**District Seal of Biliteracy Notification Form**



*Oregon achieves . . . together!*

Oregon school districts will use this form to notify the Oregon Department of Education of their intent to offer the Oregon Seal of Biliteracy to students in their district.

**Submit this form electronically to:**

Taffy Carlisle at [taffy.carlisle@state.or.us](mailto:taffy.carlisle@state.or.us)

**Please place the form name and district in the email subject heading:**

**Seal of Biliteracy, <insert name of District>**

*We recognize that committing to this process requires that we agree:*

1. to the criteria set by the ODE and
2. to deliver program data and information pertaining to the Seal of Biliteracy program to the ODE via the Biliteracy Seal Data Collection during each scheduled window of the graduating year.

**Superintendent/Chief Administrative Officer or designee electronic signature.**

By entering your name below, you are signing this form electronically. You agree that your electronic signature is the legal equivalent of your manual signature on this form.

**District:**

**Name: Title: Date:**

**Email:**

***Note: ODE reserves the right to audit randomly a district’s program to verify and maintain the integrity of the Oregon State Seal of Biliteracy.***

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| High School | School ID | Address where Seals to be Mailed | County | Contact Name | Phone | Email |
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**The following table will provide information on the high schools in the district and to which mailing address and contact person the Biliteracy Seal certificates and stickers seals should be sent. . IF certificates and stickers are to be sent directly from the district coordinator, please indicate by providing their contact information also, and ONLY their mailing address in the third column.**

Please expand to create additional rows as needed.

*Districts interested in establishing a Seal of Biliteracy program must form a Seal of Biliteracy Committee (SBC) for the purpose of creating a Seal of Biliteracy plan, which includes committee recruitment, composition, program details, communications, student advisement, and presentation of awards.*

**Please answer the following questions as thoroughly as possible:**

1. List names, roles, and school, or district of the members on the SBC. (Suggested roles might be school administrator, counselor, world language teacher, ELD teacher, data team member, parent, and student.)

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| **NAME** | **ROLE/S** | **SCHOOL** |
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Please expand to create additional rows as needed.

1. Please describe how your district will communicate information about the Biliteracy Seal to students and parents in languages they can understand. How will your district seek out Current and Former English Learners to participate in the Biliteracy Seal opportunity?
2. Describe how your district will measure student language proficiency (in English and a Partner Language) through approved assessments or portfolios aligned to the American Council of Teaching of Foreign Languages (ACTFL) Intermediate High proficiency level, the Essential Skills/SBAC assessment, and on track for high school graduation. **Please include a copy of the scoring rubric you will use if you are using a portfolio measure.**