

**Glidden Community Learning Center
After-School Program Parent Survey**

Grades(s) of Child(ren): _____

If your child currently attends the After-School Program, please answer Question 1 through 10.

If your child did attend the After-School Program, **but currently does not**, please answer Question 11.

In thinking about your child(ren)'s experience with the After-School Program this school year, how much do you agree with the following statements? Circle your response to the following questions using the scale below:

| | 1=Strongly Agree | 2=Agree | 3=Disagree | 4=Strongly Disagree | |
|-----|--|----------------|-------------------|----------------------------|---|
| 1. | The After-School Program staff shows care and concern for my child(ren). | 1 | 2 | 3 | 4 |
| 2. | The After-School Program is a safe place for my child(ren). | 1 | 2 | 3 | 4 |
| 3. | I receive sufficient communication and information about the After-School Program. | 1 | 2 | 3 | 4 |
| 4. | The activities during the After-School Program are well organized, fun, and interesting for my child(ren). | 1 | 2 | 3 | 4 |
| 5. | The After-School Program helps my child(ren) do better academically. | 1 | 2 | 3 | 4 |
| 6. | Homework help is very important to the after-school program. | 1 | 2 | 3 | 4 |
| 7. | The After-School Program meets my needs as a parent/guardian. | 1 | 2 | 3 | 4 |
| 8. | I would recommend the After-School Program to other parents. | 1 | 2 | 3 | 4 |
| 9. | Overall, I have a high level of satisfaction with the After-School Program. | 1 | 2 | 3 | 4 |
| 10. | What would make the After-School Program better next year? | | | | |
| | _____ | | | | |
| | _____ | | | | |
| | _____ | | | | |
| 11. | If your child(ren) stopped attending After-School before mid-May, why did they stop coming? | | | | |
| | _____ | | | | |
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| | _____ | | | | |