



2022-2023 School-level Title I Parent and Family Engagement Survey

School Name: Ruth Owens Krusé Educational Center

Loc. #: 8181

Parent or Family Member's Name	Telephone Number	Email Address

Directions: Please complete the 2022-2023 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:

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| ☐ How to access resources for parents | ☐ Information about the Title I District Advisory Council (DAC) and Parent Advisory Council (PAC) |
| ☐ How to become a school volunteer | |
| ☐ How to join PFEP Review Meetings | ☐ Florida State Standards and Testing Requirements |
| ☐ How to join the PTA/PTSA | ☐ The Title I Schoolwide Program |
| ☐ How to work with my child at home | ☐ Services for Students with Special Needs |
| ☐ How to request tutorial services for my child | ☐ Other: _____ |
| ☐ The Parent Portal | |

2. What type of workshops would you like our school to present in order to best assist you in helping your child?

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

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