CLARKSDALE MUNICIPAL SCHOOL DISTRICT

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MISSISSIPPI DEPARTMENT OF EDUCATION
Ensuring a bright future for every child

HOME LANGUAGE SURVEY
FOR K-12 SCHOOL DISTRICTS

STUDENT INFORMATION

Student Name _____ Grade _____
First Middle Last

Date of Birth _____ Gender _____ School _____

1. What is the dominant language most often spoken by the student? _____

2. What is the language routinely spoken in the home, regardless of the language spoken by the student? _____

3. What language was first learned by the student? _____

4. Does the parent/guardian need interpretation services? ☐ Yes ☐ No
   If so, what language? _____

5. Does the parent/guardian need translated materials? ☐ Yes ☐ No
   If so, what language? _____

6. What was the date the student first enrolled in a school in the United States? _____
   MM/YYYY

7. In what country was the student born? _____

_____ _____
Parent / Guardian Signature Date (MM/DD/YYYY)

DISTRICT USE ONLY

☐ Designated English Learner on the LAS Links Screener

DOCUMENTATION OF LAS LINKS SCREENER FOR STUDENT					
Date	Speaking Score	Listening Score	Reading Score	Writing Score	Composite Score