



Mrs. Hanen Abdallah, M.Ed.
Principal.

Mrs. Rosemary Sahloul
Assistant Principal

Mrs. Aminah Murrar
Assistant Principal

Universal School
7350 W. 93rd Street
Bridgeview, IL 60455
(708)599-4100 Fax: (708)599-1588
www.universalschool.org

Assessment of Performance toward Proficiency in Languages

Universal High School will offer the Assessment of Performance toward Proficiency in Languages (AAPPL) to demonstrate language ability in Arabic. Students who successfully complete testing and meet all other criteria will receive recognition through the Seal of Biliteracy.

The exams will be held at school during the second week of April- yearly; specific dates, testing time and location will be communicated later.

The cost of the AAPPL exam is \$10.

NOTE: For languages other than Arabic, students should contact Special Programs Coordinator Edgar Palacios at (708) 745-5212 for details.

Students should submit the Application for the Seal of Biliteracy by Friday, March 27, 2020 to their Arabic Languages Teacher. An email will then be sent by the school regarding payment through the district's online payment system. If a student is registered for an exam and cancels 48-hours before the administration of the exam, a full refund will be issued. After that time, no refunds will be issued.

For more information please visit the following:

<https://sealofbiliteracy.org/state-guidelines/>



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Application for Assessment of Performance toward Proficiency in Languages

Student Name _____

Grade _____

ID#/SS# (last four digits) _____ Date of Birth _____

Email _____ Phone _____

Teacher Name _____

The Illinois State Board of Education has approved the voluntary adoption by public high schools of the Seal of Biliteracy for graduating seniors who demonstrate Intermediate, high or Advanced proficiency in English and an additional language. Please indicate how you intend to demonstrate proficiency in English and Arabic.

English Proficiency is based on one of the following:

ACT _____ SAT _____

I understand that I will be testing in Arabic Proficiency during the week of April 11th, 2020. **YES:** _____

Accommodations If the student has an Individual Education Plan or 504 Plan that calls for specific assessment accommodations, please list the accommodations below. They will be submitted to the American Council on the Teaching of Foreign Languages (ACTFL) for analysis and logistic AAPPL administration feasibility. In cases of unfeasibility, as determined by ACTFL and impossibility to provide the needed accommodation on site with one of our high schools, the student will be notified prior to the morning of the assessment and be offered a full refund. List specific accommodations requested and approved by the school/district:

I understand that I will be testing in Arabic and that I must submit my ACT score.

Student Signature _____ Date _____

Parent/Guardian Signature _____ Date _____