



# HOME LANGUAGE SURVEY ENGLISH VERSION

Place this completed form in Student  
Cumulative Record Folder.  
Form is to be completed once in a  
California School.

Name of Student: \_\_\_\_\_ Surname / Last Name \_\_\_\_\_ First Given Name \_\_\_\_\_ Second Given Name \_\_\_\_\_

School: \_\_\_\_\_ Age: \_\_\_\_\_ Grade Level: \_\_\_\_\_ Teacher Name: \_\_\_\_\_

Note: School district personnel can help complete the information above only.

Dear Parents and Guardians:

The California *Education Code* contains legal requirements which direct schools to determine the language(s) spoken in the home of each student. This information is essential in order for the school to provide adequate instructional programs and services.

As parents or guardians, your cooperation is requested in complying with this legal requirement. Please respond to each of the four questions listed below as accurately as possible. For each question, write the name(s) of the language(s) that apply in the space provided. Please do not leave any question unanswered.

1. Which language did your child learn when he/she first began to talk? \_\_\_\_\_
2. Which language does your child most frequently speak at home? \_\_\_\_\_
3. Which language do you (the parents or guardians) most frequently use when speaking with your child? \_\_\_\_\_
4. Which language is most often spoken by adults in the home? (parents, guardians, grandparents, or any other adults) \_\_\_\_\_

Please sign and date this form in the spaces provided below, then return this form to your child's teacher. Thank you for your cooperation.

\_\_\_\_\_  
Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_

This procedure meets federal requirements for identifying and assessing language minority students in order to provide appropriate instructional support services for those students found to be limited English proficient.

Adapted from the California Department of Education