Home Language Survey (Parent/Family Version)

Student Information:		
Student Name:	Date of Birth (YYYYMMDD):	
Current Address:		
Survey Questions:		
1.) List all languages used in the student's home	2.	
 2.) Was the first language used by the student a NoYes 	a language other than English?	
3.) Does the student speak or understand a lang <u>No</u> Yes	guage other than English?	
4.) When interacting with others at home (exan student understand or use a language other the NoYes		
5.) When interacting with others outside the ho student understand or use a language other tha NoYes		

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 _____

Has your child attended school	previously in the U.S	S. if returning to the U	.S. from attending
school in another country?	YES	NO	

Enrolled in ELL (English Language Learner) class in previous school? YES _____NO