

Acton Public Schools
16 Charter Road
Acton, MA 01720
978-264-4700

Home Language Survey

Student's Name _____ Date of Birth _____ Country of Birth _____
First, Middle, Last

Year entered United States _____ Year First Attended School in United States _____

Ethnicity (Select One)

Not Hispanic or Latino

Hispanic or Latino (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

Race (Select as many as apply)

American Indian or Alaska Native (A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.)

Asian (A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent. This area includes, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Phillipine Islands, Thailand and Vietnam.)

Black or African American (A person having origins in any of the black racial groups of Africa.)

Native Hawaiian or Other Pacific Islander (A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.)

White (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)

1. What language did your child first learn? _____
2. What language do you use when speaking to your child? _____
3. What languages does your child use when speaking to you? _____
4. What language does your child use when speaking to other family members? _____
5. What language(s) are spoken by adults at home? _____
6. What language does your child use most often when speaking with friends? _____
7. Do you need important school communications translated in your first language? _____
Yes _____ No _____ If so, which language? _____

Parent/Guardian Signature

Date

Community Contact (if necessary)