



**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	k. Korean
b. Cambodian	l. Laotian
c. Chinese	m. Portuguese
d. English	n. Spanish
e. French	o. Tagalong
f. German	p. Thai
g. Greek	q. Urdu
h. Gujarati	r. Vietnamese
i. Hindi	s. Other – specify _____
j. Japanese	
- 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 _____