



School Staff Observation Form

This form should be submitted to the school ESL Coordinator for any student you feel may be having difficulty due to a home language background other than English.

Student Name: _____ Date: _____ Grade: _____

Check all that apply

- ☐ The student has indicated that a language other than English is spoken in the home.
- ☐ Conversation with the parent or guardian indicates that a language other than English is probably spoken in the home.
- ☐ I have observed this student speaking a language other than English in the classroom, cafeteria, halls, playground, or in other school situations.
- ☐ The student has experienced difficulty in understanding English in the classroom or has difficulty expressing her/himself in English.
- ☐ Other (please explain) _____

Signature / Position

Date