HOME LANGUAGE SURVEY

Date _____ School _____ Grade _____

Students Name _____
First Middle Last

Parent/Guardian Name _____
First Middle Last

Address _____
Street City State/ZIP

Phone Number _____
Home Work Cell

1. Is the student's first-learned or home language anything other than English? ☐ Yes ☐ No

If yes, please respond to the following questions:

2. In what country was this child born? _____

3. What year did the student first enroll in a U.S. school? _____

4. What is the first language this child learned to speak? _____

5. What language does this child speak most often outside of school? _____

6. What language do people usually speak in this child's home? _____

7. If available, in what language would you prefer to receive communication from the school?

_____

_____ _____

Parent/Guardian Signature **Date**