



Washington Unified School District
Home Language Survey -- English
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The California Education Code requires schools to 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.

Student ID Number: _____ (for office use only) School: _____ Grade: _____

Student's Name: _____ Birth Date: ____/____/____
 (Last) (First) (Middle)

Street Address: _____ City: _____ State: _____ Zip Code : _____

Parent(s) Name(s): _____ Home Phone _____ Work Phone _____

Important information for student transfers within California: The state considers the first Home Language Survey (HLS) you completed as the official document. If you have ever indicated a primary language other than English, the Washington Unified School District will receive that information via California Longitudinal Pupil Achievement Data System (CALPADS) and continue English learner services as legally required. In some cases, student schedules/programs will need to be adjusted if CALPADS information conflicts with our HLS.

On lines 1-4. Please answer the questions as they apply to your son or daughter:

1. Which language did your son or daughter learn when he/she first began to talk? _____
2. What language does your son or daughter use most frequently at home? _____
3. What language do you use most frequently to speak to your son or daughter? _____
4. Name the language most often spoken BY THE ADULTS at home. _____

If a language other than English is indicated on any line above, can your student communicate in that language?

Understands: ___ Yes ___ No **Reads:** ___ Yes ___ No
Speaks: ___ Yes ___ No **Writes:** ___ Yes ___ No

Was your student born in another country? Yes No

If yes, which country? _____

Date entered the United States: _____

Date first enrolled in U.S. school: _____

Did your student attend school in another country? ___ Yes ___ No

If yes, how long? _____ years

Has your student attended school in California? ___ Yes ___ No

If yes, what was the beginning date? _____ **Name of district?** _____ **Name of School?** _____

Signature of Parent or Guardian

_____/_____/_____
Date