



**pennsylvania**  
DEPARTMENT OF EDUCATION

# HOME LANGUAGE SURVEY

**ALL newly registering students regardless of race, nationality, or language origin MUST complete this form.** Federal law requires that all Local Education Agencies (LEAs) utilize a non-biased procedure for identifying which students are potential English Learners (ELs) in order to provide appropriate language instruction educational programs and services. Given this responsibility, LEAs have the right to ask for the information contained on this and other forms associated with the identification process.

**Student Information (Parents/Guardians should complete this section):**

Child's first name: \_\_\_\_\_

Child's family name: \_\_\_\_\_

Child's Date of Birth: \_\_\_\_\_  
(Month/Day/Year)

## Questions for Parents or Guardians

1. Is a language other than English spoken in the child's home? ☐ No ☐ Yes (language) \_\_\_\_\_
2. Does your child communicate in a language other than English? ☐ No ☐ Yes (language) \_\_\_\_\_
3. What is the language that your child first learned to speak? \_\_\_\_\_

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

Interpreter Provided ☐ No ☐ Yes



# English Language Learners Parent/Guardian Interview

Child's Full Name: \_\_\_\_\_

School Name: \_\_\_\_\_ Student Number: \_\_\_\_\_

1. When at home, how often does this student hear or use a language other than English?  
☐ Never Skip to #9  
☐ Less than 50% of the time Skip to Question 2  
☐ More than 50% of the time Skip to Question 3
2. When at home, does this student speak a language other than English more than half of the time?  
☐ No Skip to #9 ☐ Yes Skip to Question 3
3. When interacting with their parents or guardians, how often does this student hear or use a language other than English?  
☐ Never Skip to Question 4  
☐ Less than 50% of the time Skip to Question 4  
☐ More than 50% of the time Skip to #10
4. Within the last 12 months, when interacting with caregivers other than parents or guardians, how often did this student hear or use a language other than English?  
☐ Never Skip to Question 5  
☐ Less than 50% of the time Skip to Question 5  
☐ More than 50% of the time Skip to #10
5. When interacting with siblings or other children in their home, how often does this student hear or use a language other than English?  
☐ Never Skip to Question 6  
☐ Less than 50% of the time Skip to Question 6  
☐ More than 50% of the time Skip to #10
6. Is this student a Native Alaskan, Native American, or Native Hawaiian?  
☐ No Skip to Question 8 ☐ Yes Skip to Question 7
7. Is this student's language influenced by a Tribal language through a parent, grandparent, relative, or guardian?  
☐ No Skip to Question 8 ☐ Yes Skip to #10
8. Has this student recently moved from another school district where they were identified as an English Learner?  
☐ No Skip to #9 ☐ Yes Skip to #10
9. ☐ DO NOT PLACE this student on the PHLOTE list (Primary Home Language Other Than English). DO NOT SCREEN for EL eligibility.
10. ☐ PLACE this student on the PHLOTE list. SCREEN for EL eligibility

Name of parent/guardian interviewed: \_\_\_\_\_

Interview conducted: ☐ in person ☐ on the phone

Testing Specialist: \_\_\_\_\_ Date: \_\_\_\_\_