



For office use only  
Synergy ID \_\_\_\_\_

## Language Use Survey

The purpose of this survey is to determine if your child's current language exposure and use might make your child eligible to receive support in academic English instruction.

Student Name: \_\_\_\_\_ Grade Level: \_\_\_\_\_  
School: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

1. What language(s) does your child **hear or use** regularly in your household (i.e. spoken, media, music, literature, etc.)? hear \_\_\_\_\_ use (i.e., American Sign Language (ASL)) \_\_\_\_\_

2. Describe the language(s) your child **understands**.

- No English
- Mostly another language and a little English
- English and another language equally
- Mostly English and a little of another language
- Tribal/Heritage/Native Language (i.e., languages spoken by American Indian/Alaska, Native Hawaiians, and citizens of U.S. Territories)
- Only English

3. What language(s) do **adults** most frequently **use** when speaking/conversing to your child?

Parent/Guardian: \_\_\_\_\_ Parent/Guardian: \_\_\_\_\_  
Other Adults in the Home: \_\_\_\_\_ Child-care Providers: \_\_\_\_\_

4. What language(s) does your **child CURRENTLY speak/express** most frequently **outside of school**?

\_\_\_\_\_

5. Does your child frequently participate in cultural activities that are in a language other than English? Please list the activity and how often your child participates in the activity (e.g., once/week, 2 times/week, once a month, etc.).

\_\_\_\_\_

6. Is there anything else you think the school should know about your child's language use (e.g., what language did your child speak/express from ages 0-4; did your child have speech classes; did your child attend a bilingual pre-school, etc.)?

\_\_\_\_\_

Parent or Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

What is your relationship to the student? \_\_\_\_\_ (e.g., parent, grandparent, etc.)