Please answer **ALL** questions on both sides of this form.

School Building of Residence: ___________________________ Today’s Date: ______________________

Student’s Last Name ___________________________ First Name ___________________________

**Student Information**

1. What was your child’s **first language**? (native/home language)
   - English
   - Other: __________________

2. Which language(s) does your child **mostly** use (speak) at home and with others?
   - English
   - Other: __________________

   Please note: This question is about native language. It is not about a language other than English that your child is learning.

3. Which language(s) does your child hear and understand at home? (Which language do the adults in the child’s home mostly speak?)
   - English
   - Other: __________________

4. Please describe the language your child uses to communicate. **Choose only one.**
   - Communicates only in the native language and no English.
   - Communicates mostly in the native language and some English.
   - Communicates in the native language and English equally.
   - Communicates mostly in English and some of the native language.
   - Communicates only in English.

   Comments: __________________________________________________________________________

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**Family Information**

5. Have you or your family moved in the last three (3) years? **YES** **NO**

6. In the last three (3) years, have you worked or are you currently working in any of these areas?

   **Check all that apply**
   - Work in a nursery (plants)
   - Planting or harvesting crops
   - Milking cows on a dairy farm
   - Feeding poultry, gathering eggs, working in a hatchery
   - Processing meat, poultry, fruit, vegetables, dairy products
   - Growing & tending trees to be sold
   - Commercial fishing or work on fish farm

   Parent’s Place of Employment: __________________________________________________________________________

7. Do you identify as a Refugee or have you been given refugee status through the U.S. government? **YES** **NO**
Parent's/Guardian’s Language

8. **Language of Correspondence for Parents/Guardians (please list one):** In which language do the parents/guardians (family) prefer to receive communication from the school, if possible?
   
   Check one:  English [ ]  Arabic [ ]  Chinese [ ]  
              Spanish [ ]  Korean [ ]  Other: ________________________________

9. Does at least one parent or guardian speak a language other than English?  
   YES  NO

   **If the answer to #9 is YES, please complete Questions 10-12.**
   **If the answer is NO, please skip to the bottom of the page.**

10. Does at least one of the parents/guardians prefer a language interpreter, if available? (Please choose one answer per family.)  
    YES  NO

11. Parent/Guardian #1–Print Name: _______________________________________
    Relationship to child: Mother  Father  Guardian
    What is your first/native language?  ________________________________
    a. Do you read in your native language?  [ ] Yes  [ ] Some  [ ] No
    b. Do you write in your native language?  [ ] Yes  [ ] Some  [ ] No
    c. Do you speak & understand English?  [ ] Yes  [ ] Some  [ ] No
    d. Do you read in English?  [ ] Yes  [ ] Some  [ ] No
    e. Do you write in English?  [ ] Yes  [ ] Some  [ ] No

12. Parent/Guardian #2–Print Name: _______________________________________
    Relationship to child: Mother  Father  Guardian
    What is your first/native language?  ________________________________
    a. Do you read in your native language?  [ ] Yes  [ ] Some  [ ] No
    b. Do you write in your native language?  [ ] Yes  [ ] Some  [ ] No
    c. Do you speak & understand English?  [ ] Yes  [ ] Some  [ ] No
    d. Do you read in English?  [ ] Yes  [ ] Some  [ ] No
    e. Do you write in English?  [ ] Yes  [ ] Some  [ ] Yes

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**Student Information:**  
Birth Date: ___________ Age: _________ Male / Female: ________

First U.S. Enrollment Date (the first time your student enrolled in a U.S. School): ________________________________

Former School City & State: _____________________ Former School’s Phone Number: __________________________

Most Recent Grade Completed: _________ How long will you be in Columbia Public Schools? _________

Has the student been in ELL/ESL classes before?  YES  NO  Phone Number: __________________________

Print Parent/Guardian Name: ______________________  Parent/Guardian Signature: __________________________

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**Office Use only: CPS Registrars/Secretaries:** Please input ALL answers above into eSchool enrollment. **Place a copy of this form in student’s CUME folder.** If any question is answered “yes” or a language other than English is listed in any answer, send a copy to the EL teacher or EL department at Aslin. **Notes:**