



HOME LANGUAGE SURVEY

Complete this Home Language Survey at the student's initial enrollment in a Chicago Public School. This form must be kept in the student's folder.

School: \_\_\_\_\_ Room: \_\_\_\_\_ School ID #: \_\_\_\_\_ Network: \_\_\_\_\_  
 Student Name: \_\_\_\_\_ Student IS #: \_\_\_\_\_

**English**

1. Is a language other than English spoken in your home?  
 No  Yes \_\_\_\_\_ (Language)
2. Does the student speak a language other than English?  
 No  Yes \_\_\_\_\_ (Language)

If the answer to either question is yes, the law requires the school to assess your child's English language proficiency.

**IMPACT REGISTRATION PROCESS**

(For Office use only)

- The Non-English language identified on either question is the Home Language.
- If two different non-English languages are identified, enter the language identified in question 2 as the Home Language.
- Enter ENGLISH as a Home Language ONLY when both questions are answered no.

**Romanian**

1. În familia dvs. se vorbește și altă limbă decât engleza??  
 Nu  Da \_\_\_\_\_ (limba)
2. Studentul vorbește și altă limbă decât engleza?  
 Nu  Da \_\_\_\_\_ (limba)

Dacă ați răspuns afirmativ la oricare dintre întrebări, prin lege, instituția de învățământ trebuie să evalueze cunoștințele de limbă engleză ale copilului dvs.

**Yoruba**

1. Njé ẹ n sọ ẹdè miran yatọ si Ẹdè-Gẹ̀ẹ̀sì ninu idile yin bí?  
 Bẹ̀ẹ̀kọ  Bẹ̀ẹ̀ni \_\_\_\_\_ (Ẹdè)
2. Ẹ se akẹ̀kọ̀ọ̀ nàá n sọ ẹdè miran yatọ sí ẹdè-Gẹ̀ẹ̀sì bí?  
 Bẹ̀ẹ̀kọ̀  Bẹ̀ẹ̀ni \_\_\_\_\_ (Ẹdè)

Ti idáhùn sí ibẹ̀rè nàá bá jẹ́ Bẹ̀ẹ̀ni, ọ́fin bẹ̀rè pé kí ilé-ẹ̀kọ̀ nàá se igbẹ̀kẹ̀wọ̀n bí ọmọ re se gbọ ẹdè Gẹ̀ẹ̀sì sí.

**Assyrian**

1. *هل في بيتك تتكلمون بلغة اخرى غير الانكليزية؟*  
 *لا*  *نعم* \_\_\_\_\_ (اللغة)  
 2. *هل يتكلم الطالب بلغة اخرى غير الانكليزية؟*  
 *لا*  *نعم* \_\_\_\_\_ (اللغة)
3. *هل يتكلم الاب او الام بلغة اخرى غير الانكليزية؟*  
 *لا*  *نعم* \_\_\_\_\_ (اللغة)

**Gujarati**

1. શું આપના ઘરમાં અંગ્રેજી સિવાયની ભાષા અન્ય કોઈ ભાષા બોલવામાં આવે છે?  
 ના  હા \_\_\_\_\_ (ભાષા)
  2. શું વિદ્યાર્થીઓ અંગ્રેજી સિવાયની કોઈ ભાષા બોલે છે?  
 ના  હા \_\_\_\_\_ (ભાષા)
- જો બન્નેમાંથી કોઈ એક પ્રશ્નનો જવાબ પણ હા માં હોય તો, કાયદો શાળા પાસે તમારા બાળકના અંગ્રેજી ભાષાના કૌશલ્ય માટે આકારણી કરાવવા માંગે છે.

**Tagalog**

1. May iba pa bang lengguwahe bukod sa Ingles na ginagamit sa iyong tahanan?  
 Hindi  Oo \_\_\_\_\_ (Lengguwahe)
  2. May ginagamit ba na ibang lengguwahe ang mag-aaral bukod sa Ingles?  
 Hindi  Oo \_\_\_\_\_ (Lengguwahe)
- Ayon sa batas, kung 'Oo' ang sagot sa parehong tanong, kailangan suriin ng paaralan ang kakayahan at kaalaman ng mag-aaral sa wikang Ingles.

**Korean**

1. 가정에서 사용하는 언어 중에서 영어를 제외한 다른 언어가 있습니까?  
 아니오 예 \_\_\_\_\_ (언어)
  2. 학생이 영어 이외의 다른 언어를 구사합니까?  
 아니오 예 \_\_\_\_\_ (언어)
- 상기의 질문 중 하나라도 "예"로 응답하신 경우에는, 관련 법에 따라 학교는 귀 자녀의 영어 구사 능력 개발을 지원해야 합니다.

Signature of School Official \_\_\_\_\_ Date \_\_\_\_\_ Signature of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Notes:**

- If the parent/guardian does not speak English and the school does not have staff who speaks the parent/guardian's language, identify the language spoken by the parent/guardian through any assistance available in the school.
- If exact name of the language cannot be determined, enter "Other" as a temporary entry. If you entered "Other," the exact language must be determined within two weeks after enrollment.
- If the language spoken by the parent is not reflected in this HLS, please visit the OLCE Forms page on the Knowledge Center at [bit.ly/OLCEforms](http://bit.ly/OLCEforms) and click on Home Language Survey in Additional Languages.

HLS 1 of 2  
 Spanish  
 Polish  
 Chinese  
 Arabic  
 Bosnian  
 Croatian  
 Serbian  
 Urdu

HLS 2 of 2  
 Romanian  
 Yoruba  
 Assyrian  
 Gujarati  
 Tagalog  
 Korean

Office of Language and Cultural Education

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Dr. Michael Beyer  
*Principal*

Cara Kranz  
*Head of East Campus*

Stacie Chana  
*Head of West Campus*

## Records Release Form:

Please forward student records to:

Ogden International School of Chicago  
 24 W. Walton Street  
 Chicago, IL. 60610  
 Phone: (773) 534-8110  
 Fax: (773) 534-8017

Student Information		
Student Name:	Grade:	School Year:
Date of Birth:	Birthplace:	
Mother's Name:	Father's Name:	
School or Agency Releasing Records		
Name:		
Street Address P.O. Box:		
City:	State:	Zip:
Telephone:	Fax:	

The person or agency receiving these records MUST NOT transfer the information to any other person or agency without written consent. Authorization is hereby granted to release all education, test, and health records held concerning the student named above, including psychological exams, social work report, and all special education information, if applicable. According to Federal Law (PL 93-380), I have the right to review the educational records of the student on request. I also have the right to challenge any contents which may be inaccurate, misleading, or otherwise in violation of the privacy or other rights of the student.

I hereby authorize the release of my child's transcripts to Ogden International School of Chicago.

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

