



# LANGUAGE SURVEY

Complete one form for each child.

*(To be answered by parent/guardian and returned to school in preparation of educational services and testing of student)*

<b>Student's Name</b> _____	
<b>Grade</b> _____	<b>School Year</b> <u>2016-2017</u>

- Name of person answering this survey \_\_\_\_\_
- Your relationship to the student (circle one)    Mother    Father    Guardian
- Language most often spoken in home     English     Other \_\_\_\_\_
- Language most often used by the student     English     Other \_\_\_\_\_
- Date (Month/Yr) student first entered a U.S. Public School \_\_\_\_\_
- Number of years enrolled in public school \_\_\_\_\_
- Was the student born in the United States? (circle one)    Yes    No  
If no, what date did student enter the US? \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

\*\*\* Return the completed form to MAX Charter School

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