

# HOME LANGUAGE SURVEY FORM

## Student Information

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

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

## Survey Questions

**Question 1: What was the first language used by the student?** \_\_\_\_\_

If another language other than English, proceed to Question 2a.

If English, continue to Question 2b.

**Question 2a: At home, does the student hear or use a language other than English more than half of the time? Please circle answer: Yes or No**

If yes, list home language(s) spoken. Survey is complete. **Proceed to Step 2: Record Review Process.**

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If no, proceed to Question 4.

**Question 2b: At home, does the student hear or use a language other than English more than half of the time? Please circle answer: Yes or No**

If yes, proceed to Question 4.

If no, proceed to Question 3.

**Question 3: Does the student understand a language other than English? Please circle answer: Yes or No**

If yes, proceed to Question 4. If no, DO NOT proceed to Step 2: Records Review Process. Survey is complete. **Student IS NOT an ELL.**

**Question 4: When interacting with his/her parents or guardians, does the student use a language other than English more than half of the time? Please circle answer: Yes or No**

If yes, list home language(s) spoken. Survey is complete. **Proceed to Step 2: Record Review Process.**

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If no, proceed to Question 5.

**Question 5: When interacting with caregivers other than their parents or guardians, does the student use a language other than English more than half of the time? Please circle answer: Yes or No**

If yes, list home language(s) spoken. Survey is complete. **Proceed to Step 2: Record Review Process.**

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If no, proceed to Question 6

**Question 6: Has the student recently moved from another school district/charter school where he/she was identified as an English language learner? Please circle answer: Yes or No**

If yes, list home language(s) spoken. Survey is complete. **Proceed to Step 2: Record Review Process.**

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If no, DO NOT proceed to step 2: Records Review Process. Survey is complete. **Student is NOT an ELL.**

Place of Birth \_\_\_\_\_ Entry date into U.S. if not born here \_\_\_\_\_

Date first entered school in U.S. if not born in U.S. \_\_\_\_\_ Last Grade Completed \_\_\_\_\_

Enrolled in ELL (English Language Learner) class in previous school?      **YES**    **NO**