



LOS ANGELES UNIFIED SCHOOL DISTRICT
MEMORANDUM

MEM-4449.0
September 15, 2007

ATTACHMENT H

PULL-IN EL SUPPORT TEACHER
MONTHLY REPORT – MIDDLE SCHOOL
English Language Acquisition Program (ELAP)

School: _____ Telephone # _____ Local District _____

EL Support Teacher's Name _____ Month _____

EL Support Teacher Schedule:

Day(s) _____ Time/Period _____

Subject Area: English _____ Math _____
 Science _____ Social Science _____
 ESL _____

Total # of Students in Attendance : _____

EL Support Teacher Comments (Optional)

Teacher's Signature

Date

Principal or Designee

FAX EACH MONTH WITH ATTENDANCE REGISTER TO
THE LOCAL DISTRICT INTERVENTION COORDINATOR AND
FILE IN SCHOOL ELAP FILE