



**CRISPUS ATTUCKS CHARTER SCHOOL**

**End of Year TITLE I and Other Program Requirements PARENT SURVEY 17-18**

Documents referred to in the survey can be found on the school website at:

<http://crispusattucks.org/what-we-do/crispus-attucks-charter-school/>

(Please circle the response that you believe to be most accurate)

1. Crispus Attucks Charter School has a welcoming environment for student and parents.

Always      Most of the Time      Sometimes      Never

2. Crispus Attucks Charter School keeps me informed about my student's progress.

Always      Most of the Time      Sometimes      Never

3. Crispus Attucks Charter School is a good school for my student.

Always      Most of the Time      Sometimes      Never

4. I am comfortable contacting the school if I have any questions or concerns.

Always      Most of the Time      Sometimes      Never

5. The Crispus Attucks Charter School Parent Involvement Policy does it job.

Yes    No    If you circled "No", how should it be changed?

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6. The Crispus Attucks Charter School Compact does it job.

Yes    No    If you circled "No", how should it be changed?

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(Check all that apply)

7. What training do you believe our teachers need to promote student achievement?

reading and math instruction support in all curricular areas

instruction support for students with special and/or different needs

literacy development in writing, reading, speaking and reading

other: \_\_\_\_\_

8. What type of training/programs would you like for the school to provide for parents?

Parenting skills     ESL classes     GED classes     Nutrition

Health awareness/issues     Computer classes     Homework skills

other: \_\_\_\_\_

**End of Year Crispus Attucks Charter School PARENT SURVEY 17-18 page 2**

(Check all that apply)

9. What is/are the best way(s) to communicate with you and your family?

school website     email     meetings     phone calls  
 home visits     letters, newsletters     other: \_\_\_\_\_

10. What limits your participation in your child's school activities, meetings, or conferences? (check all that apply)

not enough information or notice     transportation     language  
 inconvenient schedule/times     childcare/babysitting     location  
 other: \_\_\_\_\_

(Please circle the response)

11. Have you attended any Parent Meetings/Parent Involvement Cafés (PIC)?

Yes    No    If you circled "Yes", how did you find them beneficial, or not so?

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

12. Please share any additional comments or suggestions here:

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

**Optional: Your Name, Name of your Student and Your Contact Information**

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**Thank you for taking the time to complete this survey. Please return it to the school by Tuesday, May 29.**