



## Lucerne Elementary School District Title I / Parent Survey 2016-2017

Please complete this survey and return it to the school. Your input is helpful in designing a Title I program that best meets the needs of all students involved. Thank You.

Directions: Please rate the following statements by filling in the circle after each statement. Please fill in all fields.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable
1. Did you feel that you were welcome to be involved in the Title I school programs?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Do you feel the School-Parent compact is relevant to the collaboration of parents and staff?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Did you attend Back to School night and/or parent conferences?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. If yes, (to question 3), did you feel your input was expected and appreciated?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Did the Title I parent involvement information accurately reflect your understanding of Title I practices at our school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Did you feel you were informed in a timely manner on your child's academic progress?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Did you utilize any of the material sent home to you by the school to promote working at home with students?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Did you feel welcome at the school and whenever you communicated with staff?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. Was your child's teacher easy to contact when you had a question or problem, and did you feel your concern was taken seriously?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. Would you like more opportunity for parent involvement in the school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. I would be willing to help organize parent involvement activities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<b>Contact Info-</b>					

Please list any suggestions that you may have for Title I.