WEST HOLMES LOCAL SCHOOL DISTRICT

HOME LANGUAGE SURVEY

Date:						
Name of Student:						_
		Family Name	First Name	Midd	le Initial	
Date of Birth:Month/Day/Year		Place of Birth:				
		Month/Day/Year		City	State	Country
Name of Parent/Guardian:					_	
			Family Name			
Home	Address:					_
City: _			State:	Zip Code:		
Home Phone:		Work Pho	one:			
	What Langu	· ·	ns. or daughter speak wh	en he or she	first learr	ned to
2.	What language does your son or daughter use most frequently at home?					
3.	What language do you use most frequently to your son or daughter?					
4.	What langu	age do the adults a	at home most often sp	peak?		
5.	How long ha	as your son or dau	ighter attended schoo	I in the United	States?	

For School District Personnel:

If the answer to any of the first four questions above is a language other than English, indicate the student's native/home language in EMIS Student Element (GI270), and proceed to assess the student's English language proficiency.