



LOS ANGELES UNIFIED SCHOOL DISTRICT
BEYOND THE BELL BRANCH

MEM-3998.0
 November 2, 2007

ATTACHMENT B

INTENT TO OFFER – ELEMENTARY
Extended Learning Program (ELP)
English Language Acquisition Program (ELAP)

School _____ Location Code _____ Local District _____

Contact Person _____ Telephone Number _____

Calendar: (Check one) Single Track 3-Track 4-Track Indicate Track: _____

Program: (Please complete an Intent To Offer Intervention for **each** program)

- Intersession EIEP ESY Migrant RLA
 ELP ELAP Grade 4 and 5 only TSP (PI-Yr 1)
 Local Design: Grant supported (indicate Program Code) Reduce class size _____ Other _____

This form is due 3 weeks prior to the start of each intervention offered.

Grade	Subject	Start Date	End Date	# of Classes	Days Offered Start & End Time	Total Hours	Total # of Days
K							
(Session 2)*							
1 st							
(Session 2)*							
2 nd							
(Session 2)*							
3 rd							
(Session 2)*							
4 th							
(Session 2)*							
5 th							
(Session 2)*							
6 th							
(Session 2)*							

***Session 2:** is for schools that offer more than one intervention session during the same period in order to accommodate more students.

Norm: ELP/ELAP classes are organized with an enrollment of 20:1. Intersession class size is 20:1. Daily attendance must be maintained. ELP/ELAP classes will be closed if attendance falls below 15 students. TSP classes are organized with an enrollment of 15:1. Daily attendance must be maintained.

 Principal Signature

 Date

MAIL OR FAX THIS FORM TO YOUR LOCAL DISTRICT INTERVENTION/TESTING COORDINATOR.
Allocation will be based on norm enrollment.