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**Change of Level Request Form: GRAMMAR 002**

(this section to be filled out by the student)

## Name: Date:

Current Class: Teacher:

Requested Class: Teacher:

I have spoken with my current teacher (circle one): Yes / No

I want to (circle one): move up / move down

I believe I have mastered the following GRM 002 Student Learning Outcomes (check the box ☑):

GRM 002 A-SLOs

* Correctly use possessive pronouns, adjectives and nouns in speaking and writing more consistently
* Use tenses learned in GRM 001 with positive/negative statements and questions in speaking and writing, while self-correcting
* Correctly order words when using basic grammar in speaking and writing, more fluently and confidently
* Use compound sentences in speaking and writing, with few errors
* Begin to use common subordinating conjunctions in speaking and writing, with errors
* Use the present real conditional sentences (real-life “ifs”) in speaking and writing, with errors
* Understand the differences between all ten modals and begin using them in speaking and writing
* Begin to use the past habitual tense (used to/would) in writing and speaking, with some errors
* Frequently use the present perfect tense in speaking and writing, when necessary
* Begin to use the past continuous tense correctly in speaking and writing, when appropriate
* Correctly use reflexive pronouns (himself, herself) in speaking and writing

GRM 002 B-SLOs

* Correctly use a variety of sentence types, including coordination and subordination, to enhance spoken and written expression
* Begin to use modal perfects (“could have gone”) in positive and negative statements and questions
* Begin to use the future real conditional sentences (real-life future “ifs”) in speaking and writing, with some errors
* Understand and begin to use the passive voice when appropriate, with errors
* Correctly use additions and responses (“so,” “too,” “either,” “but,”) as well as tag questions, in speaking
* Understand and more fluently use grammar learned in 002 A-SLOs in speaking and writing

(this section to be filled out by the teacher)

Teacher’s Comments:

Teacher recommendation: 🞎 remain in level 🞎 change level

Current Teacher’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_

Level change: 🞎 approved 🞎 denied

Administrator’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_