



## **Anchorage School District**

5530 E. Northern Lights Blvd.  
Anchorage, Alaska 99504-3135  
(907) 742-4000

Dear Parent or Guardian,

Welcome! The Anchorage School District is committed to supporting students who speak or understand languages other than English. English instruction and/or tutoring for other subject areas is provided as needed during regular school hours. Specially trained teachers and tutors who understand, respect and appreciate different languages and cultures will work with eligible students.

In order to help us determine which students may qualify for our program, please take a minute to **complete the attached form**. If a language other than English is indicated, language assessments will be done and families will be notified of the results.

If you have questions, or need help with the form, we will be happy to assist you.

Sincerely,

A handwritten signature in blue ink that reads "Christine Garbe". The signature is written in a cursive style.

Christine Garbe, Supervisor  
English Language Learners Program

Office staff, please initial:  
\_\_\_\_\_ Parent was given  
an ELLP brochure.



# PARENT LANGUAGE QUESTIONNAIRE (Home Language Survey)

**Anchorage School District**

District ID # \_\_\_\_\_

\_\_\_\_\_ grade: \_\_\_\_\_

Alaska Student ID #: \_\_\_\_\_

(school)

If a language other than English is part of a student's language background, state and federal law require us to test his/her English proficiency.

Student name: \_\_\_\_\_ Place of birth: \_\_\_\_\_  
(last name, first name)

Has this student attended school outside of the U.S.?  no  yes, in \_\_\_\_\_  
(country)

Circle grades completed outside U.S.: K 1 2 3 4 5 6 7 8 9 10 11 12

Date student first entered a U.S. school \_\_\_\_\_ Participating in an exchange student program?  no  yes

1. Please list \*all languages spoken in this student's home.  English  other \_\_\_\_\_  
\*Do not include languages that your child is learning/has learned in school.

2. What is the first language this student learned to speak?  English  other \_\_\_\_\_

If English is the only language above, please sign and date at the bottom of the form.  
If a language other than English is listed above, please answer the questions below.

3. What language(s) does this student speak?  English  other \_\_\_\_\_

4. What language(s) does this student understand?  English  other \_\_\_\_\_

5. What was the first language spoken by mother/guardian?  English  other \_\_\_\_\_

6. What was the first language spoken by father/guardian?  English  other \_\_\_\_\_

7. Is there another adult who influenced this student's language development?  no  yes

relationship to student \_\_\_\_\_ language spoken \_\_\_\_\_

**Parent/Guardian signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent/Guardian printed name** \_\_\_\_\_