



STRUTHERS CITY SCHOOLS

BOARD OF EDUCATION OFFICE
99 EUCLID AVENUE, STRUTHERS, OHIO 44471
330-750-1061 FAX - 330-750-5516
MR. PETER J. PIRONE JR., SUPERINTENDENT
MR. BRIAN RELLA, TREASURER

Title 1 School Parent Survey

1 - Strongly Agree / 2 - Agree / 3 - Disagree / 4 - Strongly Disagree

| | 1 | 2 | 3 | 4 |
|--|---|---|---|---|
| 1. I feel welcome when I enter the school. | | | | |
| 2. The school schedules parent/teacher conferences in a flexible way so that I can attend. | | | | |
| 3. I know what the School-Parent Compact is. | | | | |
| 4. The School-Parent Compact provides a meaningful way to communicate with my child's teacher. | | | | |
| 5. Teachers regularly communicate with me. | | | | |
| 6. My calls, emails, or notes to school staff are answered promptly. | | | | |
| 7. I have access to and regularly use email. | | | | |
| 8. I prefer teacher communication to be: | | | | |
| a. Phone Calls | | | | |
| b. Emails | | | | |
| c. Weekly classroom letters | | | | |
| d. Take home folders | | | | |
| e. Assignment notebooks | | | | |
| f. Other - Please specify | | | | |
| 9. I feel knowledgeable about the school's expectations for my child. | | | | |
| 10. I feel knowledgeable about what is going on at the school. | | | | |
| 11. I know how to help my child with his/her homework. | | | | |
| 12. My child receives additional academic help when needed. | | | | |
| 13. My child has been identified as gifted and receives additional enrichment activities. | | | | |
| 14. The school provides our family with workshops or informational events. | | | | |
| 15. The school provides our family with parenting resources. | | | | |
| 16. The school asks our input on family workshops and events. | | | | |
| 17. The school asks for my input about my child and how he/she learns best. | | | | |
| 18. I have been encouraged to volunteer at school. | | | | |
| 19. I feel that parents are involved in decision-making at our school. | | | | |
| 20. I have been invited to participate in school planning such as the school improvement plan, the Title I plan, parent involvement policy, etc. | | | | |
| 21. I feel knowledgeable about the Title I program. | | | | |
| 22. I feel knowledgeable about our school's status as a Title I Schoolwide school. | | | | |
| 23. I feel that my child has made adequate progress over the course of this school year. | | | | |

Do you have any questions or concerns regarding our Title 1 Services here at Struthers Elementary?

If you completed this form and would like to hear back from us please provide your name and number:

STRUTHERS ELEMENTARY SCHOOL
520 NINTH STREET
330-750-1065
fax 330-750-1489

STRUTHERS MIDDLE SCHOOL
800 FIFTH STREET
330-750-1064
fax 330-755-4749

STRUTHERS HIGH SCHOOL
111 EUCLID AVENUE
330-750-1062
fax 330-755-4525

SPECIAL SERVICES DEPT.
111 EUCLID AVENUE
330-755-3354
Fax 330-755-5421