

**Surrey Public School**  
**District No. 41**  
**P.O. Box 40**  
**Surrey, ND 58785-0040**  
Phone 701-838-3282 Fax 701-838-8822

The U.S. Office of Civil Rights requires that schools identify possible English Language Learners (ELL) during enrollment. This Home Language Survey will be used as a tool to determine if your child is eligible for language support services. If you or your child use a language other than English and your child meets the Limited English Proficient definition, the school may give your child an English Language Proficiency Assessment. The school will share the results of the assessment with you.

Students Name: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Country of Birth: \_\_\_\_\_

Parent's Name: \_\_\_\_\_ Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_

School Name: \_\_\_\_\_ Grade: \_\_\_\_\_

What language(s) does your child speak at home?

English: Always \_\_\_\_\_ Sometimes \_\_\_\_\_ Rarely \_\_\_\_\_ Never \_\_\_\_\_

Other: \_\_\_\_\_ Always \_\_\_\_\_ Sometimes \_\_\_\_\_ Rarely \_\_\_\_\_ Never \_\_\_\_\_

What language do you use the most to speak to your child?

English: Always \_\_\_\_\_ Sometimes \_\_\_\_\_ Rarely \_\_\_\_\_ Never \_\_\_\_\_

Other: \_\_\_\_\_ Always \_\_\_\_\_ Sometimes \_\_\_\_\_ Rarely \_\_\_\_\_ Never \_\_\_\_\_

Which language(s) does your child use to:

Read: English Only \_\_\_\_\_ Other language \_\_\_\_\_

Write: English Only \_\_\_\_\_ Other language \_\_\_\_\_

Please mark each grade your child has attend school inside the United States:

PreK	K	1	2	3	4	5	6	7	8	9	10	11	12
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Please mark each grade your child has attended school outside of the United State:

PreK	K	1	2	3	4	5	6	7	8	9	10	11	12
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This form should be placed in the student's cumulative file. If the parent identifies any language other than English as being used, please send a copy of this form to Debbie Hansen at 200 2<sup>nd</sup> St. SE, PO Box 40, Surrey ND, 58785. You may also fax this form to Debbie Hansen at 838-8822. Please fill out before sending if available.

Teacher's Name: \_\_\_\_\_

Room Number \_\_\_\_\_

State ID #: \_\_\_\_\_

Power School #: \_\_\_\_\_

*"Home of the "Mustangs"*

David Gerding - Superintendent  
Twila Ganzter - Business Manager

Debbie Hansen - Elementary Principal  
Brad Hoffarth - Activities Director