Home Language Survey

Massachusetts Department of Elementary and Secondary Education regulations require that *all* schools determine the language(s) spoken in each student's home in order to identify their specific language needs. This information is essential in order for schools to provide meaningful instruction for all students. If a language other than English is spoken in the home, the District is required to do further assessment of your child. Please help us meet this important requirement by answering the following questions. Thank you for your assistance.

Student Information			
			_ F _ M _
First Name	Middle Name	Last Name	Gender
	1 1	/ Date first enrolled in	1
Country of Birth	Date of Birth (mm/dd/yyyy)	Date first enrolled in	n ANY U.S. school (mm/dd/yyyy)
School Information			
/ /20			
Start Date in New School (mm/dd/yyyy)	Name of Former School and Tow	vn	Current Grade
Questions for Parents/Guard	dians		
What is the primary language used in language spoken by the student?	the home, regardless of the	Which language(s) are spoken with y (include relatives -grandparents, uncless	
			_ seldom / sometimes / often /
		always	
			_ seldom / sometimes / often /
		always	_ seldon / sometimes / oiten /
What language did your child first understand and speak?		Which language do you use most wi	th your child?
			_
		Which languages does your child us	e? (circle one)
How many years has the student been in U.S. Schools? (not including			,
pre-kindergarten)		always	_ seldon / sometimes / oiten /
		uiwayo	
			_ seldom / sometimes / often /
		always	
Will you require written information from school in your native language? Y N N		Will you require an interpreter/translator at Parent-Teacher meetings? Y N N	
If yes, what language?		If yes, what language?	
Parent/Guardian Signature:		/ /20	
l _x		Today's Date: (mm/dd/vvvv)	

Please print, fill out, and return this form to the Main Office at Saint Joseph School.