



HOME LANGUAGE SURVEY

Date: _____ Name of Student: _____
(Please Print)

Age: _____ Date of Birth: _____ Country of Birth: _____

Date of Arrival in the United States: _____

Date Your Child First Entered a U.S. School: _____ / _____ / _____
Month Day Year

Federal regulations require that we screen all students in grades K-12 to determine their dominant language. The following questions must be answered:

1) What language did the child learn to speak first? _____

- If Chinese, please circle one: Hakka Mandarin Cantonese/Yue

2) What language does the child speak most of the time at home? _____

3) What language do the adults speak most often at home? _____

4) Please indicate the status of the student.

Refugee Yes No

Migrant Yes No

Immigrant Yes No

Signature of Person Completing this Form

Relationship to Student

-----**To Be Completed By Enrolling School**-----

*The original HLS should be filed in the student's cumulative folder. **The Country of Birth and Date of Arrival in the U.S. must be completed.** If the answer to Questions 1 is other than English, or if you cannot communicate with the student, send a copy of this survey immediately to the LEP Supervisor after entering the following information:*

School _____

Student Identification Number _____ *Grade Placement* _____

Name of School Employee Completing Enrollment: _____