

The University of the State of New York
The State Education Department
Office of Bilingual Education

Home Language Questionnaire (HLQ)

Dear Parent or Guardian:

In order to provide your child with the best possible education, we need to determine how well he or she understands, speaks, reads and writes English. Your assistance in answering these questions and returning this form to your child(ren)s school at your earliest convenience, is greatly appreciated.

District **Waterville Central School**
School **Memorial Park Elementary School**

Student Name	Grade	Country Born	Date of Birth

☒ boxes that apply

	English	Other (<i>specify</i>)
What language is spoken in student's home?		
What language is spoken most of the time to the student, in the home or residence?		
What language does the student understand?		
What language does the student speak?		
What language does the student read?		
What language does the student write?		

In your opinion, how well does the student understand, speak and write English?

	Very Well	Only a little	Not at all
Understands English			
Speaks English			
Reads English			
Writes English			

PRINT *Parent/Guardian Name*

Signature Parent/Guardian Name

Date