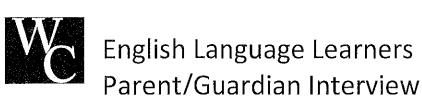


HOME LANGUAGE SURVEY

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	



School Name:	Student Number:
1. When at home, how often does this stud Never Less than 50% of the time More than 50% of the time	ent hear or use a language other than English? Skip to #9 Skip to Question 2 Skip to Question 3
2. When at home, does this student speak a	a language other than English more than half of the time? Yes Skip to Question 3
3. When interacting with their parents or gother than English? Never Less than 50% of the time More than 50% of the time	uardians, how often does this student hear or use a language other Skip to Question 4 Skip to Question 4 Skip to #10
 4. Within the last 12 months, when interact this student hear or use a language other Never Less than 50% of the time More than 50% of the time 	ting with caregivers other than parents or guardians, how often did than English? Skip to Question 5 Skip to Question 5 Skip to #10
5. When interacting with siblings or other of language other than English? Never Less than 50% of the time More than 50% of the time	Skip to Question 6 Skip to Question 6 Skip to H10
5. Is this student a Native Alaskan, Native A No Skip to Question 8	American, or Native Hawaiian? Yes Skip to Question 7
7. Is this student's language influenced by a guardian? No Skip to Question 8	Tribal language through a parent, grandparent, relative, or Yes Skip to #10
B. Has this student recently moved from an Learner?No Skip to #9	other school district where they were identified as an English Yes Skip to #10
9. DO NOT PLACE this student on the P SCREEN for EL eligibility.	HLOTE list (Primary Home Language Other Than English). DO NOT
10. PLACE this student on the PHLOTE li	st. SCREEN for EL eligibility
Name of parent/guardian interviewed:	
Interview conducted: in person	on the phone

Testing Specialist: ______ Date: _____