

# STUDENT LEVEL CHECK

Teacher evaluation form | Page 1: live speaking observations

Student: \_\_\_\_\_ Date: \_\_\_\_\_ Teacher: \_\_\_\_\_

Purpose / class: \_\_\_\_\_ Task(s): \_\_\_\_\_

☐ Initial placement ☐ Progress check ☐ Follow-up

Task demand / intended level: \_\_\_\_\_ Tick one rating per row; use N/O if not observed.

**1** Limited success **2** Partial success **3** Generally effective

**4** Consistent control **5** Consistent, flexible control **N/O** Not observed

Task ratings, not CEFR scores. Do not total or average. Use the separate Level Check Rating Reference for criterion anchors.

| Criterion        | 1                        | 2                        | 3                        | 4                        | 5                        | N/O                      | Brief evidence / notes |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|------------------------|
| Task achievement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                  |
| Interaction      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                  |
| Fluency          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                  |
| Language range   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                  |
| Accuracy         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                  |
| Intelligibility  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | _____                  |

## Support / conditions

☐ Repeated prompt ☐ Slower delivery ☐ Rephrased prompt ☐ Vocabulary supplied

☐ Model supplied ☐ Access adjustment ☐ No additional help

Details / exact language worth keeping:

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Follow-up prompt / evidence still needed:

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# STUDENT LEVEL CHECK

Teacher evaluation form | Page 2: skill profile and teaching recommendation

Student: \_\_\_\_\_ Date: \_\_\_\_\_ Teacher: \_\_\_\_\_

Tick one tentative level per skill, or two adjacent levels for an uncertain range. Use NE if not assessed or the evidence is insufficient. A grammar score alone does not establish reading, writing or listening proficiency.

| Skill              | Below A1                 | A1                       | A2                       | B1                       | B2                       | C1                       | C2                       | NE                       |
|--------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Reading            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Writing            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Spoken production  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Spoken interaction | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Listening          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

NE = not assessed / insufficient evidence. Record language-knowledge patterns separately below.

## Written evidence

Test / version: \_\_\_\_\_ Writing task / level: \_\_\_\_\_

Conditions: \_\_\_\_\_ Reading / listening evidence IDs: \_\_\_\_\_

1 Limited success 2 Partial success 3 Generally effective

4 Consistent control 5 Consistent, flexible control N/O Not observed

| Criterion                    | 1                        | 2                        | 3                        | 4                        | 5                        | N/O                      |
|------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Task achievement*            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Organisation / coherence     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Range / register             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Accuracy / effect on meaning | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

\*Source use only if the task requires it. Evidence / language priorities (not a score conversion):

## Recommendation

Starting class/materials: \_\_\_\_\_ Review date: \_\_\_\_\_

☐ Provisional placement ☐ More evidence needed ☐ Adjacent-level task needed

☐ Confidence: low ☐ Confidence: medium ☐ Confidence: high

Priority 1: \_\_\_\_\_

Priority 2: \_\_\_\_\_

Next task / adjustment / reason for uncertainty: \_\_\_\_\_

Teacher signature: \_\_\_\_\_ Second reviewer (if used): \_\_\_\_\_

Use alongside Batch 78 guidance. Teacher judgement for classroom planning; not a validated CEFR result.