## School District of Benton The Wisconsin Home Language Survey Form

**Purpose:** 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.

Student Last Name	Student First Name	Student Middle Name

Date of Birth	Grade	District	District ID	School
		Benton	0427	

Parent/Guardian Last Name	Parent/Guardian First Name	Relationship

Parent/Guardian Signature	

## Parental Preference for languages used for school communications (may be multiple)

Parent Name	Oral Communication	Written Communication	Interpreter Needed for Teacher Conferences & School Meetings?

1. Was the first language used by this student English?

YES – go to question 2 NO – go to question 3

2. When at home, does this student hear or use a language other than English more than half of the time?

YES – go to question 4 NO – not eligible for ELP screening. Form Complete.

3. When at home, does this student hear or use a language other than English more than half of the time?

YES – Administer Screener. Form Complete. NO – Go to Question 4.

4. 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 – Language(s): \_\_\_\_\_ Form Complete.

NO - go to question 5

5. 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 – Language(s): \_\_\_\_\_ Form Complete.

NO - go to question 6

6. 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 – Language(s): \_\_\_\_\_ Form Complete.

NO – go to question 7

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

YES - go to question 8

NO - go to question 9

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

YES – Language(s): \_\_\_\_\_ Form Complete.

NO – go to question 9

9. Has this student recently moved from another district where they were identified as an English Learner?

YES – Rescreen the student if they meet the criteria for rescreening. Otherwise, student's ELP should be carried over from the previous district.

NO –Not eligible for ELP screening. Form Complete.