

Name of Agency: _____
Site/Program: _____
Date: _____

Desired Results for Children and Families – Parent Survey

This survey requests your feedback about your child's program. Your responses are confidential and will help improve the services provided to you. If you have more than one child who attends this program, you can fill out this survey for each child or respond once by answering the questions about your youngest child in the program.

Part 1. Rate to what extent you agree with the following statements about your experience of your child's program:

1. The program clearly explained the process for enrolling my child in the program.

_____ Strongly Agree
_____ Somewhat Agree
_____ Somewhat Disagree
_____ Strongly Disagree
_____ Unsure

2. The program clearly explained all their safety policies and procedures regarding illness, medication, emergencies, etc.

_____ Strongly Agree
_____ Somewhat Agree
_____ Somewhat Disagree
_____ Strongly Disagree
_____ Unsure

3. The program shares information on the curriculum and learning activities with me.

- ☐ Strongly Agree
- ☐ Somewhat Agree
- ☐ Somewhat Disagree
- ☐ Strongly Disagree
- ☐ Unsure

4. The program gives updates on the daily experiences of my child as appropriate (for example, if my child was injured, what they ate, napping, toileting, etc.).

- ☐ Strongly Agree
- ☐ Somewhat Agree
- ☐ Somewhat Disagree
- ☐ Strongly Disagree
- ☐ Unsure

5. The program explains my child's ongoing development to me through progress reports, parent conferences, and informal conversations.

- ☐ Strongly Agree
- ☐ Somewhat Agree
- ☐ Somewhat Disagree
- ☐ Strongly Disagree
- ☐ Unsure

6. The program provides me with resources and suggestions for how I can support my child's learning and development at home.

- ☐ Strongly Agree
- ☐ Somewhat Agree
- ☐ Somewhat Disagree
- ☐ Strongly Disagree
- ☐ Unsure

7. When needed, the program helps me get referrals to social and/or health services in my community, such as an assessment to diagnose a disability, provide behavioral supports, or other referrals.

☐ Strongly Agree
☐ Somewhat Agree
☐ Somewhat Disagree
☐ Strongly Disagree
☐ Does Not Apply to Me

8. The program communicates with me in my home language, including translating materials (if I speak a language other than English).

☐ Strongly Agree
☐ Somewhat Agree
☐ Somewhat Disagree
☐ Strongly Disagree
☐ Does Not Apply to Me

9. The program engages with my family to ensure learning experiences, books, and materials reflect my child's race, home language, and cultural background.

☐ Strongly Agree
☐ Somewhat Agree
☐ Somewhat Disagree
☐ Strongly Disagree
☐ Unsure

10. The program encourages me to engage in family events, parent committees, opportunities to volunteer, and other family engagement opportunities.

☐ Strongly Agree
☐ Somewhat Agree
☐ Somewhat Disagree

☐ Strongly Disagree
☐ Unsure

11. The program makes me feel welcome and treats me like a valued partner in my child's learning.

☐ Strongly Agree
☐ Somewhat Agree
☐ Somewhat Disagree
☐ Strongly Disagree
☐ Unsure

12. I receive answers and resolutions from the program in a timely manner when I have questions or concerns.

☐ Strongly Agree
☐ Somewhat Agree
☐ Somewhat Disagree
☐ Strongly Disagree
☐ Unsure

13. The program provides healthy meals and snacks that reflect my child's culture.

☐ Strongly Agree
☐ Somewhat Agree
☐ Somewhat Disagree
☐ Strongly Disagree
☐ Unsure

14. The program supports my child in learning healthy habits, such as handwashing and personal hygiene.

☐ Strongly Agree
☐ Somewhat Agree
☐ Somewhat Disagree
☐ Strongly Disagree

____ Unsure

- 15.** The program provides developmentally appropriate learning activities that help my child's individual school readiness skills, such as math and literacy.

____ Strongly Agree
____ Somewhat Agree
____ Somewhat Disagree
____ Strongly Disagree
____ Unsure

- 16.** The program provides my child with support in their social and emotional skills, such as how to play with friends and process emotions.

____ Strongly Agree
____ Somewhat Agree
____ Somewhat Disagree
____ Strongly Disagree
____ Unsure

- 17.** The program provides a balance of indoor and outdoor movement activities to support my child's individual physical development.

____ Strongly Agree
____ Somewhat Agree
____ Somewhat Disagree
____ Strongly Disagree
____ Unsure

- 18.** The program supports my child's home language skills as well as English.

____ Strongly Agree
____ Somewhat Agree

- ☐ Somewhat Disagree
- ☐ Strongly Disagree
- ☐ Does Not Apply to Me

19. The program provided me with information on their current suspension and expulsion policies and procedures.

- ☐ Strongly Agree
- ☐ Somewhat Agree
- ☐ Somewhat Disagree
- ☐ Strongly Disagree
- ☐ Unsure

20. The program provides me with information on local elementary schools when my child is ready for kindergarten.

- ☐ Strongly Agree
- ☐ Somewhat Agree
- ☐ Somewhat Disagree
- ☐ Strongly Disagree
- ☐ Does Not Apply to Me

21. Has your child's participation in the program helped you get a job, keep your job, or attend school?

- ☐ Yes
- ☐ No
- ☐ Does Not Apply to Me

Please answer questions 22 and 23 if your child has an identified disability with an IFSP or IEP:

22. My child is included in activities with other children in the program.

- ☐ Strongly Agree
- ☐ Somewhat Agree

- ☐ Somewhat Disagree
- ☐ Strongly Disagree
- ☐ Prefer Not to Answer

23. The program effectively meets my child's individual needs aligned to their IFSP or IEP goals.

- ☐ Strongly Agree
- ☐ Somewhat Agree
- ☐ Somewhat Disagree
- ☐ Strongly Disagree
- ☐ Prefer Not to Answer

Part 2. Please write a response to the following questions:

1. What is one thing you love most about the program?

2. What is one thing you would like to see improved about the program?
