## **HOME LANGUAGE SURVEY**

Name of Student:						
	Surname / Last Name		First Giver	n Name	Second Given Name	
School:		Age:	Grade Level:	Teacher Na	ame:	
Directions to	o Parents and Guardians:					
	nia <i>Education Code</i> contains legal is information is essential in order t	•			ne language(s) spoken in the home of each ograms and services.	
listed below					. Please respond to each of the four questions that apply in the space provided. Please do	
1. Whi	ch language did your child learr	when he	/she first began to ta	lk?		
2. Whi	ch language does your child mo	st frequer	ntly speak at home?			
	ch language do you (the parent n speaking with your child?	s or guard	lians) most frequentl	y use		
	ch language is most often spok ents, guardians, grandparents,	•				
Please sign	and date this form in the spaces p	rovided be	low, then return this fo	orm to your child's	s teacher. Thank you for your cooperation.	
Signature of Parent or Guardian				 Date		

Form HLS, Revised October 2005 California Department of Education

(PLEASE COMPLETE BOTH SIDES)

1.	Ethnicity	
	Please select one ethnicity for your son/daughter.	
	No, Not Hispanic/Latino	
	Yes, Hispanic/Latino	
2.	<u>Race</u>	
	Please select one or more races for your son/daughter.	
	American Indian or Alaskan Native	
	Asian	
	Black or African American	
	Native Hawaiian or Other Pacific Islander	
	White	California Department of Education

Please answer both section listed below.