Language Survey

Massachusetts is home to speakers of many different languages. This Language Survey helps us learn about your child's English language skills and provide support to your child if necessary to help them learn English. Please answer the questions below. If your response to any of the questions in SECTION 1 is a language other than English, the school district will give your child a test to see if they may benefit from English language support.

If you need help completing this form, please ask for assistance.

Student Name: _____

Grade: _____

Date of Birth (mm/dd/yyyy): _____

Name of Parent/Guardian #1: _____

Name of Parent/Guardian #2: _____

SECTION 1:
These questions will help the school identify students who may need English language supports. If your response to any question 1-3 is a language other than English, your child will be tested on their use and understanding of English to determine if English language supports are needed.

1. Please list the language(s) that parents and/or primary caregivers use to communicate with your child at home.
   _____
2. Please list the language(s) that your child currently uses to communicate with others.
   _____
3. Please list the language(s) your child first understood and used to communicate.
   _____

SECTION 2: Interpretation and Translation Services
This section will let the school know if you, the parents/guardians, need an interpreter or documents translated.

This section is for informational purposes only and is not used to identify if your child needs support to learn English.

4. In what language(s) would your family prefer to receive written communication from the school?

   Parent/Guardian # 1: _____

   Parent/Guardian # 2: _____

5. Would you prefer for the school to arrange for an interpreter to be available to you free of charge during meetings and phone calls with the school about your child (including American Sign Language or other types of sign language)?

   ___Yes ___No If yes, in which language(s)? _____

Parent/Guardian # 1: _____

Parent/Guardian # 2: _____

SECTION 3 [Optional]: Prior Education

This section will provide the school with background information about your student and their prior education.

This section is optional and is not used to identify if your child needs support to learn English.

6. Please list the name and location of the last school your child attended.

   School Name: _____

   City/town: _____ Country: _____

7. How many years has your child attended school in the United States? (beginning with kindergarten)
   _____

   Please list the date your child first started school in the United States, if known (mm/yyyy):_____

8. Has your child ever attended school outside of the United States?
   _____Yes _____No _____Not sure

   If yes, for how many years? _____ In what language(s) did your child learn while attending school outside of the United States? _____

   What is the last grade your child was enrolled in or completed?_____

9. Has your child ever received support to improve their English in United States schools?

   _____Yes _____No _____ Not sure

10. Is there anything else you think is important for the school to know about your child? (for example, special interests, talents, or concerns you have about your child's experience in school?)

    _____

    _____

    _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date (mm/dd/yyyy): _____