Parent Survey

Dear Parent or Guardian: We are in the process of conducting an evaluation of our parental involvement program, and we would like to know what you think. Please take a few minutes to complete this survey. The responses will be used to improve next year's parental involvement program. If you have questions about the survey or need assistance completing it, please contact Chuck Walker 334 - 774 - 23551. Do you feel welcome in your child's school? Yes No 2. Does your school encourage you to be involved in your child's education? Yes No Do you know your school's academic goals and how you can be involved? Yes No 4. Did you participate in any of the following activities offered this year? ____ Parent Advisory Committees/Councils ____ Annual Meeting of Title I Parents ____ Title I Program Planning/Evaluation ____ Explanation of State Standards/Curriculum _____ Development of Parent Involvement Plan ____ Family Reading/Math Nights ____ Observing/Volunteering in the Classroom Development of School-Parent Compact ____ Parent-teacher Conferences ____ Explanation AYP, School Improvement List any additional activities that you would like to see offered: 5. Do you know about volunteer work you can do at school? Yes No Do you know how you can be involved in school planning/review committees? Yes No 7. Do you know what it means to be a Title I School and what your rights are? Yes No 8. Do you know how additional help with reading and/or mathematics is given to students through the Title I program? ___Yes No 9. Do you know what your child should know and be able to do in reading and/or mathematics for the grade he/she is in? (Academic Content Standards) Yes No 10. Do you understand your child's report cards and test scores? ___Yes _No 11. Does the Title I School-Parent Compact help to remind you about things you can do to help your child do better in school? Yes No 12. Title I, of the Every Student Succeeds Act of 2015, asks that priority be given to extra help beyond the regular school day. If free instruction and transportation are provided, would you want your child to attend Title I services after school, before school, weekend school, or summer school? Comments:

13.	Do you have internet access in your home?	Yes	No
14.	What is the best way for the school to share information about your child and scTelephonee-MailWritten NoticesAudio/Video		?
	Other (Specify):		
15.	Can you reach your child's classroom teacher(s) to discuss your child?	Yes	No
16.	Do you feel that teachers in the school are interested and cooperative when you discuss your child's academic progress and/or other concerns?	Yes	No
17.	Check any of the following items that would help you attend Title I Activities: Evening Meetings Suggested Time: Transportation Provided Child Care Provided Calendar of Events Sent Home Regularly Reminders Sent Home One Week Before Event Different Location Than the School Suggested Location: Other Specify:		
18.	Did you receive a copy of the following three documents this year:		
	• The District's Parental Involvement Plan	Yes	No
	Your School's Parental Involvement Plan	Yes	No
	The School-Parent Compact	Yes	No
9.	Do you know about the school's extra services (for example, counseling, and speech therapy)?	Yes	No
20.	Do you know about the school's referral program to community services outside of the school? (Such services may be adult literacy programs, social services, health services, GED, adult career development, etc.)	Yes	No
21.	Do you have comments/concerns about the Title I Program or the Parental Involvour school?	_	am in
	e following data requested is for statistical purposes only: des of children:	5 11	_6 _12
Rac	e/Ethnicity (Select all applicable):American Indian or Alaska NativeAsian	African Amer	ican
	Native Hawaiian or Pacific IslanderHispanic or Latino	White	
[s y	our child eligible for the free or reduced-price lunch program?	Yes	No