

JOHNSON CITY SCHOOLS
INITIAL ENTRY REGISTRATION CARD/HOME LANGUAGE SURVEY

IN COMPLIANCE WITH TITLE VI OF THE CIVIL RIGHTS ACT OF 1964
THIS FORM MUST BE FILLED COMPLETELY AND SIGNED AT THE TIME OF REGISTRATION

For Office Use: Power school # _____ State ID # _____ Entry Code _____ Entry Date _____
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THIS CARD MUST BE KEPT IN THE STUDENT'S PERMANENT RECORD AT ALL TIMES – DO NOT REMOVE-

Student's Legal Name: _____ / _____ / _____
(As appears on legal documents) Last Name First Name Middle Name

Date of Birth: ____ / ____ / ____

Social Security ____ / ____ / ____ (not required) **or** **[School Assigned ID** ____ / ____ / ____ (to be completed by school only)]

Check One:

Gender: Male Female

Ethnicity: Hispanic Non-Hispanic

Race: (Check ALL THAT APPLY) Asian Black American Indian Pacific Islander White

Child's Birthplace: City: _____ County: _____ State: _____ Country: _____

Mother's Maiden name: _____

Registering in Johnson City Schools for the first time: **Grade:** _____ **School Year:** _____.

Home Language Survey:

1. What is the first language your child learned to speak? _____
2. What language does your child speak most often outside of school? _____
3. What language do people usually speak in your home? _____
4. **Please describe the language understood by your Child (Circle only one)**
 - A. Understands only the home language and no English
 - B. Understands mostly the home language and some English
 - C. Understands the home language and English equally
 - D. Understands mostly English and some home language
 - E. Understands only English
5. Does the Parent Guardian need interpretation services? (to the maximum extent practicable) Yes No If YES, what Language? _____
6. Does the parent guardian need translated materials? (to the maximum extent practicable) Yes No If YES, what Language? _____
 - Please circle person needing it : Mother Father Guardian
7. Child's country of Birth? _____

[For Office Use: If other than USA, Is the student an Immigrant? Yes No If NO, reason _____.]
8. Date of entry into U.S. schools? (Year entering on grades K through 12) _____
9. Date of entry into Tennessee Schools? (Year entering on grades K through 12) _____

I certify all information on this form is true and correct.

Parent/Guardian signature: _____ **Date:** _____

STOP

Revised: 03/01/2022

If any of the questions on the Home Language Survey states a language different than English this part must be filled out by the ESL personnel.

Do not Complete - For School Use Only:

Interview with parents (if needed, according to the answer on question 4):

Language to be reported: _____ Code: _____
Immigrant: Yes No School Year: _____
Migrant: Yes No School Year: _____
English Language Screening tool: _____
Screening Date: _____ Screener _____
Results:
Listening _____ Speaking _____ Oral _____
Writing _____ Reading _____ Literacy _____
Overall _____
 ELL Level: _____ NELB

If qualifies for services, Date of Entry in ESL Program:

Transitional Period:

T1: School Year: _____ Grade: _____

T2: School Year: _____ Grade: _____

T3: School Year: _____ Grade: _____

T4: School Year: _____ Grade: _____

Exiting ESL Program: School Year _____ Grade: _____

Rescreening:

Reason: _____

Authorized by (relationship): _____

English Language Screening tool: _____

Screening Date: _____ Screener _____

Results:

Listening _____ Speaking _____ Oral _____

Writing _____ Reading _____ Literacy _____

Overall _____

ELL Level: _____ Will continue as Transitional.

Transitional Period:

T1: School Year: _____ Grade: _____

T2: School Year: _____ Grade: _____

T3: School Year: _____ Grade: _____

T4: School Year: _____ Grade: _____

Exiting ESL Program: School Year _____ Grade: _____