**Title I Feedback Form 2024-2025**

**Title I Parent Evaluation/Survey Questions**

1. What was the focus of the event ? Select all that apply.

* Math
* ELA/Reading/Literacy
* Social/Emotional
* Parent conference
* Celebration of growth and achievement

1. What did you like most about the event/workshops? Select all that apply.

* Learning how to help my child at home
* Take home resources
* Seeing how my child learns
* Meeting other parents and families
* This event/conference was not helpful
* Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What areas of learning do you want to know more about?

* Math
* Reading
* Social/Emotional
* Tutoring
* After school care

1. What are the best times of day for you to attend events/workshops like this?

* Morning
* Lunch time
* Evening

1. What is the best way to communicate or share information with you about your child:

* Phone call\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Text message\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* ZOOM
* Class DoJo
* Canvas

1. On a scale of 1 to 5 do you believe the event was in providing valuable insights and strategies?

Not effective o o o o o Extremely effective

1. What can we do to improve how we help with setting and meeting academic goals for your student?

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