

WHITE PINE COUNTY SCHOOL DISTRICT

Baker Elementary

David E. Norman Elementary

Today's Date _____

Lund Elementary

Early Childhood

Enrolled by _____

Lund Middle School

Lund High or *Lund Jr/Sr High School*

Name

McGill Elementary

White Pine Middle School

White Pine High School

Steptoe Valley High School

STUDENT'S NAME/NOMBRE DEL ESTUDIANTE	GENDER/GENERO	DOB/LA FECHA DEL NACIMIENTO	GRADE/GRADO
	M F		

Section A -	Check "English" or "Other" on the following questions. Verifique "Ingles" o "Otro" en las preguntas siguientes.					SPECIFY LANGUAGE ESPECIFIQUE EL IDIOMA
	1. What Language did your child learn first? <i>Que idioma aprendio su nino primero?</i>		ENGLISH <i>INGLES</i>		OTHER <i>OTRO</i>	
	2. What Language do the parents speak at home? <i>Que idioma hablan los padres/guardianes en casa?</i>		ENGLISH <i>INGLES</i>		OTHER <i>OTRO</i>	
	3. What Language does the student speak at home? <i>Que idioma habla el estudiante en casa?</i>		ENGLISH <i>INGLES</i>		OTHER <i>OTRO</i>	
	4. What Language does the student speak with friends? <i>Que idioma habla el estudiante con amigos?</i>		ENGLISH <i>INGLES</i>		OTHER <i>OTRO</i>	

Section B -	Was the student enrolled in any of the following programs? Estaba el estudiante previamente inscrito en alguno de los siguientes programas o servicios?				
	1. English Language Learner (ELL) <i>Aprendizaje del lenguaje ingles</i>		NO		YES <i>Si</i>
	2. Special Education <i>Educacion Especial</i>		NO		YES <i>Si</i>
	3. Section 504 <i>Seccion 504 o las Necesidades Especiales</i>		NO		YES <i>Si</i>
	4. Bilingual Instruction <i>Instruccion bilingue</i>		NO		YES <i>Si</i>
	5. Other <i>Orto</i>		NO		YES <i>Si</i>
Explain Other/ <i>Exlique Otro:</i>					

Section C -	New in Country Resident Nuevo en el Residente del Pais				
	1. Has the student been in the United States as a resident for three or less years? <i>El estudiante ha estado en los Estados Unidos como un residente para tres (3) anos o menos seguidos?</i>		NO		Yes <i>Si</i>
If YES, what date did you move to the United States? <i>SI SI, en que fecha se movio a los Estados Unidos?</i>			Date: Fecha:		

Parent's Signature: _____
 Firma de Padre: _____

Date _____

SCHOOL OFFICE USE ONLY

In Section A if any of the listed questions have been checked as "OTHER", send a copy of the survey to District Office.