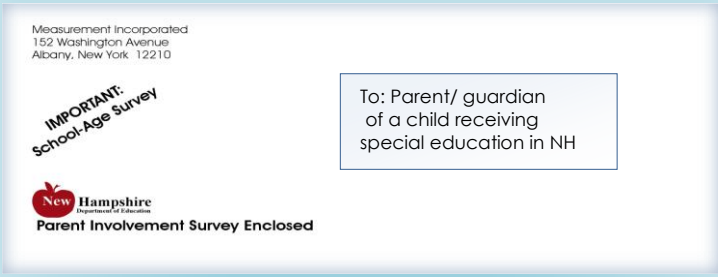
The 2009-2010 Parent Involvement Survey

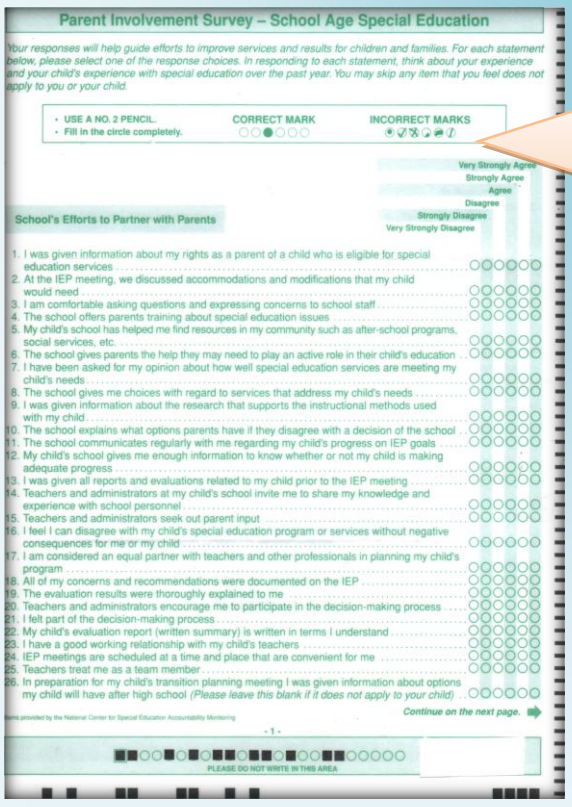
To parents of a child between the ages of 3 and 21 who receives special education services, the New Hampshire Department of Education needs your input on the

Parent Involvement Survey

The survey will be mailed to your home in March/April 2010.



Your input and opinions about parent involvement in special education helps to improve special education services for your child and other children across the state.


Parent Involvement Survey – School Age Special Education

Your responses will help guide efforts to improve services and results for children and families. For each statement below, please select one of the response choices. In responding to each statement, think about your experience and your child's experience with special education over the past year. You may skip any item that you feel does not apply to you or your child.

- USE A NO. 2 PENCIL.
- Fill in the circle completely.

CORRECT MARK INCORRECT MARKS

School's Efforts to Partner with Parents

Very Strongly Agree
Strongly Agree
Agree
Disagree
Strongly Disagree
Very Strongly Disagree

1. I was given information about my rights as a parent of a child who is eligible for special education services
2. At the IEP meeting, we discussed accommodations and modifications that my child would need
3. I am comfortable asking questions and expressing concerns to school staff
4. The school offers parents training about special education issues
5. My child's school has helped me find resources in my community such as after-school programs, social services, etc.
6. The school gives parents the help they may need to play an active role in their child's education
7. I have been asked for my opinion about how well special education services are meeting my child's needs
8. The school gives me choices with regard to services that address my child's needs
9. I was given information about the research that supports the instructional methods used with my child
10. The school explains what options parents have if they disagree with a decision of the school
11. The school communicates regularly with me regarding my child's progress on IEP goals
12. My child's school gives me enough information to know whether or not my child is making adequate progress
13. I was given all reports and evaluations related to my child prior to the IEP meeting
14. Teachers and administrators at my child's school invite me to share my knowledge and experience with school personnel
15. Teachers and administrators seek out parent input
16. I feel I can disagree with my child's special education program or services without negative consequences for me or my child
17. I am considered an equal partner with teachers and other professionals in planning my child's program
18. All of my concerns and recommendations were documented on the IEP
19. The evaluation results were thoroughly explained to me
20. Teachers and administrators encourage me to participate in the decision-making process
21. I felt part of the decision-making process
22. My child's evaluation report (written summary) is written in terms I understand
23. I have a good working relationship with my child's teachers
24. IEP meetings are scheduled at a time and place that are convenient for me
25. Teachers treat me as a team member
26. In preparation for my child's transition planning meeting I was given information about options my child will have after high school *(Please leave this blank if it does not apply to your child)*

Continue on the next page.

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PLEASE DO NOT WRITE IN THIS AREA

Once you receive the survey, please complete it and return it in the postage-paid envelope.
Thank you for your time and participation!

If you need help to complete the survey, such as

- ***a reader,***
- ***a translator, or***
- ***a large print survey, or***
- ***you did not receive a survey***

please contact: Robert Ogle at Measurement Incorporated Evaluation Services rogle@measinc.com or 1-800-330-1420 ext 203

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