



Child's Name: _____ DOB: _____

Family Language Instrument

1) Which language(s) does your child hear at home?

This includes the language(s) spoken by parents, grandparents, siblings, extended family, or others living within or visiting the home.

2) Which language(s) does your child hear in their neighborhood and community?

For example, with friends and neighbors, at church, or at after school programs or activities. This is to demonstrate language exposure not to measure language proficiency.

3) Which language(s) does your child understand?

4) Which language(s) does your child speak?

Parent Signature _____ Date _____

If a child is a dual language learner, complete the following interview questions.