



**GREENVILLE COUNTY SCHOOLS  
PRIMARY/HOME LANGUAGE IDENTIFICATION FORM**

*Please Print*

This form must be completed at registration for *every* student who registers in a district school for the first time and placed in the student's permanent record folder. If the first language is other than English, contact the English for Speakers of Other Language (ESOL) office for assistance with registration. Elementary and Middle Schools, 355-2986; High Schools 355-2985

_____		_____
Student's name		Date
_____		_____
Student's Address		Current Grade Level
_____		_____
City	Zip- Code	Country of birth
_____		_____
Name of School		Alien Registration # (if applicable)

Please answer the following questions about the student's language background.

1. What is the first language you learned to speak? Circle *the appropriate letter*
  - a. Arabic
  - b. Cambodian
  - c. Chinese
  - d. English
  - e. French
  - f. German
  - g. Greek
  - h. Gujarati
  - i. Hindi
  - j. Japanese
  - k. Korean
  - l. Laotian
  - m. Portuguese
  - n. Spanish
  - o. Tagalong
  - p. Thai
  - q. Urdu
  - r. Vietnamese
  - s. Other – specify \_\_\_\_\_
2. What is the language you speak more often? \_\_\_\_\_
3. What language is spoken most often in your home? \_\_\_\_\_
4. Do the parents/guardians read and speak English?
  - a. Mother Yes \_\_\_ No \_\_\_
  - b. Father Yes \_\_\_ No \_\_\_
  - c. Guardians Yes \_\_\_ No \_\_\_

Signature of the School personnel completing this form \_\_\_\_\_