PARENT/FAMILY INVOLVEMENT/INTEREST SURVEY

The PTA needs your help to plan parent/family involvement programs at our school. Parent/family involvement is fun, informative and, most important of all, helps our children perform better in school.

Please take a few minutes to fill out this survey and return it to: ____________________________

1. Where do you get most of your information about school? (Circle all that apply.)
   - Newsletter
   - Friends
   - Children
   - Newspaper
   - Teachers
   - Television
   - Principal
   - School Bulletin Board
   - Other ____________________________

2. Would you be interested in attending a class or session on important parenting issues?
   - Yes
   - No

3. Please indicate below the type of workshops you would like to participate in to help you help your children learn:
   - Helping with homework
   - Improving reading skills
   - Testing programs and what they mean
   - English as a second language
   - Improving your child's self-image
   - Building parenting skills (“Profession Parent”)
   - Helping your child explore career choices
   - Preventing drug abuse: Street and Prescription
   - Preventing alcohol abuse (“Party 101: Consequences to Underage Drinking”)
   - Discussing AIDS, STDs and steps to protect your child
   - Promoting safety at school
   - Special needs: ADHD, Dyslexia, Learning Disabilities
   - Healthy Kids (“Food and Fitness Matter”)
   - Bullying (“Stop Bullying Now!”)
   - “40 Developmental Assets”
   - Gang Awareness and prevention
   - How to Help Your Child Succeed in School
   - “Road Rules- What Every Parent Should Know”
   - Internet Safety (“NetSmartz”)
   - Family Art, Science or Math night
   - Financial Fitness for Life
   - Other ____________________________

4. Where would you like these parenting programs to be held?
   - In the school
   - In the home of a parent in your neighborhood or area
   - Would you be willing to host such a session?
     - Yes
     - No
   - Local restaurant or business
   - Other ____________________________

5. When would you like to have these meetings?
   - On a weekday evening
   - Lunch Hour
   - In the early morning before school starts
   - Sometime during a weekday
     - Morning
     - Afternoon
   - On a Saturday
     - Morning
     - Afternoon
   - On a Sunday
     - Morning
     - Afternoon
   - Best time: Morning Afternoon Evening

6. Would you be interested in participating in a small group discussion hour at the school?
   - Yes
   - No

7. I feel I can talk openly with my child's teacher.
   - Yes
   - No
   - To some degree

8. How effective are the following in improving communication with your child's teacher and the school?
   - Open houses
   - Grade-level orientation sessions
   - Teacher-Parent conferences
   - PTA meetings

9. As a parent, do you have trouble with any of the following?
   - Your child's homework
     - Yes
     - No
   - Discipline
     - Yes
     - No
   - Spending enough time with your child
     - Yes
     - No
   - Dealing with your child's problems
     - Yes
     - No
   - Motivating your child
     - Yes
     - No

10. Would you be willing to volunteer in the following ways?
    - Clerical or administrative duties for school or PTA
    - Helping in your child's classroom (e.g. reading aloud, working with individual students)
    - Organizing PTA or school events (e.g., open house, holiday program, cultural arts fair)
    - Participating on an advisory committee (on curriculum and textbooks, school issues, school safety)
    - Participating in school-based management
    - Other ____________________________

11. Check the kinds of resources and services you would like to see made available at the school.
    - Homework help
    - After-school child care
    - Parenting support
    - Family use of school facilities
    - Other ____________________________

12. Please indicate hobbies and work experience that you could share with the students, school or parent group:

13. Parent and community involvement at school could be strengthened in the following ways:

Optional: Name ____________________________
Best time to contact ____________________________ Phone ____________________________
Email ____________________________