



JACKSON PUBLIC SCHOOLS  
MICHIGAN STATE BOARD OF EDUCATION  
APPROVED HOME LANGUAGE SURVEY



The Jackson Public Schools, *as required by Federal and State Laws*, is collecting information regarding the language background of each of its students. This information will be used by the district to determine the number of children who should be provided bilingual/second language instruction according to Sections 380.1152-380.1157 of the School Code of 1995, Michigan's Bilingual Education Law. Please provide the following information.

Full name of student \_\_\_\_\_ Gender \_\_\_\_\_ DOB \_\_\_\_\_

Country of Birth \_\_\_\_\_ Year of entry in US School \_\_\_\_\_

School Building \_\_\_\_\_ Grade \_\_\_\_\_

Teacher's Name (School Office Use Only) \_\_\_\_\_

- |   |                          |                          |
|---|--------------------------|--------------------------|
|   | Yes                      | No                       |
| 1. Is your child's native tongue a language <i>other</i> than English?<br>If <i>yes</i> , what is that language? _____  | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is the primary language <sup>1</sup> <i>used in your child's home or environment</i> a language other<br>than English?<br>If <i>yes</i> , what is that language? _____ | <input type="checkbox"/> | <input type="checkbox"/> |

<sup>1</sup>"Primary language" means the dominant language used by a person for communication.

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Signature of Parent/Guardian	Address	City	State	Zip
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Telephone where you can be reached	Date
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Thank you for your cooperation.

NOTE: Translation of this survey form in Spanish, Japanese, Chinese (Mandarin), Polish and Vietnamese is available at Jackson Public Schools' Reynolds Hall, 522 Wildwood Ave., Jackson, 49201. Please return this form to your school office.

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**SCHOOL OFFICE USE ONLY:** If the parent/guardian has checked YES for Question 1, this completed form must be faxed immediately to the attention of the ELL Coordinator at 768-5918. The original form is to be kept at the school in the student's CA-60 for audit purposes during the school year.

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It is the policy of the Jackson Public Schools District that no discriminatory practices based on sex, race, color, national origin, religion, height, weight, marital status, handicap, age, political affiliation, sexual orientation or disability or any other status covered by federal, state or local law be allowed in providing instructional opportunities, programs, services, job placement assistance, employment or in policies governing student conduct and attendance. Any person suspecting a discriminatory practice should contact the Human Resources Office at Jackson Public Schools, 522 Wildwood Avenue, Jackson, Michigan 49201 or call (517) 841-2153.