Parent and Family Engagement Survey

Our school system is working to strengthen partnerships between schools and families in order to help children perform better in school. In order to continue to do so, we need to collect information regarding the involvement of parents in the schools their children attend. The purpose of this survey is to get your opinion on how well schools have met your families’ and child's needs and how you feel about the school’s parental involvement activities. There are no right or wrong answers. We are only interested in your opinions. The findings of the survey will be summarized and used to make improvements.

**DIRECTIONS: Please check the selection that most closely matches your answer for each item. The last page provides room for written comments.**

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_

Number of Children: \_\_\_\_\_\_

Grade level(s): Pre–K – K – 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10 – 11 – 12 ***[Circle all that apply.]***

Language(s) Spoken at Home: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# F. COMMUNITY COLLABORATION

1. Does the school participate in events planned by members of the ethnic community?

Yes  No  Do not know

2. Does the district or school provide any of the following support programs for families of diverse educational and linguistic backgrounds?

***Respond to the information topics below by using the indicators to the right.***

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Don’t Know** |
| **Family literacy programs** |  |  |  |
| **English–as–a–second–language programs** |  |  |  |
| **G.E.D. programs** |  |  |  |
| **Computer training programs** |  |  |  |

3. In which of these support programs have you participated? ***[Respond to the information topics below by using the indicators to the right.]***

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Don’t Know** |
| **Family literacy programs** |  |  |  |
| **English–as–a–second–language programs** |  |  |  |
| **G.E.D. programs** |  |  |  |
| **Computer training programs** |  |  |  |

4. What kind of support programs would you like the district or school to offer to you and your family?

Family literacy programs

GED programs

English–as–a–second language programs

Computer training programs

Other programs: (1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. What is your opinion about the following statements? ***[Respond to the information topics below by using the indicators to the right.]***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Strongly Agree** | **Agree** | **Disagree** | **Strongly Disagree** |
| **The district or school provides information about community organizations that support my child's learning.** |  |  |  |  |
| **The district or school participates in community events organized by diverse ethnic groups.** |  |  |  |  |
| **The parent liaison assists parents and communities to become more involved in the school.** |  |  |  |  |

6. What best describes your education level?

Informal education

Elementary school

High school

Trade school/community college degree

College degree

Master's/doctorate degree

7 What best describes your household?

Two parents or guardians, both working outside the home

Two parents or guardians, one working outside the home

Two parents or guardians, none working outside the home

One parent or guardian, working outside the home

One parent or guardian not working outside the home

Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8. Do any other relatives ***[or other persons]*** live in your home? Please specify.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9. Other comments or suggestions on how the school can create better connections with families:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**THANK YOU FOR YOUR COOPERATION IN COMPLETING THIS SURVEY.**