

July 28, 2014

**Mellen School District Title 1 Parent Involvement Survey**

Dear Parent/Guardian,

Mellen School is a Title 1 school, and as the parent/guardian of a child attending a Title 1 school you are an important part of the Title 1 team. Your input is vital in the planning and implementation of the parent involvement program and activities in our school. The focus of all Title 1 programs is to help eligible students meet the same high academic achievement standards expected of all children, regardless of their socioeconomic status and background. The following survey is confidential and will be used to assist us with future planning for parental involvement activities for 2014-2015 at Mellen School. We appreciate your feedback and thank you for taking the time to complete this survey.

**All surveys may be returned to *Deb Meierotto* in the front office (blue/white box) or mailed to Mellen School District, Post Office Box 500, Mellen, WI 54546. The survey is also available on-line at our website [www.mellendiggers.org](http://www.mellendiggers.org) under the Parent/Student Access Tab at the top of the page.**

**School Planning**

1. Do you feel your child's school provided parents with opportunities to give feedback and suggestions regarding parental involvement programs and activities?

Yes                                       No                                       Unsure

2. Did you attend a meeting for this upcoming school year where the goals and activities of the Title 1 program were discussed with parents?

Yes                                       No                                       Unsure

3. In what capacity would you like the Title 1 Parental Involvement funds used at your child's school? (check all that apply)

Parent workshops                                       Parent Resource Center

Technology Resources                                       Parenting Classes

Educational materials for parent use

Other (explain) \_\_\_\_\_

4. How can we improve the way we involve parents in school planning?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. During the past school year, did you participate in the development and revision of the following?

	Yes	No	I was not informed	Not sure
Parental Involvement Plan				
School-Parent Compact				
School Improvement Plan				
Use of Parental Involvement funds				
Title 1 Program Services				

**School-Home Communication**

6. In what manner would you prefer to receive information from our school? (check all that apply)

- Letters/flyer(sent home with students)       E-mail  
 Website       Phone Call(out-dials)  
 Text Message       Social Media  
 Other (explain) \_\_\_\_\_

7. Do you know how to contact your child’s teacher?

- Yes       No

8. What can we do to improve communication between home and school?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Helping your Child with School**

9. What type of informational programs would you like the school to provide for parents?

- Reading Strategies       Writing       Technology  
 Math       Homework Help  
 Other(explain) \_\_\_\_\_

10. During the past school year, how many parent meetings or events did you attend to help you assist your child at home?

None                       One or Two                       Three to Four

11. In what ways can the school help you work with your child to do better in school?

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### **Parent Participation**

8. Do you feel our school provides a welcoming environment for parents?

Yes                       No

9. In what ways can we help you feel more welcome at our school?

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10. What would enable you to participate in parent meetings, workshops, and activities? (check all that apply)

Childcare Assistance                       Transportation Assistance

Morning Meetings (8:15 am – 11:00 pm)

Evening Meetings (6:00 pm – 7:30 pm)

Access to information online

Other (explain) \_\_\_\_\_

11. Please list any hobbies, talents, interests, or work experiences that you could share with the parents, staff or students at our school.

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Please provide your contact information if you would like for the school to follow up with you about any feedback provided or ways to get you more involved in the school as indicated on the survey. (Optional)

Parent/Guardian Name: \_\_\_\_\_

Email address \_\_\_\_\_ Phone Number \_\_\_\_\_

Address: \_\_\_\_\_

Child's Name: \_\_\_\_\_

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