



LEVITTOWN PUBLIC SCHOOLS
 Levittown Memorial Education Center
 150 Abbey Lane
 Levittown, NY 11756



Student Name _____

Student ID# _____

Grade _____

ELL or Former ELL: YES or NO

World Language Teacher _____

Dear Student,

Please complete the information on the top portion of this application. This form is due by **2/15/24** to your Level 5/AP World Language Teacher.

Criteria for Demonstrating Proficiency in English

*NYS ELA CC Regents Score: (1Pt) _____

*11 th Grade ELA Final Average: (1Pt)	_____
*12 th Grade ELA Mid Term Average:	_____

*AP English Language Score (1Pt) _____

College Essay or English Research Paper (2Pts) _____

TOTAL PTS _____ **(MUST HAVE 3Pts)**

Criteria for Demonstrating Proficiency in World Language

Language of Study _____

*Level 4/4PreAP Final Average: (1Pt) _____

Seal of Biliteracy Project (2Pts) _____ Interpretive Tasks _____

TOTAL PTS _____ **(MUST HAVE 3Pts)**

Student Signature: _____

Director of WL Signature: _____

Date Seal of Biliteracy Awarded _____

*Grades to be verified