# Iowa Department of Education

## HOME LANGUAGE SURVEY

Student Name: _____ Birth Date: _____ Sex: ❏ Male ❏ Female

Parent/Guardian Name: _____

Address: _____

Home Telephone: _____ Work Telephone: _____

School: _____ Grade: _____ Date: _____

1.  Was your child born in the United States?  ❏ Yes  ❏ No

    If yes, in which state? _____

    If no, in what other country? _____

2.  Has your child attended any school in the United States
    for any three years during their lifetime?  ❏ Yes  ❏ No

    If yes, please provide school name(s), state, and dates attended:

    Name of School _____ State _____ Dates Attended_____

    Name of School _____ State _____ Dates Attended_____

    Name of School _____ State _____ Dates Attended_____

3.  What language is spoken by you and your family most of the time at home?  _____

4.  If available, in what language would you prefer to receive
    communication from the school?  _____

5.  Is your child's first-learned or home language anything other than English?  ❏ Yes  ❏ No

**If you responded "Yes" to question number 5 above, please answer the following questions:**

6.  What language did your child learn when he/she first began to talk?  _____

7.  What language does your child most frequently speak at home?  _____

8.  What language do you most frequently speak to your child?  (Father) _____

    (Mother) _____

9.  Please describe the language <u>understood by your child</u>. (Check only one)
    A. ❏  Understands only the home language and no English.
    B. ❏  Understands mostly the home language and some English.
    C. ❏  Understands the home language and English equally.
    D. ❏  Understands mostly English and some of the home language.
    E. ❏  Understands only English.

_____      _____

Parent or Guardian's Signature           Date

| OFFICE USE ONLY | | | |
|---|---|---|---|
| Student ID # | Date Distributed | Date Received | |
| | | | |