

Bismehi-Ta'aalaa



Al-Hadi School of Accelerative Learning

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Home Language Survey

Staff members: All students registering at Al Hadi in 2021-22 must complete this form.

To Be Completed by Parent of Guardian:

Student Name: _____

Date of Birth: _____

Parent(s) or Guardian(s):

Please answer the questions below accurately and completely. This information is necessary to provide the most appropriate placement and instruction for your child and will not be used for any other purposes. Thank you for your cooperation.

1. What is the first language that this student speaks? _____
2. Is there a language other than English spoken in the home? Yes No
If yes, which language(s)? _____
3. Does the student speak a language other than English? Yes No
If yes, which language(s)? _____

In which language do you prefer to receive communication from the school? _____

Parent or Guardian Signature

Date

Print Name

