

East Greenwich Township School District
Home Language Survey

Name of Student: _____

Age: _____

Grade: _____

1. What is the first language the student learned to speak? _____
2. What language does the student speak most often? _____
3. What language is most often spoken in the student's home? _____
4. What language does the student's mother speak? _____
5. What language does the student's father speak? _____
6. If the student does not reside with their parents, what language is spoken by the student's guardians? _____
7. If there are other adults that interact with the student within the student's home, grandmother, grandfather, etc., what language do they speak? _____
8. Do you, as the parent or guardian, have any language concerns regarding this student?
_____ If yes, please explain what your concerns are. _____

Parent Signature: _____ Date: _____