

## PARENT LANGUAGE QUESTIONNAIRE (HOME LANGUAGE SURVEY)

This form is required by State and Federal law.

Identification of students who may have limited proficiency in the English language enables the school to provide appropriate learning programs for the student. Please complete this form and return it to the school office as soon as possible. If you have questions or need help with the form, please contact: ELL Office 714-8892

**PART I is required. PARTS II-IV are required if there is a language other than English in the home. SIGNATURE AND CONTACT INFORMATION ARE REQUIRED.**

**Student Name:** \_\_\_\_\_ **Alaska Student I.D. #** \_\_\_\_\_  
(Last Name, First Name)

**Place of Birth:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

**KPBSD School:** \_\_\_\_\_ **Grade:** \_\_\_\_ **Sex:**  Female  Male

**PART I: ELL/LEP HISTORY**

1. Has this student been identified in another district as an English language learner (ELL/LEP)? \_\_\_Yes \_\_\_No  
 If so, what district? \_\_\_\_\_ City, State \_\_\_\_\_

**PART II: STUDENT LANGUAGE BACKGROUND**

1. What is the first language learned by the student?  English  Other \_\_\_\_\_  
Specify
2. What language(s) does the student currently use in the home?  English  Other \_\_\_\_\_  
Specify
3. Is this student participating in a student exchange program?  Yes  No
4. How long has the student attended school in the U.S.A.?  3 or more full school years  Less than 3 full school years

**PART III: FAMILY LANGUAGE BACKGROUND** (Please complete all columns)

	Mother/Guardian	Father/Guardian	Other Significant Adult* Relationship:
1. Language(s) spoken <b>to the student</b>			
2. Language(s) spoken <b>in the adult's home</b>			

\*Other significant adult could be a grandparent, aunt, uncle, daycare provider, etc. who has contributed to the student's language development.

**PART IV: PARENT VERIFICATION OF LANGUAGE USE** (Please check appropriate box)

	Only the other language	Mostly the other language, some English	The other language & English equally	Mostly English, some of the other language	Only English
A. When the student speaks with <b>family</b> , he/she speaks:					
B. When the student speaks with <b>friends</b> , he/she speaks:					

Parent/Guardian Signature:	Telephone Number:
Printed Name:	Date: