SAUGUS UNION SCHOOL DISTRICT

## **English Language Development**

## Home Language Survey

School:

Teacher/Grade:

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 determine educational 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.

Name of Student:				
Last	First	Middle	Grade	Date of Birth
1. Which language did your son	or daughter learn wh	ien he or she first began to t	alk?	
2. What language does your son	or daughter most fro	equently use at home?		
3. What language do you use me	ost frequently to spe	ak to your son or daughter?		
4. Name the language most often	n spoken by the adu	Its at home:		
Signature of parent or guardian		Date		
(Only to be com	pleted if any of ques	tions 1-3 are answered other	than E	nglish)
Other language spoken in the home. (Check only one)				[] Yes []No
When spoken to, my child understands a language other than English. (Check only one)				[] Yes []No
My child speaks a language other than English. (Check only one)				[] Yes []No
My child reads a language other than English. (Check only one)				[] Yes []No
My child writes in a language other than English. (Check only one)				[] Yes []No
Country of student's birth:		Ethnicity:		
Date this student first entered a U	nited States school:			
Date this student first entered a C	alifornia school:			

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