



Student Name _____

Please fill out and return by September 9, 2016.

HOME LANGUAGE SURVEY	
<i>Please answer the following questions for each student</i>	
Is a language other than English spoken in the home on a regular basis?	YES NO <input type="checkbox"/> <input type="checkbox"/> If YES , what language(s)? _____
Does the student use language other than English on a regular basis?	YES NO If YES , what language(s)? _____ <input type="checkbox"/> <input type="checkbox"/>
Is the student currently receiving "English Language Learner" services?	YES NO <input type="checkbox"/> <input type="checkbox"/>
<i>School Note: If any question is marked "YES", then the district has a legal obligation to evaluate for limited-English proficiency following the WI identification process. For more information see the following bulletin: http://esea.dpi.wi.gov/files/esea/pdf/bul_0701.pdf.</i>	

