Dear Parent/Guardian:

Maine welcomes families of all cultural and linguistic backgrounds. Speaking more than one language is a valuable asset, and we encourage families to maintain their languages while learning English. Students who speak or understand another language may be entitled to support to improve their English in order to meet Maine's challenging academic standards. The following questions, required for all students from pre-kindergarten through grade 12, will help your school determine whether your child may benefit from English language support services. If a language other than English is indicated, your child will be administered an English language screener. Depending on your child's score, your child may be classified as an English Learner and eligible for English language support. If you would like this letter and the survey below to be provided in another language, or if you would like an interpreter, your school will fulfill those requests. If you have questions about this survey, please contact your school principal.

Be assured that your answers will be used only for educational purposes. The completed survey will be kept in your student's permanent file, and only school staff will have access to it. No school employee may inquire about the immigration status of any member of your family.

Thank you for providing this information, and I wish your student great academic success.

Sincerely,

Nancy Mullins Director of ESOL and Bilingual Programs, Maine Department of Education

LANGUAGE USE SURVEY

Date of Birth: _____

Anticipated Grade:

Student's Name: _____

School:

Please do not leave any question unanswered.

- 1. What language(s) did your child first speak or understand?
- 2. What language(s) does your child most easily speak or understand?
- 3. What language(s) do those who interact with your child **frequently** (daily or at least several times per week) use with your child?

Parent/Guardian Signature: _____ Date: _____

| School Use Only | |
|---|-------|
| Post-enrollment Identification: If no language other than English is indicated by a parent/guardian on this survey, an English | |
| language screener may be administered only if one or both of the questions below is answered affirmatively by a teacher. | |
| Have you observed the student use a language other than English? | |
| 2. Has the student indicated to you that he/she uses a language other than English? | |
| Teacher Signature: | Date: |
| | |

PLACE THE ORIGINAL OF THIS COMPLETED DOCUMENT IN THE STUDENT'S PERMANENT RECORD FOLDER