



# Parent School Partnerships (MALDEF)

## Evaluation Survey MODULE 1 B

Workshop Location/Child's School: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name: \_\_\_\_\_  
First Last

### PRE-Survey (At the beginning of class)

1. How confident are you in your ability to support and help your child succeed in school? (Circle **one**)

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Not at all confident	A little bit confident	Confident	Very Confident

2. How comfortable are you in coming to school or calling the school to ask a question about your child's homework or grades? (Circle **one**)

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Very uncomfortable	Uncomfortable	Comfortable	Very Comfortable

3. How much do you know about what is expected of your child as a student? (Circle **one**)

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Not much at all	A little	Quite a bit	A lot

4. How much do you know about what is expected of you as a parent? (Circle **one**)

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Not much at all	A little	Quite a bit	A lot

5. What do you expect to learn from these classes?

**Please fill out the Post-Survey on the next page at the end of class when told to do so by the Instructor.**



# Parent School Partnerships (MALDEF)

## Evaluation Survey MODULE 1 B

### POST-Survey (At the END of class)

1. How would you rate **practical application or relevance** of the workshop? (Circle **one**)

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Poor	Below Average	Average	Above Average	Outstanding

2. How would you rate the overall **usefulness** of the workshop? (Circle **one**)

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Poor	Below Average	Average	Above Average	Outstanding

3. How would you rate the overall **quality** of the workshop? (Circle **one**)

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
Poor	Below Average	Average	Above Average	Outstanding

4. How confident are you in your ability to support and help your child succeed in school? (Circle **one**)

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Not at all confident	A little bit confident	Confident	Very Confident

5. How comfortable are you in coming to school or calling the school to ask a question about your child's homework or grades? (Circle **one**)

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Very uncomfortable	Uncomfortable	Comfortable	Very Comfortable

6. How much do you know about what is expected of your child as a student? (Circle **one**)

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Not much at all	A little	Quite a bit	A lot

7. How much do you know about what is expected of you as a parent? (Circle **one**)

<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>
Not much at all	A little	Quite a bit	A lot

8. What other things would you like to learn?

**Thank you!**