

KENT CITY SCHOOLS Home Language Survey

As required by federal law, this form must be completed for all students at the time of enrollment. (Title VI Compliance)

DATE: _____ School: D F H L W SMS RHS

NAME OF STUDENT: _____
Family Name First Name Middle Initial

DATE OF BIRTH: ____/____/____ PLACE OF BIRTH: _____
Month Day Year City State Country

NAME OF PARENT/GUARDIAN: _____
Family Name First Name

HOME ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

HOME PHONE: _____ WORK PHONE: _____

For Parents/Guardians:

Please answer the following questions:

1. What language did your son/daughter speak when he/she first learned to talk? _____
2. What language does your son/daughter use most frequently at home? _____
3. What language do you use most frequently with your son/daughter? _____
4. What language do the adults at home most often speak? _____
5. How long has your son/daughter attended school in the United States? _____

TO BE COMPLETED BY SCHOOL DISTRICT PERSONNEL

If the answer to any of the first four questions above is a language other than English, indicate the student's native/home language in EMIS Student Data Element (4.1.1.18), and proceed to assess the student's English language proficiency.

ENGLISH LANGUAGE ASSESSMENT

Communication Skill

Proficiency Level

Listening:	_____	Beginning	_____	Intermediate	_____	Advanced	_____	Proficient
Speaking:	_____	Beginning	_____	Intermediate	_____	Advanced	_____	Proficient
Reading:	_____	Beginning	_____	Intermediate	_____	Advanced	_____	Proficient
Writing:	_____	Beginning	_____	Intermediate	_____	Advanced	_____	Proficient

Assessment instrument(s) used: _____

Student is LEP? _____ Yes _____ No

Indicate the student's status as LEP or not LEP in EMIS Student Data Element (4.1.1.19)

If the student has not been in the United States for a year, the student must still take all state required tests at the grade level the child enters. However, the scores for the student are not included in the building or district results.

Mark EMIS Test-Taking State Code "R" for each test for which the student received the English-Limited exemption.

For Office Use Only – Date Enrolled: _____ School: D F H L W SMS RHS

This completed form is to be placed in the Student's Cumulative Folder and remain there until graduation. If language(s) other than American English is listed, please send a copy of the completed form, plus registration form, passport/birth certificate, names and addresses of all schools attended in U.S. to Pupil Services Attn: ESL.



