WEST DE PERE SCHOOL DISTRICT STUDENT HOME LANGUAGE SURVEY

In order to comply with state requirements and to assist the West De Pere School District in communicating with the home, please answer the following questions about your child's language.

tuder	nt's Name:			
	Last	First	Middle	
Date o	f Birth:	Sex:Ma	ileFemale	
ddre	ss:	Phone:		
choo	1:	Grade:	Grade:	
IRE	CTIONS: For each of the follo	wing six questions, please fill in the appro	priate answer.	
	What languages did your child speak when he or she first began to talk?			
	What languages does your child speak at home?			
	ganger and ganger			
3.	What languages does your child speak with his or her friends?			
	what languages does your ch	ind speak with his of her friends?		
•	What languages do you or other parent/guardian use when speaking to your child?			
•	Is there an adult in your home who can read English?			
	Yes	No		
	If not, what language(s) can	be read?		
	Do you want a translator available at school conferences?			
	Yes	No		

Signature

Date