

OREGON SCHOOL DISTRICT

MULTI-CULTURAL STUDENT QUESTIONNAIRE

For Office Use ONLY:

Date _____
School _____
Grade Entering _____
Teacher/Counselor _____

(Please answer questions appropriate to student's grade level)

Student Name	Date of Birth	Country/Nationality/State	Date entered United States
Parent/Guardian	Address		Telephone

Student will be attending: PVE NKE BKE RCI OMS OHS Grade _____

1. English speaking person to be contacted in case of an emergency:

Name _____ Telephone _____

2. Language(s) spoken at home: _____ Country of Origin: _____

3. Years of Education: USA _____ Non-USA _____ How long in previous school? _____ Pre-school Yes No

4. Student CAN CAN NOT read in native language
 CAN CAN NOT read at grade level in native language

5. Student repeated a grade _____ (list grade(s) repeated)
 has never repeated a grade
 skipped a grade _____ (list grade(s) skipped)
 has never skipped a grade

6. When and where did student begin learning English? _____

7. At home student speaks _____ English is regularly spoken at home? Yes No
Father reads English? Yes No Mother reads English? Yes No
Father literate in first language? Yes No Mother literate in first language? Yes No
Father's first language _____ Mother's first language? _____

8. Parents/Guardians' Occupation _____

9. Name, address, and phone number of interpreter _____

10. Did student receive English language help (ESL services) at previous school? Yes No

11. Contact person at previous school _____ Telephone _____
Name of previous school _____ City, State _____
Country _____

Name of person filling this out _____

District Office: If parent/guardian has trouble filling this out, complete the information above the broken line and forward to Denise Anderson at PVE. Someone will contact the parent/guardian by telephone to complete this questionnaire.