

Home Language Questionnaire (HLQ)

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Dear Parent or Guardian:

In order to provide your child with the best possible education, we need to determine how well he or she understands, speaks, reads and writes English. Your assistance in answering these questions is greatly appreciated.

Thank You

TO BE COMPLETED BY SCHOOL PERSONNEL

District _____
School _____ Grade _____
-
Student Name _____
Date of Birth _____
Student Identification Number _____
Country of Birth/Ancestry _____
Number of years enrolled in school outside the U.S. _____
Determination _____ Possible LEP
_____ English Proficient

(Put a ✓ in the boxes that apply)

1. What language(s) is spoken in the student's home or residence? English Other _____
specify

2. What language(s) are spoken to the student, in the home or residence? English Other _____
specify

3. What language(s) does the student understand English Other _____
specify

4. What language(s) does the student speak? English Other _____
specify

5. What language(s) does the student read? English Other _____ Does Not Read
specify

6. What language(s) does the student write? English Other _____ Does Not Read
specify

7. In your opinion, how well does the student understand, speak, read, and write English?

	<i>Very Well</i>	<i>Only a Little</i>	<i>Not at all</i>
Understands English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Speaks English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reads English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Writes English



Month:

Day:

Year:

Signature of Parent/Guardian/Other

Date