Dayton SMART Elementary

HOME LANGUAGE SURVEY

DATE: _____

SCHOOL DISTRICT: _____

NAME OF STUDENT: _____
<div align="center">Family Name/ First Name/ Middle Name</div>

DATE OF BIRTH: _____ **PLACE OF BIRTH:** _____
<div>Month/Day/Year   City/State/Country</div>

NAME OF PARENT/GUARDIAN: _____
<div align="center">Family Name/ First Name</div>

HOME ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

HOME PHONE: _____ **WORK PHONE:** _____

For Parents/Guardians

Please respond to the following questions:

1   Is English the language your son or daughter spoke when he or she learned to speak?

     [ ] YES   [ ] NO

2   Is English the language your son or daughter uses most frequently at home?

     [ ] YES   [ ] NO

3   Is English the language you use most frequently at home?

     [ ] YES   [ ] NO

4   Is English the language the adults at home speak most often?

     [ ] YES   [ ] NO

5   How long has your son or daughter attended school in the United States?

_____

STOP

Please return the completed form to school personnel and they will inform you of any additional steps where necessary.

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For School District Personnel

If the answer to any of the first four questions above is a language other than English, indicate the student's native/home language in EMIS Student Data Element (GI270), and proceed to assess the student's English language proficiency.

Initial English Language Assessment

Communication Skill	Proficiency Level				
LISTENING:	☐ Pre-Functional	☐ Beginning	☐ Intermediate	☐ Advanced	☐ Proficient
SPEAKING:	☐ Pre-Functional	☐ Beginning	☐ Intermediate	☐ Advanced	☐ Proficient
READING:	☐ Pre-Functional	☐ Beginning	☐ Intermediate	☐ Advanced	☐ Proficient
WRITING:	☐ Pre-Functional	☐ Beginning	☐ Intermediate	☐ Advanced	☐ Proficient
COMPREHENSION*	☐ Pre-Functional	☐ Beginning	☐ Intermediate	☐ Advanced	☐ Proficient
COMPOSITE**:	☐ Pre-Functional	☐ Beginning	☐ Intermediate	☐ Advanced	☐ Proficient

*The Comprehension level is derived from Listening and Reading
**The Composite level is derived from Listening, Reading, Writing,

Assessment Instrument(s) used:

_____

_____

Is the student LEP?   ☐ Yes   ☐ No

Indicate the student's LEP or not LEP status in the EMIS Student Data Element (GI230).

If the student has been in the U.S. for less than three years and the student's reading and writing level is intermediate or below, the student is eligible for additional accommodations.

Is this student eligible?   ☐ Yes   ☐ No