School	

Title I Part A Family Engagement Survey School Year 2020-2021

1.	Please check (Which of the family activities/topics listed below would	(√) all that apply d you like Title I funding to be used for?	
	☐ Reading Support ☐ Math Support ☐ Writing Support ☐ Science and Social Studies Support ☐ Understanding of Florida Standards ☐ Understanding District Assessments ☐ Interpretation/ Translation Services	☐ Understanding Florida Standards/ Assessment 3 rd — 8 th grade/ Other State Exams ☐ Information about School/ Community Services ☐ Homework Assistance ☐ Parenting Skills ☐ Parent Resource Room ☐ Summer Programming	
_	Additional ideas/suggestions:		
2.	 What times would you be available to attend the above activities? ☐ Morning 8:00 – 10:00 a.m. ☐ Afternoon 12:00 –4:00 p.m. ☐ Evening 5:00 – 7:00 p.m. 		
3.	Which days would you be available?		
	☐ Monday ☐ Tuesday ☐ Wednesday ☐ T	Γhursday □ Friday □ Saturday	
4.	. Are there barriers that prevent you or your child (ren) from participating in school activities? ☐Yes ☐No If yes, please describe:		
5.	Which activities and/or places would you like to be invo	olved in at our school?	
	☐ Classroom ☐ Office ☐ Cafeteria ☐ After School Programs	☐ Mentoring ☐ Leadership Committees (ex: SAC, PTA) ☐ Other:	
6.	Which would be the best way to communicate with you?		
	☐ Planner/Agenda ☐ Phone/ School Messenger ☐ Email ☐ School Website or Social Media		
7.	Do you have Internet at home? \square Yes \square No		
8.	Have you read or viewed the Title I Annual Meeting Handout? ☐ Yes ☐ No		
9.	Additional ideas/suggestions:		
10.	. Parent Name:	(OPTIONAL)	