

# LINGUISTIC SKILLS GROWTH

Learner Name: \_\_\_\_\_

Target Language: \_\_\_\_\_

Start Date: \_\_\_\_\_

Review Period: \_\_\_\_\_

**CORE  
COMPETENCY**

**PROFICIENCY LEVEL  
(1-5)**

**KEY MILESTONES /  
OBSERVATIONS**

Vocabulary Range

Grammar &  
Syntax

Oral Fluency

Listening Comp.

Reading Depth

Written  
Expression

**PROGRESS SUMMARY & NEXT STEPS**