2023-2024 School-level Title I Parent and Family Engagement Survey

School Name:	Date:	Loc. #:
Parent or Family Member's Name	Telephone Number	Email Address

**Directions:** Please complete the 2023-2024 School-level Title I Parent and Family Engagement Survey to assist our school with the implementation of the Title I Schoolwide Program by identifying the interests and needs of your family. The results of this survey will also be utilized to help in the development of the Title I School-level Parent and Family Engagement Plan (PFEP), and future parent and family engagement activities, events, and workshops.

1. From the list below, please identify the topic(s) that you would like to receive additional information on:

How to access resources for parents	Information about the Title I District Advisory
How to become a school volunteer	Council (DAC) and Parent Advisory Council
How to join PFEP Review Meetings	(PAC)
How to join the PTA/PTSA	Florida State Standards and Testing
How to work with my child at home	Requirements
How to request tutorial services for my child	d 🛛 The Title I Schoolwide Program
The Parent Portal	Services for Students with Special Needs
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2. What type of workshops would you like our school to present in order to best assist you in helping your child?

Academic Motivation	Cyber Bullying	Nutrition
Academic Requirements	Distance Learning	Parenting Strategies
Anti-Bullying	Drug Awareness	Test-Taking Strategies
Balancing my child's	Improving Math Skills	Raising Responsible
continuous use of	Improving Reading Skills	Children
technology with more	Improving Science Skills	Virtual Meetings
physically engaging	Internet Safety	
activities	Learning Disabilities and	
Basic Computer Skills	Special Education	
Building Self-Esteem	Mental Health	

3. What is the most convenient time for you to attend our school activities and workshops?

□ Mornings □ Afternoons □ Evenings □ Virtual Meetings

- 4. Do you have the capability to attend workshops/meetings virtually via Zoom?  $\square$  Yes  $\square$  No
- 5. Do you require any special assistance during our school activities and workshops (e.g., language interpreter, handicap access/parking, Sign Language interpreter, etc.)?

☐ Yes	(please specify)	🗖 No
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6. What suggestions do you have to assist with the redesigning of services, activities, and effectiveness of the school? List suggestion(s) below:

Thank you for taking the time to complete this survey