**Preschool Program Family Survey Summary Sheet**

**Instructions:** Record the number of parent or family members who responded to each survey question by their response. Then review the comments, if any, for each area and note any common themes that are apparent.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Total Families Enrolled \_\_\_\_\_\_ Number Responding \_\_\_\_\_** | | | | | |
| **RELATIONSHIPS** | **YES** | **YES, BUT** | **NO** | **NO, BUT** | **Don’t Know** |
| 1. I feel that I have regular contact and communication with my child’s teacher and that we value and use each other’s input about the care of my child. (1.1) |  |  |  |  |  |
| **TOTAL YES** |  |  | | | |
| Comments/themes: | | | | | |
| **CURRICULUM** | | | | | |
| 1. The program staff use information about my family background and beliefs to make my child’s learning experiences more meaningful. (2.2) |  |  |  |  |  |
| 2. The program takes into account my child’s home language when working on literacy and provides my child opportunities to learn in a language they are comfortable with. (3.14) |  |  |  |  |  |
| **TOTAL YES** |  |  | | | |
| Comments/themes: | | | | | |
| **HEALTH** | | | | | |
| 1. Program staff let me know when there are contagious diseases in the program. (5.3) |  |  |  |  |  |
| 2. *For families who send food to school only:* I am aware of the nutritional requirements for sending food along with my child to school. (5.10) |  |  |  |  |  |
| 3. *For families with infants or children with special nutritional needs:* I receive specific documentation about what my child ate at school. (5.12) |  |  |  |  |  |
| 4. *For families with children with allergies or special nutritional needs only:* Program staff is aware of my child’s special health needs and carefully provides for them. (5.13) |  |  |  |  |  |
| **TOTAL YES** |  |  | | | |
| Comments/themes: | | | | | |
| **FAMILIES** | | | | | |
| 1. I am provided with information about the following: |  | | | | |
| a. the program philosophy and goals |  |  |  |  |  |
| b. program rules and expectations |  |  |  |  |  |
| c. program events |  |  |  |  |  |
| d. community activities |  |  |  |  |  |
| e. available community support |  |  |  |  |  |
| f. child assessment plans (7.2, 7.3, 7.6) |  |  |  |  |  |
| 2. I am provided written materials (including this survey) in a language I understand. (7.2) |  |  |  |  |  |
| 3. The program has the resources and ability to help me obtain the services I need for my child and family. (7.6) |  |  |  |  |  |
| 4. Program staff and I informally share information about my child on at least a weekly basis. (7.4) |  |  |  |  |  |
| 5. The program staff helps me know about and use community resources. (8.1) |  |  |  |  |  |
| 6. I am aware of many opportunities to volunteer at my child’s program. (7.2) |  |  |  |  |  |
| **TOTAL YES** |  |  | | | |
| Comments/themes: | | | | | |
| **LEADERSHIP AND MANAGEMENT** | | | | | |
| 1. I am familiar with the program’s procedures for dropping off and picking up my child. Program staff and I use this time to communicate about my child. (10.9) |  |  |  |  |  |
| 2. I feel like I have a voice in planning for program improvement. (10.15) |  |  |  |  |  |
| **TOTAL YES** |  |  | | | |
| Comments: | | | | | |