

## Appendix B: Home Language Survey

Dear Parent/Guardian(s):

Vermont welcomes families of all cultural and linguistic backgrounds. Speaking more than one language is a valuable asset for individuals, families, and communities. We encourage families to maintain their languages while learning English. In order to ensure meaningful communication between your family and our school, please let us know if you have questions and/or would like translation/interpreting services related to this survey or other important school notices.

In order to meet challenging academic standards for all students, Federal law requires that public schools identify students who may be entitled to English language support services. Every parent/guardian of newly enrolling students in Kindergarten through grade 12 must complete the survey questions (below) at registration. An English Learner (EL) Specialist may request further information, if needed, to determine whether your student should be classified as an English Learner (EL) and is eligible to receive additional services.

Thanks very much for your time in completing this form! Please be assured that the survey information is used solely for educational purposes, to identify potential English Learners who might be eligible for English language support.

| <b>Student Information (Parents/Guardians should complete this section.)</b> |  |   |  |
|--|--|---|--|
| First Name:  | Last Name:                                 | Date of Birth<br>(Month/Day/Year)   | Gender:<br><br>F <input type="checkbox"/> M <input type="checkbox"/> |
| Country of Birth:  | Date of Entry in U.S.<br>(Month/Day/Year): | Date student first began <b>Kindergarten (or higher grade)</b> in <b>any</b> U.S. school<br>(Month/Day/Year): |  |
| Questions for Parents/Guardians  |  | Response  |  |
| 1. What language(s) are spoken in your home?                                 |  |   |  |
| 2. What language do you most <i>often</i> speak to your child?               |  |   |  |
| 3. What language does your child <i>currently</i> use most often at home?    |  |   |  |
| 4. What is the native language of each parent/guardian?                      |  |   |  |
| 5. What language did your child first speak or understand?                   |  |   |  |

|   |
|---|
| <b>For LEA Use Only:</b>  |
| What school <b>will</b> the student attend?   |
| What grade will the student enter?  |
| Beginning date in this school (Month/Day/Year):   |
| This student was screened for English Language Proficiency and identified as an <b>English Learner (EL)?*</b> <b>Y / N</b><br>Name of Test Administrator:<br>Date Student Screened:   |
| <i>If not identified as an English Learner, does the student meet the ESSA Definition of “Immigrant Children and Youth”?</i> * <b>Y / N</b><br>Under ESSA, the term ‘immigrant children and youth’ means individuals who –<br>“(A) are aged 3 through 21;<br>“(B) were not born in any State (including Puerto Rico); and<br>“(C) have not been attending one or more schools in any one or more States for more than 3 full academic years.” |

\*LEAs should submit HLSs to the VT-AOE using the HLS collection site only for students who have been:  
1. Screened by EL Professionals for English Language Proficiency and identified as ELs; and/or  
2. Identified as eligible to be counted under the “Immigrant Children and Youth” definition.