

**HOME LANGUAGE SURVEY**

**Used to determine a primary or home language other than English**

The Office of Civil Rights (OCR) requires that school district/charter schools/full day AVTS identify Limited English Proficient (LEP) students in order to provide an appropriate language instructional program. Pennsylvania has selected the Home Language Survey as the method for the identification of LEP students. Please complete the following items/questions:

Student's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Telephone (\_\_\_\_\_) \_\_\_\_\_ Country of Origin \_\_\_\_\_

Other countries of residence (please list) \_\_\_\_\_

Parents are not required to answer questions with regard to origin. However, even countries of origin whose primary language is English may have a dialect making it difficult for a child to understand American dialects.

What was the first language your child learned to speak? \_\_\_\_ English \_\_\_\_ Other

What language(s) does your child speak most often at home? \_\_\_\_ English \_\_\_\_ Other

What language(s) does your child read? \_\_\_\_ English \_\_\_\_ Other

What language(s) does your child write? \_\_\_\_ English \_\_\_\_ Other

What language(s) do you use when speaking to your child? \_\_\_\_ English \_\_\_\_ Other

What language(s) is spoken most often in your home? \_\_\_\_ English \_\_\_\_ Other

If you checked Other as a choice above, please list the other language:

\_\_\_\_\_

-----

Survey conducted or completed by: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_