

Official Form

4. Curriculum and Instruction		
4.05.TPL.6 ALS HLS Exit Form		
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Student Name:		
Grade:		
The above mentioned student has been receiving ALS services due to an inaccurate home language survey. Below is an accurate Home Language Survey:		
First Language Spoken:		
Most Used Language:		
Home Language:		
Home Communication:		
LEP Student Language:		
I hereby request that the listed student be removed from ALS services.		
Parent/ Guardian Name:		
Parent/ Guardian Signatu	ure:	
Date:		