Falmouth Public Schools

340 Teaticket Highway
East Falmouth, Ma 02536

State and Federal Law 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.

_____

Last Name **Middle** **First Name**

GENDER: **Female**_____ **Male**_____ **Non-Binary**_____

_____ _____ _____

Country of Birth **Date of Birth (mm/dd/yy)** **Date first enrolled in ANY US school (mm/dd/yy)**

Questions for Parents/Guardians	
What is the native language(s) of each parent/guardian? (circle one) _____(mother/father/guardian) _____(mother/father/guardian)	**Which language(s) are spoken with your child? *(include relatives-grandparents, uncles, aunts etc. – and caregivers)*** _____(seldom/sometimes/often/always) _____(seldom/sometimes/often/always)
What language did your child first understand and speak? _____	**Which language do you use most with your child?** _____
Which other languages does your child know? (circle all that apply) _____speak/read/write _____speak/read/write	Which languages does your child use? _____(seldom/sometimes/often/always) _____(seldom/sometimes/often/always)
Will you require written information from school in your native language? Yes ☐ NO ☐	**Will you require an interpreter/translator at Parent – Teacher meetings?** Yes ☐ NO ☐
Parent/Guardian Signature: X_____	_____/__20_____ **Today's Date** (mm/dd/yyyy)

For office use only:

ELD Assessment _____Date _____Given by _____

Results:_____

Qualified for ELD services _____ Did NOT qualify for ELD services _____

Recommendations:

_____