## **Infinity Charter School**

## Home Language Survey 2025-2026



Infinity Charter School requires the completion of the Home Language Survey in accordance with state and federal regulations which states: "The education of students whose dominant language is not English and who are English Language Learners (ELL) is the responsibility of every Local Education Agency (LEA). LEA's are required to provide a program for every student who is limited English proficient (LEP) or an ELL. The school district/charter school must administer a home language survey (HLS) to all students as required by the Office of Civil Rights (OCR). The results of that survey must be retained in the student's permanent folder." PA Department of Education Circular – July 1, 2001.

Student's Legal Name:				
Last Name		First Name	Middle Name	
Date of Birth:	Age:	Gender:	Current G	rade:
Parent/Guardian Name:				
Address:		City and Zip:		
Phone: Mobile:		Work:		
What is/was the student's first language?				
2. Does the student speak a language other than Eng	lish?	YES	NO	_
(This does not include languages learned in school	l.)			
If yes, specify the language(s):				
If yes, can the child read and write this lang	uage?	YES	NO	_
	to this language?	YES	NO	_
If yes, can the parent/guardian read and writ  3. What language(s) do you most frequently speak to				
3. What language(s) do you most frequently speak to If you answered NO to all the above questions, plea If you answered YES to any of the above questions	o your child?ase skip to the bott	om of the page, sign and vith question 5.	l date.	
3. What language(s) do you most frequently speak to If you answered NO to all the above questions, plea If you answered YES to any of the above questions	o your child?ase skip to the bott	om of the page, sign and vith question 5.	l date.	
3. What language(s) do you most frequently speak to  If you answered NO to all the above questions, plea  If you answered YES to any of the above questions  4. What language does your child most frequently speak to	o your child? ase skip to the bott , please continue v peak_at home?	om of the page, sign and with question 5.	l date.	
3. What language(s) do you most frequently speak to  If you answered NO to all the above questions, plea	o your child? ase skip to the bott , please continue v peak_at home?	om of the page, sign and with question 5.	l date.	
3. What language(s) do you most frequently speak to If you answered NO to all the above questions, plea If you answered YES to any of the above questions 4. What language does your child most frequently sy 5. Has the student attended any United States school	o your child? ase skip to the bott , please continue v peak_at home?	om of the page, sign and with question 5.	l date.	
3. What language(s) do you most frequently speak to If you answered NO to all the above questions, plea If you answered YES to any of the above questions 4. What language does your child most frequently sy 5. Has the student attended any United States school If yes, complete the following:	o your child? ase skip to the bott, , please continue v peak at home? I during his/her life  State	om of the page, sign and with question 5.  time? YES  Dates Attended	NO	Grade