FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Washington, D.C. 20549 | OMB APPROVAL | | |
|--|--------------|------|--|
| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | OMB Number: | 3235 | |

| OMB Number: | 3235-0287 | | | | |
|------------------------|-----------|--|--|--|--|
| Estimated average burd | den | | | | |
| hours per response: | 0.5 | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| | | | | | _ | | | | | | | | | _ | | | | | | |
|--|--|--------|------------------|--|---|--|--|--|---|---|----------------------|-------|---|---|---|---------------------------------------|----------------|----------------|------------|--|
| Name and Address of Reporting Person* WOODS JAMES D | | | | 2. Issuer Name and Ticker or Trading Symbol ESCO TECHNOLOGIES INC [ESE] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | |
| WOODS JAMES D | | | | | | | | | | | | | X | Direc | tor | 10% | Owner | | | |
| (Last) (First) (Middle) C/O ESCO TECHNOLOGIES INC | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/01/2011 | | | | | | | | | | Office below | er (give title v) | Other below | (specify) | | |
| 9900 A CLAYTON ROAD | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) | | | | | | ,, | | | | | | | | | Line) X Form filed by One Reporting Person | | | | | |
| ST LOUI | S MO | C C | 3124 | | | | | | | | | | | | | Form | n filed by Moi | re than One Re | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | Pers | on | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 | | | | 4 and Secur Benef | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | | Transaction(s) (Instr. 3 and 4) | | | (111501.4) | |
| Common Stock 04/0 | | | | | 04/01/2011 | | | | A | | 800 A | | \$ | \$0 21,425 | | D | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | ivative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any Cod | | Transa Code (| ansaction of ode (Instr. Derivative | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | | | |
| | | | | | Code | v | (A) | | Date Exercisab | | Expiration Date | Title | Amo or Nun of Sha | ber | | | | | | |

Explanation of Responses:

Remarks:

T. B. Martin, Attorney In-Fact 04/01/2011

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.