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**Westford Public Schools  
Administrative Offices**

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**Home Language Survey**

This survey must be administered by a trained professional, such as a teacher, principal or guidance counselor.

**STUDENT INFORMATION**

Student (full) Name: \_\_\_\_\_  Male  Female  Non-Binary

DOB: \_\_\_\_\_ Student's Country of Birth: \_\_\_\_\_

Date first enrolled in ANY US school: \_\_\_\_\_ Number of years student has been in US schools (excluding PK) \_\_\_\_\_

**SCHOOL INFORMATION**

School: \_\_\_\_\_ Start Date: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Name of Former School/Town/State/Country: \_\_\_\_\_

**QUESTIONS FOR PARENTS**

What is the *primary* language used in home, regardless of the language spoken by the student? \_\_\_\_\_

Which language(s) are spoken with your child (include relatives/caregivers)? \_\_\_\_\_

If other than English, is it  seldom  sometimes  often  always

What language did your child first understand and speak? \_\_\_\_\_

What language do you use most with your child? \_\_\_\_\_

Which language(s) do your child use and how often:

1) \_\_\_\_\_:  seldom  sometimes  often  always

2) \_\_\_\_\_:  seldom  sometimes  often  always

Will you require written information in your native language?  Yes  No

Will you require an interpreter/translator at Parent-Teacher meetings?  Yes  No

Parent/Guardian Printed Name: \_\_\_\_\_

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

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

Staff person who administered this form to parent: \_\_\_\_\_ Date: \_\_\_\_\_