

# Fannin County Special Education Parent Survey

## 1. Parent Survey

### \* 1. Child's grade (choose only one)

- |                                       |                           |                            |
|---------------------------------------|---------------------------|----------------------------|
| <input type="radio"/> Early Childhood | <input type="radio"/> 4th | <input type="radio"/> 9th  |
| <input type="radio"/> Kindergarten    | <input type="radio"/> 5th | <input type="radio"/> 10th |
| <input type="radio"/> 1st             | <input type="radio"/> 6th | <input type="radio"/> 11th |
| <input type="radio"/> 2nd             | <input type="radio"/> 7th | <input type="radio"/> 12th |
| <input type="radio"/> 3rd             | <input type="radio"/> 8th |                            |

### \* 2. Child's Race / Ethnicity (choose only one)

- |   |   |
|---|---|
| <input type="radio"/> White                     | <input type="radio"/> Asian or Pacific Islander         |
| <input type="radio"/> Black or African-American | <input type="radio"/> American Indian or Alaskan Native |
| <input type="radio"/> Hispanic or Latino        |   |

### \* 3. Child's Primary Exceptionality / Disability (choose only one)

- |   |   |
|---|---|
| <input type="radio"/> Autism/Pervasive Development Disorder   | <input type="radio"/> Orthopedic Impairment (physical impairment) |
| <input type="radio"/> Emotional Disturbance                   | <input type="radio"/> Speech and Language Impairment              |
| <input type="radio"/> Hearing Impairment (including Deafness) | <input type="radio"/> Traumatic Brain Injury                      |
| <input type="radio"/> Learning Disability                     | <input type="radio"/> Visual Impairment (including Blindness)     |
| <input type="radio"/> Mental Retardation                      | <input type="radio"/> Other Health Impairment                     |

### \* 4. My child is enrolled in the following school district:

- |                                   |                                   |
|-----------------------------------|-----------------------------------|
| <input type="radio"/> Bonham      | <input type="radio"/> Leonard     |
| <input type="radio"/> Dodd City   | <input type="radio"/> Sam Rayburn |
| <input type="radio"/> Ector       | <input type="radio"/> Savoy       |
| <input type="radio"/> Fannindel   | <input type="radio"/> Trenton     |
| <input type="radio"/> Honey Grove |                                   |

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5. Please click on the circle that best describes how strongly you agree or disagree with the following statements. If unsure you may leave a question blank.

	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
Before my child was referred for special education services, other options within general education were considered.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am considered an equal partner with teachers and other professionals in planning my child's program.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
At the ARD meeting, we discussed how my child would participate in statewide assessments.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
At the ARD meeting, we discussed accommodations and modifications that my child would need.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
All of my concerns and recommendations were documented on the IEP.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have been asked my opinion about how well special education services are meeting my child's needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

6. Please click on the circle that best describes how strongly you agree or disagree with the following statements. If unsure you may leave a question blank.

	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
Special education teachers set challenging goals for my child.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
General education teachers have high expectations for my child.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child is regularly involved with students who do not have disabilities in school activities such as clubs band, choir, sports, field trips, and assemblies.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I receive updates of my child's progress through report cards and parent-teacher conferences similar to updates provided to parents of students who do not have disabilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The ARD committee encourages me to participate in the IEP decision-making process.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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## 2. Parent Survey continued

7. Please click on the circle that best describes how strongly you agree or disagree with the following statements. If unsure you may leave a question blank.

	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
I am encouraged to share my knowledge of my child with school personnel.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child is being taught the general curriculum to the maximum extent possible based on his/her needs and objectives.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with the special education services provided to my child.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
We discussed whether my child could be educated in the regular classroom with appropriate modifications and accommodations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I received a copy of my child's IEP in a timely manner after a meeting was held.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I understand what is discussed at the meetings to develop my child's IEP.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. Please click on the circle that best describes how strongly you agree or disagree with the following statements. If unsure you may leave a question blank.

	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
My child's evaluation is written in terms I understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teachers are available to speak with me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teachers treat me as a team member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teachers communicate with me regularly regarding my child's progress on IEP goals and objectives.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child has the adaptive equipment needed for his/her education program.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child was provided with all of the services documented on my child's IEP.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. Please click on the circle that best describes how strongly you agree or disagree with the following statements. If unsure you may leave a question blank.

	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
School personnel ensure that I have understood the Procedural Safeguards.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I was given enough time to fully understand my child's IEP.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School personnel respect my cultural heritage.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
School personnel show sensitivity to the needs of students with disabilities and their families.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child's teachers understand my child's disability and how to help him/her learn.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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10. ONLY for parents with students ages 16 and older. All parents may add additional comments in the comment box at the end of the survey.

	Strongly Agree	Agree	Undecided	Disagree	Strongly Disagree
The postsecondary goals developed in my child's transition plan are appropriate for his/her strengths, weaknesses, and interests.	jn	jn	jn	jn	jn
My child receives all the supports documented in his/her transition plan.	jn	jn	jn	jn	jn
My child participated in the development of his/her transition plan.	jn	jn	jn	jn	jn
I participated in the development of my child's transition plan.	jn	jn	jn	jn	jn
I think the transition plan developed for my child will help him/her reach his/her goals after graduation.	jn	jn	jn	jn	jn

11. For ALL parents:

Do you have any additional comments concerning your child's education?