

SAN LUIS COASTAL UNIFIED SCHOOL DISTRICT
Division of Educational Services
HOME LANGUAGE SURVEY

Date: _____ School: _____

The California Education Code requires schools to determine the language(s) spoken at home by each student. This information is essential to providing meaningful instruction for all students. Your cooperation in helping us meet this important requirement is requested. Please answer the following questions and return this signed form to the school secretary.

Name of Student: _____
Last
First
Middle
Grade
Age

1. Which language did your son/daughter learn when he/she began to talk? _____
2. What language does your son/daughter most frequently use at home? _____
3. What language do you most frequently use when speaking to your child? _____
4. Name the language most often spoken by the adults at home? _____

Has your son/daughter taken the English Language Proficiency Assessments for California (ELPAC) in the past 12 months? No Yes
 (This test is administered to prospective English Learners and annually to all English Learners.)

If yes, approximate date: _____

Student's Place of Birth: City _____ State _____

Country: USA Other: _____

Date First Enrolled in a U.S. School _____

<p>ETHNICITY Part I: <i>Mark one.</i></p> <p><input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino</p>	<p>ETHNICITY/RACE Part II: <i>In addition to your response in Part I, mark one or more boxes below.</i></p> <table style="width: 100%; border: none;"> <tr> <td style="vertical-align: top;"> <p><u>Asian</u></p> <p><input type="checkbox"/> Asian Indian <input type="checkbox"/> Cambodian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Hmong <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Laotian <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian</p> </td> <td style="vertical-align: top;"> <p><input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> White</p> <p><u>Native Hawaiian or Other Pacific Islander</u></p> <p><input type="checkbox"/> Guamanian <input type="checkbox"/> Hawaiian <input type="checkbox"/> Samoan <input type="checkbox"/> Tahitian <input type="checkbox"/> Other Pacific Islander</p> </td> </tr> </table>	<p><u>Asian</u></p> <p><input type="checkbox"/> Asian Indian <input type="checkbox"/> Cambodian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Hmong <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Laotian <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian</p>	<p><input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> White</p> <p><u>Native Hawaiian or Other Pacific Islander</u></p> <p><input type="checkbox"/> Guamanian <input type="checkbox"/> Hawaiian <input type="checkbox"/> Samoan <input type="checkbox"/> Tahitian <input type="checkbox"/> Other Pacific Islander</p>
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The information contained herein is accurate to the best of my knowledge. _____

Signature of Parent/Stepparent/Guardian