## PARENT SURVEY

 Name (optional):
 Center:
 Date:

Please answer the following statements using one of these ratings:

Plea	se answer the following statements using one of these ratings:	Strongly Disagree	Disagree	Agree	Strongly Agree
1	The Head Start center is safe, clean and cheerful. I feel comfortable leaving my child at the program each day.	1	2	3	4
2	Staff members are friendly and treat my family with respect.	1	2	3	4
3	I have a variety of opportunities and choices about how to participate (i.e. sharing expertise, volunteering, observing,) and am encouraged to visit at any time.	1	2	3	4
4	The staff recognizes me as a vital partner in my child's learning and values my observation of my own child's development.	1	2	3	4
5	Staff communicates with families in a variety of ways (e.g. daily conversations, phone calls, notes, and newsletters) about program and classroom activities.	1	2	3	4
6	Staff used positive, descriptive language to support and encourage children's learning.	1	2	3	4
7	My family has support to identify needs and receives referrals and/or resources to obtain services.	1	2	3	4
8	Staff is supportive and assists my family in identifying and achieving goals.	1	2	3	4
9	I feel Head Start is preparing my child for school.	1	2	3	4
10	My family has benefitted from Head Start services.	1	2	3	4

Additional Comments