

**ECORSE  
PUBLIC  
SCHOOLS**



**HOME LANGUAGE SURVEY**

Please clearly print all information with black or blue ink

Student's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

What was the first language your child learned?  
\_\_\_\_\_

What language is spoken most often by your child?  
\_\_\_\_\_

What languages, other than English, are spoke in the home?  
\_\_\_\_\_

Was your child receiving help with English in their previous school?  
\_\_\_\_\_

What is the Primary Language Spoken in the home (Parent Language)?  
\_\_\_\_\_

**Comments**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_