



Corbett School District Federal Programs Questionnaire

Instructions: This questionnaire is a required form. The questions on this form ask for important information that will help provide services for your child. If you need help filling out this form, please contact your school. Please print and complete all pages. Complete one form for each child.

Student Name: _____

Grade Level: _____

School: _____

Date of Birth: _____

Language Use Survey

The purpose of this survey is to determine if your child's current language exposure and use might make your child eligible to receive support in academic English instruction. English language services will only be provided if student is eligible.

1. What language(s) does your child **hear or use** regularly in your household (i.e. spoken, media, music, literature, etc.)? hear _____ use (i.e., American Sign Language (ASL)) _____

2. Describe the language(s) your child **understands**.

- No English
- Mostly another language and a little English
- English and another language equally
- Mostly English and a little of another language
- Tribal/Heritage/Native Language (i.e., languages spoken by American Indian/Alaska, Native Hawaiians, and citizens of U.S. Territories)
- Only English

3. What language(s) do **adults** most frequently **use** when speaking/conversing to your child?

Parent/Guardian: _____ Parent/Guardian: _____

Other Adults in the Home: _____ Child-care Providers: _____

4. What language(s) does your **child CURRENTLY speak/express** most frequently **outside of school**?

5. Does your child frequently participate in cultural activities that are in a language other than English? Please list the activity and how often your child participates in the activity (e.g., once/week, 2 times/week, once a month, etc.).

6. Is there anything else you think the school should know about your child's language use (e.g., what language did your child speak/express from ages 0-4; did your child have speech classes; did your child attend a bilingual pre-school, etc.)?

Parent Questions: In what language(s) do you want to receive information from the school (if available)?

Parent/Guardian:

Oral _____ Written _____ American Sign Language _____

Parent/Guardian:

Oral _____ Written _____ American Sign Language _____

Parent or Guardian Signature _____ Date _____

What is your relationship to the student? _____ (e.g., parent, grandparent, etc.)



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Recent Arrivers

The purpose of this information is to determine if your child has experienced interruptions in their formal education that might make them eligible for intervention services.

1. When did your child start attending school? _____ In which country? _____

2. Was your child in school **continuously** since they started? **Y** **N**

If **NO**, what was the last grade completed? _____

3. Did your child attend other schools in the U.S.? (List) _____

4. Is there anything else you think the school should know about your child's education? (i.e. received instruction in refugee camp, did not attend school due to teacher strikes or safety issues, etc.)

Migrant Education Program (Title IC)

The purpose of this information is to determine if your child is eligible to participate in the Migrant Education Program.

1. Has your family moved within the last three years? **Y** **N**

2. Have you or a relative worked in agricultural or fishing industries, in a farm/ranch, cannery, nursery, dairy, packing fruit or vegetables, food processing plant, forestry/logging or any other related activity? **Y** **N**

3. Have you or a relative ever qualified for the Migrant Education Program? **Y** **N**

Indian Education Program (Title VI)

The purpose of this information is to determine if your child is eligible to participate in the Indian Education Program. Enrollment in a Federal or State Recognized Tribe can establish eligibility to participate in the Title VI Indian Education Program, a Federal Grant under the Indian Education Act of 1972. A Title VI Student Eligibility Certification must be completed for every eligible student.

Tribal Affiliation: _____

Military Affiliation

Is a parent or guardian connected to the military in one of the following ways: A member of the Armed Forces on active duty, a full-time National Guard member or in the Active Duty Reserves? **Y** **N**

Parent/Guardian Signature _____ Date _____

What is your relationship to the student? (i.e., parent, grandparent, etc.) _____