***Note to Schools: This template was originally developed by the 2013 State School Superintendent’s Parent Advisory Council (PAC) with assistance from the Georgia Department of Education’s (GaDOE) Family-School Partnership Program. With the reauthorization of the federal law, the Every Student Succeeds Act (ESSA), the GaDOE revised this template and asked the 2019 PAC to review it. Local educational agencies (LEAs) and schools may use this template to guide them in meeting the compliance requirement of an annual evaluation, as described in Section 1116 of ESSA, particularly with consultation regarding the School Parent and Family Engagement Policy / Plan, the building staff capacity, and the 1% set aside. For input into the School-Parent Compacts, visit the GaDOE Family-School Partnership’s Input webpage at partnerships.gadoe.org for the Compact Feedback Forms.*** ***This sample survey may contain questions that are more or less suitable to address the needs of different LEAs and/or schools; therefore, it is highly encouraged that LEAs and schools review the survey questions and select the best questions to guide the development of a survey that is suited to individual objectives and needs.***

[Insert School System or School Logo]

**Annual Evaluation Survey of the Title I Family Engagement Program**

*Dear Parents,*

*Our school conducts outreach to all parents and family members and supports successful school and family interactions. Your help in planning these family engagement efforts is appreciated. Please complete the following section to provide your recommendations into our efforts to help you support your child’s learning and educational success.*

**Tell Us About Your Child(ren)**

**Which school/schools does your child(ren) attend?** (Circle all that apply)

*(The school system will list all Title I Schools from which parents may select.)*

Elementary Middle High Other\_\_\_\_\_

*ABC Elementary XYZ Middle QRS High North Academy*

*123 Elementary*

**In which grade/grades is your child(ren)?** (Circle all that apply)

PreK Kindergarten 1st 2nd 3rd

4th 5th 6th 7th 8th

9th 10th 11th 12th

**Let’s Talk Money! (Family Engagement Budget)**

*Our school system receive $\_\_\_\_\_\_\_\_\_\_\_\_\_ in federal funds called “Title I, Part A” funds for Title I schools to engage parents and family members in their child’s education.*

1. *How would you prioritize the following items to spend these funds?*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Last Year’s Budget Item** | **Budgeted Amount** | **Priority #** (Order 1-5 with 1 as the highest priority) | **Was This Effective?** | **Should We Continue This for Next Year?** |
| 1. Professional development for teachers and administrators about family engagement. For example: *(Prepopulated by the LEA / school)* | $ *(Prepopulated by the LEA / school)* |  | Yes or No | Yes or No |
| 1. Programs that reach parents and family members at home, in the community, and at school. For example: *(Prepopulated by the LEA / school)* | $ *(Prepopulated by the LEA / school)* |  | Yes or No | Yes or No |
| 1. Distributing information about how best to engage all families in the education of their children. For example: *(Prepopulated by the LEA / school)* | $ *(Prepopulated by the LEA / school)* |  | Yes or No | Yes or No |
| 1. Helping schools partner with community-based or other organizations or employers that support family engagement. For example: *(Prepopulated by the LEA / school)* | $ *(Prepopulated by the LEA / school)* |  | Yes or No | Yes or No |
| 1. *(Prepopulated by the LEA/school: Other activities and strategies that are identified as needed, appropriate, and consistent with the Parent and Family Engagement Policy / Plan.)* | $ *(Prepopulated by the LEA / school)* |  | Yes or No | Yes or No |

Other comments \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**What I Want School Staff to Know   
About Building Partnerships / Working With Families:**

*2. What do you want teachers and staff to know about engaging families?*

|  |  |  |  |
| --- | --- | --- | --- |
| **For my Child’s Elementary School:** | **Administrators** | **Teachers** | **Other School Staff** |
| *a. How can teachers and school staff build partnerships with parents and families to improve student achievement in elementary school?* | * Value and use suggestions of parents when making decisions * Reach out to, communicate with, and work with parents as equal partners * Implement and coordinate parent engagement programs / activites / events | * Value and use suggestions of parents when making decisions * Reach out to, communicate with, and work with parents as equal partners * Implement and coordinate parent engagement programs / activites / events | * Value and use suggestions of parents when making decisions * Reach out to, communicate with, and work with parents as equal partners * Implement and coordinate parent engagement programs / activites / events |
| *b. Please help the school develop professional learning activities for teachers, principals, other leaders, and other staff by writing your other ideas in the chart.* |  |  |  |
| *c.* *Are you willing to take part in training school staff?* | * Yes | * No | * Not Sure |

|  |  |  |  |
| --- | --- | --- | --- |
| **For my Child’s Middle School:** | **Administrators** | **Teachers** | **Other School Staff** |
| *d. How can teachers and school staff build partnerships with parents and families to improve student achievement in middle school?* | * Value and use suggestions of parents when making decisions * Reach out to, communicate with, and work with parents as equal partners * Implement and coordinate parent engagement programs / activites / events | * Value and use suggestions of parents when making decisions * Reach out to, communicate with, and work with parents as equal partners * Implement and coordinate parent engagement programs / activites / events | * Value and use suggestions of parents when making decisions * Reach out to, communicate with, and work with parents as equal partners * Implement and coordinate parent engagement programs / activites / events |
| *e. Please help the school develop professional learning activities for teachers, principals, other leaders, and other staff by writing your other ideas in the chart.* |  |  |  |
| *f. Are you willing to take part in training school staff?* | * Yes | * No | * Not Sure |

|  |  |  |  |
| --- | --- | --- | --- |
| **For my Child’s High School:** | **Administrators** | **Teachers** | **Other School Staff** |
| *g. How can teachers and school staff build partnerships with parents and families to improve student achievement in high school?* | * Value and use suggestions of parents when making decisions * Reach out to, communicate with, and work with parents as equal partners * Implement and coordinate parent engagement programs / activites / events | * Value and use suggestions of parents when making decisions * Reach out to, communicate with, and work with parents as equal partners * Implement and coordinate parent engagement programs / activites / events | * Value and use suggestions of parents when making decisions * Reach out to, communicate with, and work with parents as equal partners * Implement and coordinate parent engagement programs / activites / events |
| *h. Please help the school develop professional learning activities for teachers, principals, other leaders, and other staff by writing your other ideas in the chart.* |  |  |  |
| *i. Are you willing to take part in training school staff?* | * Yes | * No | * Not Sure |

**How I Want the School to Communicate With Me**

*3. What form(s) of communication do you prefer when it comes to information about your child’s education? (Check all that apply)*

|  |  |
| --- | --- |
| Communication With My Child’s School | Communication With the School District |
| * Email * Pre-recorded / Robo call * Mass email * Notes / Written messages sent home with student * Text message * Posting on website * Social Media (e.g., Facebook, Twitter) * Personal phone call from teacher * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | * Email * Pre-recorded / Robo call * Mass email * Notes / Written messages sent home with student * Text message * Posting on website * Social Media (e.g., Facebook, Twitter) * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

*4. Please complete the table for the following questions:*

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **Not Sure / Not Applicable** |
| a. Communication with the school is provided, translated, or interpreted in a language I can understand. |  |  |  |
| b. The school offers meetings in different formats such as in person and online |  |  |  |
| c. The school offers parent meetings at a convenient time of day / night. |  |  |  |

*5. When is the best time for you to attend a parent meeting?*

* Before school (Monday-Friday)
* During school, before lunch (Monday-Friday)
* During school, after lunch (Monday-Friday)
* Immediately after school (Monday-Friday)
* Evenings (Monday-Friday)
* Saturday
* Preferred day / time (please indicate): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*6. What is the most likely reason you would not attend a family engagement event?*

* Not aware of event taking place.
* Events take place at inconvenient times / dates.
* The location of the event is not convenient.
* I do not feel that events are relevant to me and my student(s).
* Lack of transportation
* Lack of child care
* Events are not in a language I can understand
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*7. What would improve your participation in family engagement events / activities at your child’s:*

Elementary School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Middle School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

High School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**What I Need to Know to Help My Child Transition to Next Steps**

*8. Which transition service would you like the school to offer to families? (**Check all that apply)*

* Preschool to Kindergarten
* Elementary to Middle School
* Middle to High School
* High School to Career (Career Fairs, Career Cluster / Pathway)
* High School to College (Advanced Placement (AP) courses, college admission planning, college financial aid)
* Promotion / graduation requirements
* New student orientation for family members
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*9. Which community-based organizations or businesses should your school work with to provide services to your child (i.e. PTA / PTO, United Way, business donations, work-based field trips)?*

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**What I Want to Know About My Child’s Education**

*10. Have you been provided the following information?*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Information** | **Yes** | **No** | **Not Sure / Not Applicable** | **I would like additional information on this topic** |
| Georgia Milestones Assessments |  |  |  |  |
| Other assessments used to evaluate by child’s performance and progress. |  |  |  |  |
| Alternate Assessments for students with special needs. |  |  |  |  |
| State Academic Standards |  |  |  |  |
| Explanation of the curriculum or what my child is learning in class |  |  |  |  |
| How to help my child with math |  |  |  |  |
| Georgia Career Cluster / Pathway courses |  |  |  |  |
| How to contact my child(ren)’s teacher |  |  |  |  |
| How to access my child’s grades |  |  |  |  |
| Study and homework tips |  |  |  |  |
| How to use technology to help my child |  |  |  |  |
| Information about the harms of copyright piracy |  |  |  |  |
| How to help with my own reading skills to help my child |  |  |  |  |
| The “Title I, Part A” Program |  |  |  |  |

*11. What should the school / teachers do to support you in helping child(ren) achieve academically?*

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

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**What I Know About the School’s Plan to Engage Families**

*12. Please answer the following questions*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Information** | **Yes** | **No** | **Not Sure / Not Applicable** | **Recommendations** |
| My school asked me for feedback on the school parent and family engagement plan. |  |  |  |  |
| The school makes the school parent and family engagement plan available to the local community. |  |  |  |  |
| The school updates, at least annually, the parent and family engagement plan to meet the changing needs of parents and the school. |  |  |  |  |
| If the Title I Schoolwide Plan is not satisfactory to parents, the school submits any parent comments to the district’s Title I office. |  |  |  |  |
| If requested by parents, the school addresses opportunities for regular meetings. |  |  |  |  |
| The school explains what a School-Parent Compact is and how parents, the entire school staff, and students will share the responsibility for improved student academic achievement. |  |  |  |  |
| I feel like I have had an opportunity to provide feedback about and participate in decision-making about my child’s education. |  |  |  |  |

*13. The following is a list of family engagement activities that have previously been provided. Please rate, add comments, and make recommendations for each.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Activity / Event** | **Participation** | **Comment** | **Recommendations** |
| Annual Title I Parent Meeting | 0=did not participate  1=not helpful  2=somewhat helpful  3=very helpful |  |  |
| *(School to prepopulate the activity)* | 0=did not participate  1=not helpful  2=somewhat helpful  3=very helpful |  |  |
| *(School to prepopulate the activity)* | 0 =did not participate  1=not helpful  2=somewhat helpful  3=very helpful |  |  |

*(LEA/School may add additional rows as needed.)*

*14. We greatly appreciate your participation in this survey. We look forward to reviewing your feedback and using that information to improve the quality of our school-family partnerships. Please add any additional comments, suggestions, or questions below. If you do have a question, please include contact information as to how to reach out to you.*

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

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