



# Boulder Valley Public Schools

## Home Language Survey

<b>School use only</b>	
School _____	Grade _____
Student ID # _____	
Date enrolled ____ / ____ / ____	

**Student's Name:** \_\_\_\_\_  
(Surname/family name) (first given name) (Second given name/middle name)

**Country of Birth:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Parent's or Guardian's Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Phone** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Federal and State regulations require schools to determine the language(s) spoken and understood by each student. This information is necessary for schools to provide appropriate instruction. Please provide information about the student's primary or home language **only**. Please **do not** include language that is for enrichment only.

**Thank you for providing this important information.**

1. What language or languages did <b>the student</b> use when he/she first began to talk?	
2. What language or languages does <b>the student</b> speak with adults at home?	
3. What language or languages do parents or guardians <b>use when speaking to the student</b> ?	
4. Do the <b>adults in your home</b> (parents, guardians, grandparents or any other adults) <b>speak to each other every day in a language that is not English</b> ? <span style="float: right;">NO <input type="checkbox"/> YES <input type="checkbox"/></span>	
<b>If YES:</b> What language or languages? _____	
Does <b>the student</b> understand the conversations? <span style="float: right;">NO <input type="checkbox"/> YES <input type="checkbox"/></span>	
Does <b>the student</b> participate in the conversation even if he/she might use English? <span style="float: right;">NO <input type="checkbox"/> YES <input type="checkbox"/></span>	
5. What language or languages does <b>the student read</b> ?	
6. What language or languages does <b>the student write</b> ?	
7. Did <b>the student attend school in another country</b> ? <span style="float: right;">NO <input type="checkbox"/> YES <input type="checkbox"/></span>	
<b>If YES:</b> How many years? _____ Which country? _____	
Language or languages used for instruction: _____	
<b>Please</b> _____	
<b>Sign</b> _____ <b>Signature of Parent, Guardian or High School Student</b> _____ <b>Date</b> _____	

<b>School use only</b>	<b>Certificate of In-State Attendance</b>
	The student: Has been attending school in the USA since _____ (mm/dd/yy)
	Has been continuously attending a school in Colorado since _____ (mm/dd/yy) <small>(Enter today's date of never attended in Colorado or most recent entry date if left Colorado at any time.)</small>
	<b>The above information was verified by (check all that apply):</b>
	<input type="checkbox"/> Parent/Guardian report <input type="checkbox"/> Teacher Report: Name _____ <input type="checkbox"/> Student Records <input type="checkbox"/> School Personnel: Name _____ <input type="checkbox"/> Other: Please specify _____ <small>(Please write on reverse side if more space is required)</small>
<b>Please</b> _____	
<b>Sign</b> _____ <b>Signature of Person Completing Certificate of In-State Attendance</b> _____ <b>Date</b> _____	

DISTRIBUTION: **Yellow** – file in student's cum folder; **Original** – forward to Literacy and Language Support Services/Education Center