

(Provider Name) _____

**NORTH CAROLINA STATE REFUGEE OFFICE
ENGLISH LANGUAGE TRAINING
INITIAL ASSESSMENT FORM (DSS-6234)**

Section One

CLIENT NAME _____

A# _____ DATE OF ARRIVAL _____ DATE OF BIRTH _____

Substituting Approved Assessment: YES NO

If YES, stop here and attach completed assessment to file. If NO, continue with Section Two.

Section Two

ASSESSMENT OF MINIMAL ELT COMPETENCIES

PART A ORAL PLACEMENT TEST

Scale:

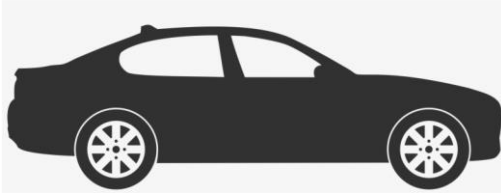
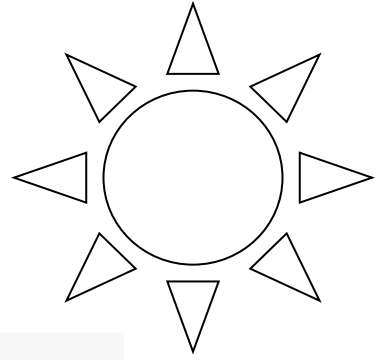
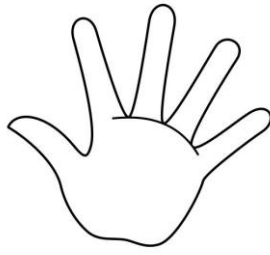
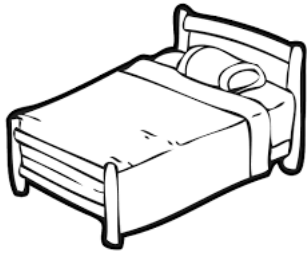
0 - no response / incorrect response

1 - partial response / grammatically incorrect

2 - correct and complete response / grammatically correct

Question	2 points	1 point	0 points
1. What is your name?			
2. Where do you live?			
3. How long have you lived in _____?			
4. Can you drive?			
5. Tell me about something that you do every day.			
6. I like to read books in my free time. What do you like to do in your free time?			
7. What languages do you understand?			
8. What work did you do before you moved to the United States?			
9. Did you go to school? How many years did you complete?			
10. Tell me about the picture(s). <i>See below.</i>			

TOTAL SCORE: _____ / 20



Scale:

- 0 - no response / incorrect response
- 1 - describes pictures from top of page / partial response
- 2 - describes all pictures / grammatically correct

PART B LITERACY EVALUATION

Instructions: Fill in the blanks below.

A	B	C	_____	E	F	G	_____	I	J	K	_____	M	N	O	_____
				Q	R	_____	T	U	V	_____	X	Y	_____		

Instructions: **Copy** the letters below in the space provided.

O	Q	W	M	N	C	P
_____	_____	_____	_____	_____	_____	_____

Instructions: Write the answers to the following questions in any languages you know.

1. What is your name? _____

2. What country are you from? _____

3. Describe the weather today. _____

Literacy Score: Each section: 2 = correctly filled in, 1 = partially filled in, 0 = not completed

Total Score: _____/10

PART C READING/WRITING EVALUATION

COMPLETE THE REGISTRATION FORM IN ENGLISH

Please Print:

- 1. NAME: _____
 Last First Middle
- 2. ADDRESS: _____
 Number Street Apt./Unit
- _____
- City State Zip Code
- 4. TELEPHONE: _____

- Area code Number
- 5. COUNTRY OF ORIGIN: _____
- 6. HOW OLD ARE YOU? _____
- 7. ARE YOU MARRIED OR SINGLE? _____
- 8. WHAT IS YOUR EDUCATION / WORK HISTORY? _____
- _____

Writing Score: Each section: 1 = correctly filled in, 0.5 = partially filled in, 0 = not completed

Total Score: _____ / 8

PART D ENGLISH GRAMMAR EVALUATION

Instructions: Read the following sentences and choose the correct word in parentheses.

Example: I am 25 years old. (have, am, has)

1. My name _____ Robert. (are, called, is)
2. We are students. That's _____ classroom (us, our, is)
3. _____ Linda have a nice house? (Do, Have, Does)
4. The picture is _____ the wall. (in, on, from)
5. It's 11pm. Right now, I am _____. (sleeping, sleep, sleeps)
6. I'm _____ Brazil. (of, from, made)
7. Amina has a big house. She's happy _____ proud (or, and, also)
8. The stove is _____ the kitchen. (in, on, from)

SCORE: _____ / 8

PART E WRITING EVALUATION

Instructions: Write about your favorite food.

Writing Score: _____/5

4-5 Comprehensible with minimal mistakes

2-3 Understandable but several grammar mistakes

0-1 Incoherent

End of Assessment

ELT PLACEMENT TEST SCORES

PART A - ORAL SCORE: _____/20

Assessor's observations: _____

PART B - LITERACY TEST INFORMATION: _____/10

- cannot read/write in any test language
- languages read/written: _____
- ease of writing: quickly average slowly

PART C: READING/WRITING EVALUATION SCORE: _____/8

PART D: GRAMMAR: _____/8

PART E: WRITING EVALUATION SCORE: _____/5

RECOMMENDATIONS:

Student's English Ability described as: Very Well Well Not Well Not at All

RECOMMENDATION TO ENROLL IN: Beginner Intermediate Advanced

MATERIALS RECEIVED: _____

STUDENT SIGNATURE : _____	DATE: _____
ASSESSOR'S SIGNATURE : _____	DATE: _____

Instructions for ELT Learner Initial Assessment Form DSS-6234

PURPOSE: The purpose of this form is to provide a vehicle to assess the client's English language proficiency and English literacy, and to determine the appropriate level of English Language Training.

GENERAL INSTRUCTIONS:

This form should be filled out in conjunction with the **English Language Training Service Plan (DSS-6233)**.

This form should be completed prior to placement or within first ten (10) days of instruction (tutoring or classes). This form should be completed a 2nd time upon exiting the program or before a client is placed into the next level of classes.

In lieu of the DSS-6234, the ELT Coordinator or designee may substitute an approved NC Department of Community Colleges ESL assessment, such as CASAS or BEST, for students who will be enrolled in classes that are part of the local community college or literacy council. If you are substituting this form, please fill out only Section One on page 1, mark YES in Section One, and include only the first page of this assessment in the file.

Complete as follows:

Provider Name – enter the name of the agency completing form

Name – enter the client's full name

A# - enter the client's alien number

Date of Arrival – enter the client's date of arrival or date of eligibility

Date of Birth – enter the client's date of birth

Part A Oral Placement Test

This is a spoken test graded by points to assess competency. Instructor should ask numbered questions and ask client to describe pictures on page 2, and grade according to oral response from client. Point system is listed at bottom of test.

Part B Literacy Evaluation

Instruct the client to fill in the blanks in the alphabet and copy the letters in the space provided. Have the client answer the questions in any languages they know, including English if applicable. Score according to writing score listed at the bottom.

Part C Reading/Writing Evaluation

Instruct client to fill out the form in English. Score according to point system.

Part D Grammar Evaluation

Instruct client to choose which word best fits the sentence. Enter score of the number of correct words chosen.

Part E Writing Evaluation

Instruct client to write a short paragraph about their favorite food. Score according to point system.

ELT Placement Test Scores

Enter client's scores. Enter Assessor's observations and scores. Enter recommendations for clients. Check Level of enrollment for client. List any materials client received.

Level 1/ Beginner is designed for students who either have no language ability whatsoever or who function minimally in English. A few of those learners can handle only very routine entry-level jobs that do not require oral communication, and in which all tasks can be easily demonstrated. Individuals in Level 1 understand only a few isolated words, and extremely simple learned sentences. Their vocabulary is limited to a few isolated words. They have no control of grammar.

Level 2/ Intermediate is designed for students who function with some difficulty in situations related to immediate needs. These learners can handle routine entry-level jobs that involve most basic oral communication, and in which all tasks can be demonstrated. A few can handle entry-level jobs that involve some simple oral communication, but in which tasks can also be demonstrated. Students in Level 2 understand simple learned phrases, spoken slowly with frequent repetitions. They ask and respond to simple learned questions. They have some control of very basic grammar. Some participate in basic conversation in very routine social situations

Level 3/ Advanced is designed for low-intermediate students who are creating language on their own and no longer rely mainly on learned phrases to communicate. Level 3 focuses on work life, education, community resources, and personal interactions. Students at this level would benefit more if they were referred to and enrolled at a Community College ESL Program.

Student and Instructor/Assessor must sign and date form.