



The information on this form must be collected on all newly registering students in Westmont Hilltop School District regardless of race, nationality, or language origin. Federal law requires that all Local Education Agencies (LEAs) utilize a non-biased procedure for identifying which students are potential English Learners (ELs) in order to provide appropriate language instruction education programs and services. Given this responsibility, all information must be collected from parents/guardians in order for schools to provide meaningful instruction for all students. Your cooperation in meeting this important requirement is appreciated.

Student Information (Parent/Guardians should complete this section):

Student: _____ Sex: M F
Last First Middle

Birthdate: _____ Grade Level: _____ School: _____

Please check your response to the following question:

IS THERE ANYONE IN YOUR HOME WHO SPEAKS ANY LANGUAGE or LANGUAGES OTHER THAN ENGLISH?

No (If no, just sign and return this form to the school office.)

Yes (Complete the form below)



Questions for Parents or Guardians: (If you checked YES to the question above)

1. Where was the student born?

United States
State: _____

Other Country: _____
A. Last grade completed in native country: _____
B. Date student entered the United States: _____

2. Circle all grades completed in U.S. Schools.

None Pre-K K 1 2 3 4 5 6 7 8 9 10 11 12

3. Date student entered Pennsylvania Schools: _____

4. Has the student ever received ESL (English as a Second Language) or ESOL (English for Speakers of Other Languages) services? Yes No Unsure

If yes: Dates: _____ School District: _____
State: _____

	ENGLISH	SPANISH	OTHER (SPECIFY)
5. What was the first language the student learned to speak?			
6. What language(s) does the student speak at home?			
7. What language is most often spoken to the student at home?			
8. What language(s) do other people speak at home?			
9. In which language would you like to receive written communication?			

If a language other than English is indicated, a family interview will be conducted. Students may require additional assessments.

Person completing this form: _____
(if other than parent/guardian)

X _____ X _____
Signature of Parent/Guardian Printed Name of Parent/Guardian Date

Interpreter Provided: Yes No