



Department of Education

INFORMATION ON CHILDREN FROM CULTURALLY & LINGUISTICALLY DIVERSE BACKGROUNDS LANGUAGE DEVELOPMENT CENTRE/SCHOOL PLACEMENT

* If the family identifies as Aboriginal or Torres Strait Islander and speak English or Aboriginal English as their primary language this form does not need to be completed.

CHILD'S NAME: _____ DATE OF BIRTH: _____

If available, please attach a copy of the Child Development Services EAL form (CHS344 04/24) or any other CALD questionnaire completed by a speech pathologist. An additional CALD form is attached []

Has an interpreter been used with this family? [] No [] Yes -> Please complete the following questions

Which language? _____ Who acted as interpreter? _____

Have any assessments been completed in the language/s other than English? [] No [] Yes Please provide details below

Child's country of origin: _____ Date of arrival in Australia: _____

Mother's country of origin: _____ Year of arrival in Australia: _____

Father's country of origin: _____ Year of arrival in Australia: _____

What languages has your child been exposed to? _____

What is the primary language spoken at home? _____

How old was your child when they were first exposed to English? _____

Please summarise your child's exposure to English (e.g. childcare, playgroup, school, home environment)

How old was your child when they said their first words in: a) your home language _____ b) English _____

Which language does your child speak best? _____

*** Please ask the child's primary caregiver the following questions regarding the child's *first* language.**

Do you think your child speaks their first language as well as other children in your home country?

Yes Mostly No

Are you satisfied with your child's ability to speak their first language? Yes No *(If no, please comment below)*

How well does the child's Mother speak English? No English A bit of English Fluent in English

How well does the child's Father speak English? No English A bit of English Fluent in English

If your child has siblings who are old enough to talk, please fill out the following information.

Sibling 1. Age _____

How well does Sibling1 speak English? No English A bit of English Fluent in English

How well does Sibling 1 speak the other language/s that are spoken at home? Not at all A little bit Fluent

Sibling 2. Age _____

How well does Sibling 2 speak English? No English A bit of English Fluent in English

How well does Sibling 2 speak the other language/s that are spoken at home? Not at all A little bit Fluent

Sibling 3. Age _____

How well does Sibling 3 speak English? No English A bit of English Fluent in English

How well does Sibling 3 speak the other language/s that are spoken at home? Not at all A little bit Fluent