Parent Volunteer Feedback Form

Dear Families:

[______ Name of school ______] is using this Feedback Form to better serve parents; its goal is to improve your student’s and family’s education.

Parent’s Name: ___________________________ Student’s Name: ___________________________

Address: ___________________________

Home Phone: ___________________________ E-Mail Address: ___________________________

Work Phone: ___________________________ Cell Phone or Pager: ___________________________

What are the best times for you to come to the school?
☐ Mornings ☐ Afternoons ☐ Evenings ☐ Weekends

[______ Name of school ______] encourages parental involvement. Would you like to be involved with the school? ☐ Yes ☐ No

If yes, please place a ✓ in the boxes beside what you would feel comfortable doing:
☐ Make phone calls to other parents ☐ Classroom speaker or assistant
☐ Help in the school office or library ☐ Work on important school topics
☐ Attend field trips ☐ Help plan school events
☐ Join the school site council ☐ Other: ___________________________

What might prevent you from becoming involved that we could help you with?
☐ Work hours/work schedule ☐ Child care needs
☐ Transportation needs ☐ Language interpreter needs
☐ Other: ___________________________

Are you worried about your child passing the state test?
☐ Yes ☐ No

What do you need to know about the state test?
_________________________

_________________________

Students and their families have many talents. What talent can you share with [______ Name of school ______]?

☐ Cooking ☐ Art ☐ Music
☐ Sewing ☐ Trade skills (such as carpentry) ☐ Computer
☐ Other: ___________________________
What is your opinion about [____ Name of school ____]?


Would you like to be notified about various school meetings and events?
☐ Yes      ☐ No

What is the best way to notify you?
☐ Call me by phone         ☐ Mail a letter home          ☐ Put notices in the newspaper
☐ Other:_________________________

Can the school call you at work for these notices?
☐ Yes, call me            ☐ No, not at work
Your work phone number:______________________________________________
The best time to reach you at home:_______________________________________

If the school offered classes, which ones would interest you?
☐ Computers           ☐ General education
☐ English as a Second Language ☐ College/advanced level courses
☐ Job skills (interviewing, resumes, job search) ☐ How to help my student succeed at school
☐ Parents as school partners and school leaders

How much time should high school students spend on homework each day? What do you think is the correct answer?*
☐ 1 hour  ☐ 1 ½ hours  ☐ 2 hours  ☐ 2 ½ hours

Thank you for taking the time to complete this Feedback Form. Please return it to your child’s homeroom teacher or send it to:

[Contact person’s name:_________________________ ]
[School address:______________________________________________________]
[School phone number:__________________________________________________]
[School fax number:______________________________________________________]
[School e-mail address:_________________________ ]

*The correct length of time is _______ hours. If you do not see your student spending time on homework, ask both your student and the teacher why. The school administration needs to know if there is a problem with students not doing homework or with teachers not giving or correcting it.