



**STATE OF HAWAII
DEPARTMENT OF EDUCATION**

**HOME LANGUAGE SURVEY
FOR ALL NEWLY ENROLLING STUDENTS**

NOTE TO SCHOOL STAFF: *This form should only be given once, upon initial enrollment in the Department. Do not make changes to student languages in the Student Information System without first consulting your school's English Learner Coordinator.*

ALL newly enrolling students to the Hawaii State Department of Education (Department) MUST complete this Home Language Survey, regardless of race, nationality, or language origin. Title VI of the Civil Rights Act of 1964 and Equal Educational Opportunities Act of 1974 require that the Department utilize a non-biased procedure for identifying students who are potential English Learners (ELs) in order to provide appropriate language instruction educational programs and services.

The language information requested is essential for schools to identify eligibility for EL services and provide meaningful instruction for students. Indication of a language other than English does not ensure eligibility, but requires the school to conduct an English proficiency test to determine if a need for English language development instruction exists. These questions are used solely to offer appropriate educational services, not for determining legal status or for immigration purposes.

To ensure the language needs of all Department students are met, please complete the following:

- SECTION A: Parent/Legal Guardian Information. This response will help us understand how to best communicate with you as the parent(s)/legal guardian(s) in a language that you understand.
- SECTION B: Student Information. These responses will assist us in understanding a student's language background and whether or not a student's English proficiency should be assessed.

SECTION A: PARENT/LEGAL GUARDIAN INFORMATION

Parent/Legal Guardian First Name

Parent/Legal Guardian Last Name

1. Do you as a **parent/legal guardian** require interpretation (spoken) or translation (written) of information from your child's school in your native language? Interpretation or translation would be at no cost to you.

No, I don't need interpretation or translation (spoken or written) support.

Yes, I need interpretation or translation (spoken or written) support in: _____
(Name of Language)

SECTION B: STUDENT INFORMATION

First Name

Middle Name

Last Name

Grade

____/____/____
MM / DD / YYYY
Date of Birth

F M
Gender

Has this child enrolled at a Hawaii Department of Education school or Hawaii Public Charter school before?

No (Continue to Student Language Questions ↷)

Yes (Skip to Parent/Legal Guardian Signature)

STUDENT LANGUAGE QUESTIONS (Refer to the attached Language List)

1. What is/are the language(s) most used in your **home**, regardless of the language spoken by your child?

(Name of Language)

2. What language did your child **first acquire**? _____
(Name of Language)

3. Which language does your child **use or understand most**? _____
(Name of Language)

Parent/Legal Guardian Signature: _____

Today's Date: ____/____/____
MM / DD / YYYY
(e.g. 05/26/2022)

Home Phone #: _____

Cellular Phone #: _____