

HAMILTON SCHOOL DISTRICT

Home Language Survey

Student First Name: _____ Student Middle Initial : _____

Student Last Name: _____

Grade: _____ DOB: __/__/____

District: _____ School: _____

Parent/Guardian Information

First Name	Last Name	Relationship to Student

During an online registration you indicated that your child uses a language other than English. The information on this form helps us identify students who may need help to develop the English language skills necessary for success in school. Language testing may be necessary to determine if language supports are needed by your child.

Answers will not be used for determining legal status or for immigration purposes. If your child is identified as eligible for English language services, you may decline some or all of the services offered to your child.

Please answer only SECTION I and return it to your child's school.

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SECTION I

1. When interacting with their parents or guardians, does this student hear or use a language other than English more than half of the time?

- Yes
- No

2. When interacting with caregivers other than their parents or guardians, does this student hear or use a language other than English more than half of the time?

- Yes
- No

3. When interacting with their siblings or other children in their home, does this student hear or use a language other than English more than half of the time?

- Yes
- No

4. Is this student a Native American, Native Alaskan, or Native Hawaiian?

- Yes
- No

5. Is this student's language influenced by a Tribal language through a parent, grandparent, relative, or guardian?

- Yes
- No

Parent/Guardian Signature: _____

Date: _____

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SECTION II (to be filled by Hamilton school district staff member):

HLS Result: Screen / Do not Screen

Languages other than English used by student, if identified:

Parental preference for languages used for school communications (may be multiple):

Parent name: _____

Oral: _____

Written: _____

Parent name: _____

Oral: _____

Written: _____

HLS administered by:

_____, position _____.