

St Vincent's Catholic Primary School LANGUAGES QUESTIONNAIRE

Name:	Date of entry into school:		Age:
	Class:		Teacher:
Child's Heritage Country/ies:			
Child's Ethnicity:			
Child's Nationality:			
Child's Country of Birth:			
Child's first language/s: Please give details of the language/s that your child heard/spoke first as well as their strongest language now if relevant.			
Languages / used by the following to the pupil:			
Father	Mother	Siblings	Grandparents/Other
Languages / used by the pupils to the following:			
Father	Mother	Siblings	Grandparents/Other
Level of Language Skills:			
Language/s understood	Language/s spoken	Language/s read	Language/s written
Prior Experiences:			
Please give information about the child's educational journey so far. Please include country/ies,			
language/s used and dates in each school/pre-school.			
Date:	Parent/Carer signature/s:	EAL Leader:	
Date.	Tarenty carer signature/s.	LAL Leduci.	
		Teacher signa	ature:
Any Other Relevant Information:			

Together through Christ we grow and learn