

PINELLAS COUNTY SCHOOLS
HOME LANGUAGE SURVEY

ADMINISTER FOR EACH NEW STUDENT ENROLLING IN A FLORIDA PUBLIC SCHOOL FOR THE FIRST TIME

Student's Last Name _____ Student's First Name _____

Address _____ City _____ Zip Code _____ Phone Number _____

Date Entered U.S. Schools _____ School _____ Current Grade _____

Date of Birth _____ Country of Birth _____ Email Address _____

The information provided on this form is used solely to offer appropriate educational services, not for determining legal status or for immigration purposes.

PLEASE ANSWER THE FOLLOWING QUESTIONS:

- a. Is a language **other than English** spoken at home? Yes ___ No ___ What language? _____
- b. Does the student have a first language **other than English**? Yes ___ No ___ What language? _____
- c. Does the student most frequently speak a language **other than English**? Yes ___ No ___ What language? _____

ANY "YES" ANSWERS WILL RESULT IN TESTING TO DETERMINE ELIGIBILITY FOR ESOL SERVICES. BECAUSE OF THE LARGE NUMBER OF STUDENTS TO BE TESTED, THERE MAY BE A DELAY IN TESTING OF UP TO 4 WEEKS. CLASSROOM TEACHERS WILL ADJUST THEIR INSTRUCTION TO MEET THE EL STUDENT'S NEEDS. EVEN IF YOUR CHILD IS IDENTIFIED AS AN ELL, YOU MAY DECLINE THE PLACEMENT INTO ESOL CLASSES.

Parent/Guardian Signature

Date

SCHOOL USE ONLY

If answers to above questions are all NO: file Home Language Survey in cum folder

Any YES responses, Pre-K: Code LY basis of entry T on EL Tab in FOCUS; enter Classification Date (HLS date) and Entry Date (1st day of PK)

Any YES responses, K-12: Code LP basis of entry T on EL Tab in Focus. Give HLS to ESOL Teacher or send to ESOL Office for testing

ESOL USE ONLY

Is this a Foreign Exchange Student? If YES, do not test!

English Learner (EL): Yes No EL Status: LY LF TZ

Basis of Entry: A R L T Basis of Exit H I J L

Classification Date _____ Entry Date _____ Exit Date _____

Native Language _____ Tester _____

Comments _____

TEST NAME	TEST DATE	Title	Level (local) (Lvl) A-B-C-D	Rating (local) (RTG) BEG=1 LIN=2 HIN=3 PRF=4	Scale Score (SS)
Online CELLA (Form 3)		Listening/Speaking			
Other:		Reading			
		Writing			
		Comprehensive/ (Total)			