

FOR OFFICE USE ONLY
<b>Aeries Corresponding Tag</b>
Question 1, 2 or 3: Aeries Stu Screen/HmLng and Aeries LNG Screen/Languages: Primary
Question 1: Aeries LNG Screen/Languages: First
Question 2: Aeries LNG Screen/Languages: at Home
Question 4 = Aeries LNG Screen/Languages: By Adults
Question 5 = Aeries Stu Screen/Corr Lng

## HOME LANGUAGE SURVEY

**Date:** \_\_\_\_\_ **School Name:** \_\_\_\_\_ **Student ID Number:** \_\_\_\_\_

California Education Code requires that schools determine the language(s) spoken at home by each student. This information is essential in order for schools to provide meaningful instruction for all students. If the student in the home speaks a language other than English, the District is required to determine if further assessment is necessary.

Your cooperation in helping us meet this important requirement is requested. Please answer the following questions. Thank you for your help.

<b>Student Information:</b>				
_____	_____	_____	_____	_____
Last Name	First Name	Middle Name	Grade	Age
_____	_____	_____		
Birth Date	Birth Place	Birth Country		

1. Which language did your son or daughter learn when he/she first began to speak? \_\_\_\_\_
2. What language does your son or daughter most frequently use at home? \_\_\_\_\_
3. What language do you use most frequently to speak to your son or daughter? \_\_\_\_\_
4. What language is most often spoken **by the adults** at home? \_\_\_\_\_
5. In what language would you like to receive correspondence at home? \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Parent Telephone Number: \_\_\_\_\_

**This form shall be a permanent part of the student's CUM file.**