

Pinnacle Educational Services Inc.

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Charter School Parent Questionnaire

Dear Parent:

Once again we have come to the time of year when we begin the evaluation process of our staff & program. With the understanding that you are very busy, we have made every attempt to keep this survey brief. If you would please take a few moments to answer the following questions we would greatly appreciate it. This survey can be taken online at www.pinnacleedservices.com or please return this form to Kim Salle in the front office. This evaluation will be kept confidential.

Parent name (optional)

Services your student receives (please check all that apply):

RSP OT SLP Behavior

Please select your answer below: Y (yes) N (no) N/A (not applicable)

1. Has your student made progress towards the goals listed in his/her IEP? Y N N/A
2. Did you receive progress reports for your student? Y N N/A
3. Did you receive a copy of your parental safeguards at least one time this year on or before your students IEP meeting? Y N N/A
4. Were your concerns addressed at the IEP meeting relating to educational and/or social progress? Y N N/A
5. Are the classroom teachers aware of their specific responsibilities related to the accommodations and modifications/implementation of your students IEP? Y N N/A
6. Did the IEP team discuss how your child would participate in State and district testing? Y N N/A
7. If you speak a language other than English, upon request, do you receive information from the school in your native language? Y N N/A
8. Did your provider share with you any techniques or strategies regarding your student and how to improve their educational and/or social skills? Y N N/A

Please rate each of the following (circle your answer):

4 Excellent 3 Good 2 Average 1 Poor

1. How well were your concerns and or information you had about your child considered when planning and writing his/her IEP? 4 3 2 1
2. Did the IEP team facilitate your involvement as a means of improving services and results for you child? 4 3 2 1
3. When given copies of reports and or assessments did you feel that the results of the reports were fully explained to you so that you understood them? 4 3 2 1

Please rate each of your providers using the following scale:

4 Excellent 3 Good 2 Average 1 Poor

1. Expertise: Do you feel that your special education provider is knowledgeable in their field and area of expertise?

RSP: Anne Sarah

OT: Irene Wess

SLP: Marcia Nicole

Beh. Therapist: Marissa

Psychologist: Brad

2. Communication: Did your provider respond to your attempts to contact them either by phone, in writing (e-mail), or in person?

RSP: Anne Sarah

OT: Irene Wess

SLP: Marcia Nicole

Beh. Therapist: Marissa

Psychologist: Brad

3. Professionalism:

RSP: Anne Sarah

OT: Irene Wess

SLP: Marcia Nicole

Beh. Therapist: Marissa

Psychologist: Brad

Optional:

1. Do you have any other concerns or comments about you or your child's Special Education experience that you would like to tell us? Y N (If yes please explain below)

2. How can we improve our Special Education program to better meet your child's needs?