



DAKOTA VALLEY SCHOOL DISTRICT
Required Form for ALL Students

STUDENT NAME:	BIRTHDATE:
PARENT/GUARDIAN NAME:	GRADE:

HOME LANGUAGE INFORMATION

Is your child's first language other than English? ___ Yes ___ No

What language is *most frequently* spoken at home? _____

What language does your child *most frequently* speak at home? _____

What language do you and your family *most frequently* speak to your child? _____

What language did your child learn when he/she first began to talk? _____

Describe the language understood by your child (check only one):

- ___ Understands only the home language and no English
- ___ Understands mostly the home language and some English
- ___ Understands the home language and English equally
- ___ Understands only English

If available, what language would you prefer to receive communication from the school? _____

FOR OFFICE USE ONLY

Date paperwork received from parent: _____

Date Special Services Director/Secretary notified: _____