

# Spotsylvania County Public Schools Home Language Survey

**Registrars:** This form must be completed for **all** students registering in Spotsylvania County Schools.

**To be completed by Parent or Guardian**

Federal regulations require school systems to survey each enrolling student regarding the student's home language and other languages the student may speak. This form meets the requirements of the Equal Educational Opportunity Act 20 USC 1703 for identification of national origin minority children.

**1. Student Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**2. Where was the student born?**

United States State: \_\_\_\_\_  Other country: \_\_\_\_\_  
Last grade completed in this country: \_\_\_\_\_

**3. Date student entered Virginia schools:** \_\_\_\_\_ **Date student entered the U.S.:** \_\_\_\_\_

**4. Circle all grades completed in U.S. Schools**

None Pre-K K 1 2 3 4 5 6 7 8 9 10 11 12

**5. Has the student received English for Speakers of Other Languages (ESOL) services?**  Yes  No

If yes, what school/state: \_\_\_\_\_

**Notification:**

The law requires that all language minority children be screened to determine English language proficiency for academic success in school. Questions 6-8 meet federal requirements. If a language other than English is indicated on these questions, the student will be tested for English language proficiency and may qualify for English for Speakers of Other Languages services. Parents/guardians will be notified of the results of the language proficiency assessment.

**6. What is the primary language used in the home, regardless of the language spoken by the student?** \_\_\_\_\_

**7. What is the language most often spoken by the student?** \_\_\_\_\_

**8. What is the language that the student first acquired?** \_\_\_\_\_

**9. In what language do you prefer communication from school?** \_\_\_\_\_

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Relationship to student

Phone Number: \_\_\_\_\_

**OFFICIAL USE ONLY**

- Registrar: 1. A copy of this HLS must be placed in every student's cumulative folder  
2. A copy of this HLS must be sent/given to the ESOL teacher and Welcome Center  
3. School sending HLS: \_\_\_\_\_