

## Home Language Survey

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Does the student speak a language other than English?      **Yes**   **No**

**If NO, Stop Here**

**If YES, please answer the following questions:**

What language does your child speak? \_\_\_\_\_

What was the **first** language learned by your child? \_\_\_\_\_

In the home, what language is spoken most often? \_\_\_\_\_

Please describe the language understood by the student (check one):

- a. Understands only the home language and NO English
- b. Understands most of the home language and some English
- c. Understands the home language and English equally
- d. Understands mostly English and some of the home language

How many years has this student attended an English-speaking school? \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

This form is to be completed upon enrollment and kept in the student cumulative file.