HOME LANGUAGE SURVEY



Student Name		School Name		Grade	Student ID
Date of Birth		Parent/Guardian Name(s)			
		Home Address			
1.	What is your child's first/native language? English Other:				
2.	2. What language does your child speak with you at home? English Other: This language is spoken MORE OFTEN THAN ENGLISH. This language is spoken LESS OFTEN THAN ENGLISH.				
3.	What language do you speak with your child? English Other: My child understands THIS LANGUAG My child understands ENGLISH BETTI				
4.	No Yes; Language: • Does your child understandthe conversations? Yes				
5.	5. In what language does your child <i>read</i> ?				
6.	6. In what language does your child write?				
7.	Has your child ever attended school in anothe No Yes; Country:	•			
 Pare	ent/Guardian Signature			 	2