Harrisonville School District Language Use Survey: English

In order to provide your child with the best possible education. We need to determine how well he or she understands, speaks, reads and writes in English. Please provide information about your child's language abilities.

Student's Name:	Date:	_
School:	Grade:	_
Relationship of person completing this survey:		_
Tier I: Language Background		
 What was your child's first language? 		_English Other:
Which language(s) does your child use (speak) at ho	me and with others?	EnglishOther:
3. Which language(s) does your child hear at home and	d understand?	_ EnglishOther:
If any of these answers indicate a language other than English, please complete the rest of the survey.		
Tier II: Expanded Language Background		
4. Does the student understand when someone speaks with him	n/her in a language besides English?	Yes or No
5. Does the student read in a language other than English?		Yes or No
6. Does the student write in a language other than English?		Yes or No
7. Does the student interpret for you or anyone else in a langu	age other than English?	Yes or No
Tier III: Educational History		
8. How many years did the student attend school where the 1	native language was used for instruc	tion?
9. What was the most recent month and year the student at	rended school?	
10.Do you believe that your child has learning difficulties the If Yes, please explain:		nnd?
11. Has your child been referred to be evaluated for special of If yes, please explain:		
The school is required to assess the English language proficier first language other than English. If the results of the assess notified in writing and the school district will provide language	sment show a student needs languag	e support, you will be
Notice to School Staff: This form must be given to all new language other than English must be assessed to determine t district staff responsible for the next steps immediately and records.	he student's English language profic d when ready keep this form in the :	ciency. Please notify student's permanent
K-12 Please notify Sarah Enkey <u>sarah.enkey@harrisonvillesa</u>	<u>shools.org</u> 816-380-4131 ext.38	337
L Preferred language for contact by telephor	 e:	
Preferred language for written contact:		