HOME LANGUAGE SURVEY AND PARENT OPTION FORM

Student: _____
Last *First* *Middle*

Date of Birth: _____ **School:** _____

North Carolina State law requires schools to determine the language(s) spoken at home by each student. Your cooperation in helping us meet this important requirement is requested. Please answer the following **6** questions.

1. What language did your son/daughter learn when he/she first began to talk?

_____

2. What language does your son/daughter most frequently use at home?

_____

3. What language do you most frequently speak to your son/daughter?

_____

4. Name the language(s) most often spoken **by the adults** at home:

_____

If the answer to any of the four above questions is a language other than English, your child may qualify for English as a Second Language service. Do you wish for your child to be considered for ESL service, even if he/she may need to be assigned from the base school to an ESL school? (Transportation to assigned ESL center schools is provided.)

_____YES **_____NO**

If you answer **NO,** please understand that only ESL center schools provide ESL service.

5. Country of ***student's*** birth: _____
Country

6. Year of student's initial entry into a U.S. school: _____
Year

Place This Form in Student's Cumulative Record
*If a language other than English is indicated in any question, 1-4, please give a copy to the LEP contact.

_____ _____/_____/_____
Signature of Parent/Guardian ***Date***