



## Middle School Title I Parent Involvement Survey Template

*This template is one of four different surveys developed by the 2013 State Superintendent's Parent Advisory Council with assistance from the Georgia Department of Education's (GaDOE) Parent Engagement Program. Local educational agencies (LEAs) and schools may use this template to guide them in meeting the compliance requirements of Section 1118(a)(2)(E). Each sample survey provided by the GaDOE may contain questions that are more or less suitable to address the needs of different LEAs and/or schools; therefore, it is highly encouraged that LEAs and schools review all surveys and select the best questions to guide the development of a survey that is suited to individual objectives and needs.*

Dear Parents/Guardians,

As partners in your child's education, your input is valued. Please take a few minutes to respond to this brief parent survey. This information will be used to help evaluate and strengthen parental involvement within our school. All surveys may be returned to (faculty/staff member) in the (location), mailed to (school name and address), or completed online at (website).

### School Environment

1. How welcome does the school staff at your child's school make you feel?

Not at all       Minimally       Quite a bit       A tremendous amount

2. How often do you participate in school events because your child encourages you to be involved?

Not at all       Minimally       Quite a bit       A tremendous amount

3. In the past year, how often have you visited your child's school?

Never       Once or twice       Every few months       Monthly       Weekly or more

4. In the past year, how often did you participate in a parental involvement activity, event, or program at your child's school?

Never       Once or twice       Every few months       Monthly       Weekly or more

5. In the past year, how often have you talked with the school about how they can help your child learn?

Never       Once or twice       Every few months       Monthly       Weekly or more

6. Please check any of the following that would help you participate more often in school functions, activities, and planning events?

Transportation provided       Child care provided  
 Event/Meeting reminders one week before the event       Meetings/Activities offered more than once  
 Meetings/Activities offered at various times       Other (Please describe): \_\_\_\_\_  
 Meetings/Activities held in community locations other than the school

7. When is the best time for you to attend a school event for parents?

Before school (M-f)       Evenings (M-F)  
 During school, before lunch (M-F)       Saturday  
 During school, after lunch (M-F)       Preferred day/time (please indicate): \_\_\_\_\_



8. Overall, how much do you feel your child's school values parent input?

- Not at all     
  Minimally     
  Quite a bit     
  A tremendous amount

Communication

9. Do you know with whom to communicate at your child's school when you have a question or concern?

- Not at all     
  Minimally     
  Quite a bit     
  A tremendous amount

10. How often does your child's school provide you with information about ways to be involved in the education of my child?

- Not at all     
  Minimal     
  Quite a bit     
  A tremendous amount

11. How often have you had opportunities to visit with your child's teachers to discuss your child's progress throughout the school year?

- Not at all     
  Minimal     
  Quite a bit     
  A tremendous amount

12. In the past year, how often did you communicate with teachers at your child's school?

- Never     
  Once or twice     
  Every few months     
  Monthly     
  Weekly or more

13. In your opinion, how effective are the following when it comes to the school communicating with you or your family?

	Not Effective	Effective	Very Effective
Parent meetings (open house, curriculum night, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent/Teacher Conferences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Newsletters (link on schools website)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Automated calls from the school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Email	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flyers sent home with your child	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. What are the best ways for you to provide input regarding your child's school? (Please check all that apply)

- Attend meetings     
  Complete survey online  
 Phone call     
  Complete and return a paper survey  
 Email     
  Send a note to the school

15. Do you have difficulties with any of the following?

	Yes	No
Understanding school policies	<input type="checkbox"/>	<input type="checkbox"/>
Accessing the school web page	<input type="checkbox"/>	<input type="checkbox"/>
Accessing the Parent Portal (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>

If yes, please provide specifics: \_\_\_\_\_



16. How many times per month do you access the school website? \_\_ 0-5 \_\_ 6-10 \_\_ 10 or more

Student Achievement

17. How clear is your understanding of the programs and courses that are offered for your child?

Not at all       Minimal       Quite a bit       A tremendous amount

18. I am informed as to how my child is doing academically in school.

Not at all       Minimally       Quite a bit       A tremendous amount

19. In the past year, how often have you talked with the school about ways that you can help your child's learning at home?

Never       Once or twice       Every few months       Monthly       Weekly or more

20. How many times per month do you access your child's grades online? \_\_ 0-5 \_\_ 6-10 \_\_ 10 or more

21. How many times per month do you initiate the use of interactive study tools with your child?

(Flash cards, online resources, etc.) \_\_ 0-5 \_\_ 6-10 \_\_ 10 or more

22. How confident are you in your ability to support your child's learning at home?

Not at all       Minimally       Quite a bit       A tremendous amount

23. Workshops and events may be offered at the school based on the needs and interests of our parents. Please review the following list of potential workshop topics and rank them in the order of what interests you the most. (1 = Most Interested, 8 = Least Interested)

<input type="checkbox"/> Homework help workshop	<input type="checkbox"/> Math-Science Night
<input type="checkbox"/> Organization and study skills workshop	<input type="checkbox"/> Reading Night
<input type="checkbox"/> Understanding the CRCT workshop	<input type="checkbox"/> Social Studies Night
<input type="checkbox"/> CCGPS: Understanding what my child is learning in school	<input type="checkbox"/> Understanding career pathways

24. What types of training or programs to improve student academic achievement would you be likely to participate in if they were offered by the school? Please check all that apply.

<input type="checkbox"/> Educational parent workshops or classes	<input type="checkbox"/> Lunch n learn sessions
<input type="checkbox"/> Parent meetings or presentations	<input type="checkbox"/> Online parent classes or webinar presentations
<input type="checkbox"/> School decision making committees or councils	<input type="checkbox"/> Family fun learning nights
<input type="checkbox"/> Volunteering	<input type="checkbox"/> Mentoring

Advocacy

25. How confident are you in your ability to help your child make choices about programs and courses he/she needs to take?

Not at all       Minimally       Quite a bit       A tremendous amount

26. In the past year, how often have you given advice to the school?

Never       Once or twice       Every few months       Monthly       Weekly or more



**27. Did you participate in any of the following decision-making opportunities requiring parental input and partnership? (Check all that apply)**

- Title I Program planning and evaluation  Development of school parent involvement plan  
 Development of school-parent compact  Development of flexible learning program  
 Parent advisory committees/councils  Parent-Teacher conferences

If so, which did you find most meaningful and enjoyable to be a part of?

\_\_\_\_\_

If you did not participate in any, why not? \_\_\_\_\_

Would you be interested in participating in the future? \_\_\_\_\_

**28. How well do you feel that the school's parent involvement policy and plan provides opportunities for effective involvement of parents to support student academic achievement?**

- |                          |                          |                              |                             |                          |
|--------------------------|--------------------------|------------------------------|-----------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>     | <input type="checkbox"/>    | <input type="checkbox"/> |
| Not well at all          | Mildly well              | Fairly well                  | Quite well                  | Extremely well           |
|                          | - <b>At home?</b>        | <input type="checkbox"/> Yes | <input type="checkbox"/> No |                          |
|                          | - <b>At school?</b>      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |                          |

**29. Our school is required to set aside a percentage of the Title I money we receive for parental involvement activities to actively engage parents in the academic achievement of their children. In the past, money has been spent to provide the school with a Parent Involvement Coordinator position and to fund the Parent Resource Center. What are your suggestions for how Title I parental involvement money should be spent?**

\_\_\_\_\_

\_\_\_\_\_

**30. What support do you need from the school to ensure your child moves from one grade to the next?**

\_\_\_\_\_

\_\_\_\_\_

**31. How can our school improve on actively involving parents and community members in the activities of our school to increase student academic achievement?**

\_\_\_\_\_

\_\_\_\_\_

**32. Please list any possible community organizations and/or businesses that you feel would be ideal school partners:**

\_\_\_\_\_

**33. What grade is your child in? \_\_\_\_\_**

**34. What is the primary language spoken in your home? \_\_\_\_\_**

**35. What is your relationship to your child? \_\_\_\_\_**

**Thank you for taking the time to complete this very important survey. Your feedback is greatly valued and sincerely appreciated.**