

Kindergarten Reidentification Form



OKLAHOMA
Education

An LEA wishing to reidentify a kindergarten student that has previously scored proficient on the oral language composite of the WIDA Kindergarten Screener administered 1st semester must complete this form, attach it to the student's HLS, and keep a copy in the student's cumulative folder.

A kindergarten student who scored proficient on the oral language composite may struggle in a mainstream classroom due to a noticeable language barrier.

Noticeable Language Barrier Definition

In education, a language barrier refers to the challenges and obstacles that arise when students and teachers do not share a common language, which can impede effective teaching and learning. This barrier can manifest in several ways, including:

- **Difficulty Understanding Instruction:** Students may struggle to comprehend lectures, instructions, and educational materials if they are not proficient in the language of instruction.
- **Limited Participation:** Students might find it hard to engage in classroom discussions, ask questions, or participate in group activities due to language limitations.
- **Access to Resources:** Language barriers can limit students' access to textbooks, online resources, and other educational materials that are available only in the dominant language.
- **Social Integration:** Language barriers can hinder students' ability to integrate socially with their peers, leading to feelings of isolation or exclusion.

In such instances, best practice dictates that educators:

- Analyze existing student assessment data
- Implement and document various forms of classroom interventions and the results of those interventions.

Based on the outcomes of these practices, it is at district discretion to recommend a kindergarten student for English language proficiency screening 2nd semester in all four domains regardless of proficient scores on the oral language composite 1st semester.

Student Information		
Student Name:	State Testing Number:	Current Student Grade:
Teacher Name:	District:	School:

1. RSA Universal Screeners

NRT ELA Percentile Ranking:		NRT Date:	
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2. Student ELA Grades (Spelling, Vocabulary, Reading, Writing, and English) Attach current report card.

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3. Teacher Recommendation (Reasons for recommending ELP screening and a description of interventions provided)

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Special Education Representative Recommendation (if applicable) (Reasons for recommending ELP screening and a description of interventions)

Name of Special Education Representative:

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LEA Staff Signatures

Date:

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EL Representative:

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Special Education Representative (if applicable)

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Classroom Teacher:

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Site Administrator:

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Other Participating Staff:

WIDA Kindergarten Screener - All four domains

Listening Score:		Reading Score:	
Speaking Score:		Composite Score:	
Writing Score:		Date Assessed:	