

**UNIVERSITY OF ILLINOIS
UNIVERSITY LANGUAGE ACADEMY FOR CHILDREN**

FAMILY DATA FORM

All information on this form is kept confidential and is available only to the Director, Teachers, and Researchers at the University Language Academy for Children. When used for research purposes all names are removed. Codes rather than names are used to store and process information for research. Parental demographic information will not be used in any way to determine eligibility in placement of your child into our program.

****PLEASE COMPLETE BOTH PAGES**** Mail to Kathy Schilson, Department of Spanish, Italian and Portuguese, 4080 Foreign Languages Building, MC-176707 S. Mathews St. Urbana, IL, 61801

Date Form Completed	Date child <u>first</u> entered the ULAC (if returning)
Child's Name:	Any nickname?:
Date of Birth:	Place of Birth:

1.

	Language(s) spoken at home:		
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	Yes	No	
Does your child speak English?			
Does your child understand English			
Does your child speak another language?			which language?
Does your child understand another language?			which language?

Ethnic Background: *(Check One)*

	Asian/Pacific Islander
	American Indian/Alaskan Native
	Black
	Hispanic
	Multiracial/Ethnic
	White

2.

	(Optional) Family's Religion(s):
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3.

Was your child adopted?:	Age of adoption:	Does he/she know?
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4.

Marital status of parents/guardians: *(Check One)*

	Single
	Married Separated
	Divorced
	Widowed
	Partners

	If separated or divorced, who is the custodial parent/guardian?
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5. **PERSONS LIVING IN THE HOME:** Please list all people living in the child's home including parents, child, siblings, grandparents, other relatives and friends.

First name	Relationship to Child	Gender	Birthdate

6.

	Does your child have a disability?
	Does your child receive services from any other agency?
	If yes, which one(s)

(Over)

7. PARENT /GUARDIAN INFORMATION: (Please check the appropriate box in the shaded columns)

✓	Parent 1	Gender	✓	Parent 2
	Male			Male
	Female			Female
		Age		
	20-25			20-25
	26-30			26-30
	31-35			31-35
	36-40			36-40
	41-45			41-45
	46 or over			46 or over
Years of School Completed				
	0-8			0-8
	9			9
	10			10
	11			11
	12			12
	13			13
	14			14
	15			15
	16			16
	17			17
	18			18
	19			19
	20			20
Degree Received (check all that apply)				
	High School/GED			High School/GED
	Associate			Associate
	Technical			Technical
	Bachelor			Bachelor
	MA/MS			MA/MS
	MSW			MSW
	Ph.D.			Ph.D.
	MD			MD
	JD			JD
		Occupation – give title and a brief description		
Employment Hours outside of the home per week				
	0 Hours			0 Hours
	1-20 Hours			1-20 Hours
	21-40 Hours			21-40 Hours
	Over 40 Hours			Over 40 Hours
		Birthplace		
Ethnic Background				
	Place of birth? _____			Place of birth? _____
	Native language? _____			Native language? _____
	Asian/Pacific Islander			Asian/Pacific Islander
	American Indian/Alaskan Native			American Indian/Alaskan Native
	Black			Black
	Hispanic			Hispanic
	Multiracial/Ethnic			Multiracial/Ethnic
	White			White
		Are you affiliated with the University? If so how?		

8. COMBINED FAMILY INCOME (yearly- Please Check One)

	less than \$15,000		\$35,000 - \$45,000		\$75,000 - \$100,000
	\$15,000 - \$25,000		\$45,000 - \$55,000		over \$100,000
	\$25,000 - \$35,000		\$55,000 - \$75,000		