

# HOME LANGUAGE QUESTIONNAIRE

Student's Name \_\_\_\_\_

Grade Level: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

School: \_\_\_\_\_

Country of Birth: \_\_\_\_\_

Date your student started attending school in the United States: Month \_\_\_\_\_ Year \_\_\_\_\_

If child was born outside the U.S., what date did child enter the U.S.? \_\_\_\_\_  
(month, day, year)

Minnesota requires schools to count and report the primary languages of their students. Please take a few minutes to answer the following questions, even if English is the only language spoken by members of your family.

1. Which language did your child learn first?  
 English  
 Other \_\_\_\_\_  
(Which language?)
2. Which language is most often spoken in your home?  
 English  
 Other \_\_\_\_\_  
(Which language?)
3. Which language does your child usually speak?  
 English  
 Other \_\_\_\_\_  
(Which language?)
4. Will you need an interpreter for conferences?  
If yes, can you provide your own? (English-speaking family member or friend)  Yes  No  
If yes, do you need the school to provide one for you?  Yes  No

Please sign and return it to school along with your enrollment form. Thank you very much for your assistance.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**NOTE FOR SCHOOL SECRETARIES:** If a language other than English is marked in even one box, please make a copy of this form and forward the copy to your ESL teacher (Margaret Cox – Elementary, Sandra Hisakuni – MS, Leslie Burgess – HS). The original needs to be filed in the student's cum file. Also note that if a language other than English is marked in even one box, that language will be the one used for coding purposes in MARSS.

**ESL STAFF USE ONLY:**  Eligible for ESL Services

Start Date in ESL \_\_\_\_\_

Direct  Indirect

Is student new to Country?  Yes

Does Not Qualify for Services

If so, as of what date: \_\_\_\_\_