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## Westford Public Schools

Administrative Offices

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### Home Language Survey

Massachusetts Department of Elementary and Secondary Education regulations require that *all* schools determine the language(s) spoken in each student's home in order to identify their specific language needs. This information is essential in order for schools to provide meaningful instruction for all students. If a language other than English is spoken in the home, the District is required to do further assessment of your child. Please help us meet this important requirement by answering the following questions. Thank you for your assistance.

#### STUDENT INFORMATION

Student (full) Name: \_\_\_\_\_ Male \_\_\_\_\_ Female  
DOB: \_\_\_\_\_ Student's Country of Birth: \_\_\_\_\_  
Date first enrolled in ANY US school: \_\_\_\_\_ Number of years student has been in US schools (excluding PK) \_\_\_\_\_  
School Enrolling In: \_\_\_\_\_ Start Date: \_\_\_\_\_ Current Grade: \_\_\_\_\_  
Name of Former School/Town/State/Country: \_\_\_\_\_

#### QUESTIONS FOR PARENTS

What is the *primary* language used in home, regardless of the language spoken by the student? \_\_\_\_\_

Which language(s) are spoken with your child (include relatives/caregivers)? \_\_\_\_\_

If other than English, is it \_\_\_\_\_ seldom \_\_\_\_\_ sometimes \_\_\_\_\_ often \_\_\_\_\_ always

What language did your child first understand and speak? \_\_\_\_\_

What language do you use most with your child? \_\_\_\_\_

Which language(s) do your child use and how often:

1) \_\_\_\_\_: \_\_\_\_\_ seldom \_\_\_\_\_ sometimes \_\_\_\_\_ often \_\_\_\_\_ always  
2) \_\_\_\_\_: \_\_\_\_\_ seldom \_\_\_\_\_ sometimes \_\_\_\_\_ often \_\_\_\_\_ always

Will you require written information in your native language? \_\_\_\_\_ Yes \_\_\_\_\_ No

Will you require an interpreter/translator at Parent-Teacher meetings? \_\_\_\_\_ Yes \_\_\_\_\_ No

Parent/Guardian Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Staff person who administered this form to parent: \_\_\_\_\_ Date: \_\_\_\_\_