BROWNSVILLE INDEPENDENT SCHOOL DISTRICT
BILINGUAL/ESL EDUCATION PROGRAM

STANFORD 10 LPAC REQUEST FORM – GRADES 2-12

** PURPOSE: LPAC INITIAL ENTRY INFORMATION FOR ACADEMIC ACHIEVEMENT (CHAPTER 89.1225(a) 2)*
** CRITERIA: LEP STUDENTS WITH AN ENGLISH SELP LEVEL 4 OR 5 MUST TAKE THE STANFORD 10*
** REMINDER: STUDENTS SCORING.....*
ABOVE THE 40TH PERCENTILE IN BOTH READING AND LANGUAGE ARE CLASSIFIED AS NON – LEP
BELOW THE 40TH PERCENTILE IN BOTH AREAS ARE CLASSIFIED AS LEP AND MUST TAKE THE SELP

CAMPUS: _____ PRINCIPAL'S SIGNATURE: _____

DATE REQUESTED: _____ CONTACT PERSON: _____ EXT: _____ FAX: _____

GRADE	STUDENT'S NAME	PEIMS	DOB	ENROLLMENT DATE	Reading Result Bilingual OFFICE USE ONLY	Language Result Bilingual OFFICE USE ONLY

NOTE: TESTING MUST TAKE PLACE WITHIN 4 WEEKS OF STUDENT'S ENROLLMENT DATE. MUST BE ADMINISTERED BY A PROFESSIONAL.
THIS FORM MAY BE FAXED TO THE Assessment/Research/Evaluation Department AT 546-5579 ATTENTION – LUCY ESCAMILLA