

## Henry W. Moore School HOME LANGUAGE SURVEY

**Student Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_ **Gender:** \_\_\_\_\_

We are required by the Federal Government to conduct a Home Language Survey. Please complete the following.

### *Student Information*

Country of Birth:	Date of Entry in U.S.:	Date first enrolled in a U.S. school: Month: _____ Year: _____	Current grade:
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Parent/Legal Guardian: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Please translate school notices into (language): \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_

### *Questions for Parents/Guardians*

Please list all languages spoken in your home.	
Which language did your child first hear or speak?	
<b><i>If English is the only language listed, stop here. If another language is listed, please answer the rest of the questions.</i></b>	
Which language(s) do you speak to your child?	
Which language(s) does your child speak at home with adults?	
Which language(s) does your child speak at home with other children?	

For parents and guardians: If a language other than English is listed above, an ESOL teacher will test your child to find out if he or she can speak, understand, read, and write well in English. The results will be sent to you within 30 days. Based on the results of the test, your child may be eligible to enroll in an English language (ESOL) class at school. Parents/guardians may accept or decline ESOL program services for their child.

**Instructions for survey administrator:**

1. Please provide an interpreter when necessary.
2. If responses indicate a language other than English, please contact the ESOP teacher and provide her/him with a copy of this survey. Date of referral to ESOL teacher: \_\_\_\_\_
3. File original Home Language Survey in student's cumulative folder.