

**Virginia Department of Education
2007-2008 English Language Proficiency Assessment
Locally Developed or Selected Assessments**

Cover Sheet

Please complete this form for all assessments submitted with required documentation. Submit by October 19, 2007, to:

Virginia Department of Education
Division of Student Assessment and School Improvement
P.O. Box 2120
Richmond, Virginia 23218-2120

School Division: _____ School Division Number: _____

Contact Person: _____ Title: _____

Phone Number: _____ E-mail Address: _____

English Language Proficiency Assessment: _____

Testing Plan

1. Grade Level: (Check the grade level(s) for which the assessment will be used.)

_____ Grade 2 _____ Grades 3-5 _____ Grades 6-8 _____ Grades 9-12

2. Skill Area: (Check all that apply to the assessment.)

_____ Listening _____ Speaking _____ Reading _____ Writing

(Photocopy as needed)