one of the following, sign and date the form, and return it to the school office by [DATE].

TO: [DISTRICT CONTACT]

- YES, I am willing to have my student be observed during the school day during the week of [DATE].

- NO, I do **not** wish my student to be observed during the school day during the week of [DATE].

Signed,

Signature

Print Name

Name of Student