This form is to be administered once to every student enrolled in your school. If the answer to any of the questions 3 – 11 is a language other than English, please forward a copy of this form to the ESL office at COS (Fax: 972-6875). Put the original Home Language Survey in the student’s permanent record.

Baldwin County Public Schools
HOME LANGUAGE SURVEY

Date ___________________________ School ___________________________ Grade ___________________________

Child's Name ___________________________

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Initial</th>
<th>Last Name</th>
</tr>
</thead>
</table>

Parent or Guardian’s Name ___________________________

<table>
<thead>
<tr>
<th>First Name</th>
<th>Middle Initial</th>
<th>Last Name</th>
</tr>
</thead>
</table>

Address ___________________________

<table>
<thead>
<tr>
<th>Street</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
</tr>
</thead>
</table>

Phone Number ___________________________

<table>
<thead>
<tr>
<th>Home</th>
<th>Work</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

1. Child's date of birth:
   Was your child born in the United States?  
   Yes [ ]  No [ ]
   If yes, in which state? ___________________________
   If no, in what other country? ___________________________
   If no, date child entered the United States: ___________________________ (Month/Date/Year)

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 ___________________________
   Name of School ___________________________
   Name of School ___________________________
   State ___________________________ Dates Attended ___________________________
   State ___________________________ Dates Attended ___________________________
   State ___________________________ Dates Attended ___________________________

3. What is the language most frequently spoken at home? ___________________________

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

5. Please check if your child is:
   A. [ ] Native American Indian
   B. [ ] Alaska Native
   C. [ ] Native Pacific Islander
   D. [ ] Native U.S. Virgin Islander

6. Is your child's first-learned or home language anything other than English?  
   Yes [ ]  No [ ]
   If you responded “Yes” to question number 6 above, please answer the following questions:

7. In what country did your child most recently reside? ___________________________

8. Which language did your child learn when he/she first began to talk? ___________________________

9. What language does your child most frequently speak at home? ___________________________

10. What language do you most frequently speak to your child?  
    (Father) ___________________________
    (Mother) ___________________________

11. Please describe the language understood by your child. (Check only one)  
    A. [ ] Understands only the home language and no English.
    B. [ ] Understands mostly the home language and no 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 ___________________________

<table>
<thead>
<tr>
<th>Student ID #</th>
<th>Date Distributed</th>
<th>Date Received</th>
</tr>
</thead>
</table>

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