## HOME LANGUAGE SURVEY ENGLISH VERSION

Name of Student:				
Surname / Last Name		First Given Name		Second Given Name
School:	Age:	Grade Level:	Teacher Na	ame:
Directions to Parents and Guardians:				
The California <i>Education Code</i> contains legal student. If a language other than English is y English language development services.	•			3
As parents or guardians, your cooperation is listed below as accurately as possible. For eanswer all questions.				
1. Which language did your child lea	rn when he	s/she first began to talk	?	
2. Which language does your child m	nost freque	ntly speak at home?		
<ol><li>Which language do you (the parer when speaking with your child?</li></ol>	nts or guard	dians) <b>most frequentl</b>	<b>y</b> use	
<ol> <li>Which language is most often spo (parents, guardians, grandparents)</li> </ol>	•			<del></del>
Please sign and date this form in the spaces	provided be	elow, then return this form	n to your child's	teacher. Thank you for your cooperation.
Signature of Parent or Guardian		<u>—</u>	Date	

IF YOUR ANSWER TO QUESTIONS #1, #2 OR #3 IS ANYTHING OTHER THAN "English," PLEASE COMPLETE THE QUESTIONS ON PAGE 2.

## **INFORMAL PRIMARY LANGUAGE ASSESSMENT**

Dear Parent: When you filled out the Home Language Survey, you indicated that you, your child, or someone in your home spoke a language other than English. We would like to know more about your child's skills in your home language. Child's name: \_\_\_\_\_ Home Language: \_\_\_\_\_ Speaking and Understanding Is your child able to understand almost everything that is said in his or her home language? ☐ Yes ☐ No What percentage of time do you speak your home language to your child? □ 0% □ 25% □ 50% □ 75% □ 100% ☐ Home language What language does your child speak at home? ☐ English Reading and Writing Please check the box that best describes your child's ability to read in the home language. ☐ Does not read it ☐ Reads it a little ☐ Reads it well Does your child write letters or messages to friends or relatives in the home language? ☐ Yes ☐ No Please check the box that best describes your child's ability to write in the home language. ☐ Does not write in it ☐ Writes in it sometimes ☐ Writes in it well **School Experience** ☐ Yes ☐ No If you came to the United States from another country, did your child attend school in that country? If you answered "Yes" to the guestion above, how many total years did your child attend school in that country?