HOME LANGUAGE SURVEY

Student Name: ____________________ School: _______ Date: _______

Date of Birth: ____________________ Age: _______ Grade: _______

Parent/Guardian Name and Address: ____________________________________________

Telephone (412) _______ Country of Origin: _____________________________

Other countries of residence (please list): ________________________________________

1. What was the first language your child learned to speak?

2. What language(s) does your child speak most often at home?

3. What language(s) do you use when speaking to your child?

4. What language(s) is spoken most often in your home?

5. Does your child understand, but not speak a language(s) other than English?

6. Do your (parents/guardians) read and/or write English?

Survey completed by: ____________________________