Parent Survey — Special Education

This is a survey for parents of students who received special education services during the 2007-2008 school year. Your responses will help guide efforts to improve services and results for children and families. For each statement below, please select one of the following response choices: very strongly disagree, strongly disagree, disagree, agree, strongly agree, very strongly agree. In responding to each statement, think about your experience and your child's experience with special education during the 2007-2008 school year. You may skip any item that you feel does not apply to you or your child.

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Proper Marks Improper Marks O O O O 1. I am considered an equal partner with teachers and other professionals in	/ /	/	/,	HEAT SHOW DISCO		
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 I am considered an equal partner with teachers and other professionals in planning my child's program. 	1	2	3	4	5	6
I have been asked for my opinion about how well special education services are meeting my child's needs.	1	2	3	4	(5)	6
At the IEP meeting, we discussed how my child would participate in statewide assessments.	1	2	3	4	(5)	6
 At the IEP meeting, we discussed accommodations and modifications that my child would need. 	1	2	3	4	(5)	6
5. All of my concerns and recommendations were documented on the IEP.	1	2	(3)	4	(5)	6
Written justification was given for the extent that my child would not receive services in the regular classroom.	1	2	3	4	(5)	6
I was given information about organizations that offer support for parents of students with disabilities.	1	2	3	4	(5)	6
8. I felt part of the decision making process.	1	2	3	4	(5)	6
9. My child's evaluation report is written in terms I understand.	1	2	3	4	(5)	6
10. Written information I receive is written in an understandable way.	1	2	3	4	(5)	6
11. Teachers are available to speak with me.	1	2	3	4)	(5)	6
12. Teachers treat me as a team member.	1	2	3	4	(5)	6
Schools' Efforts to Partner with Parents						
Teachers and administrators:						
13 seek out parent input.	(1)	2	3	4	(5)	6
14 show sensitivity to the needs of students with disabilities and their families.	1	2	3	4	5	6
15 encourage me to participate in the decision-making process.	(1)	(2)	3	4	5	6
16 respect my cultural heritage.	1	2	3	4	(5)	6
 ensure that I have fully understood the Procedural Safeguards (the rules in federal law that protect the rights of parents). 	1	2	3	4	(5)	6
The School:						
18 has a person on staff who is available to answer parents' questions.	1	2	3	4	(5)	6
19 communicates regularly with me regarding my child's progress on IEP goals.	1	2	3	4	(5)	6
20 gives me choices with regard to services that address my child's needs.	1	2	3	4	(5)	6
21 offers parents training about special education issues.	1	2	3	4	(5)	6

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	Schools' Efforts to Partner with Parents (cont.) Schools' Efforts to Partner with Parents (cont.)
	22 offers parents a variety of ways to communicate with teachers. 1 2 3 4 5 6 6 23 gives parents the help they may need to play an active role in their child's education. 24 provides information on agencies that can assist my child in the transition from school. 25 explains what options parents have if they disagree with a decision of the school. 1 2 3 4 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
	26. State of Residence Maryland District of Columbia Pennsylvania 27. School system of service during 2007-2008 (Select the Maryland School system that provided
	services for the most school days if you lived in more than once system during 2007-2008. Allegany Caroline Frederick Montgomery Talbot Anne Arundel Carroll Garrett Prince George's Washington County Baltimore City Cecil Harford Queen Anne's Wicomico County Baltimore County Charles Howard Saint Mary's Worcester Calvert Dorchester Kent Somerset
	28. Child's Grade OK O1 O2 O3 O4 O5 O6 O7 O8 O9 O10 O11 O12 29. Child's Age in Years (on September 30, 2007) O5 O6 O7 O8 O9 O10 O11 O12 O13 O14 O15 O16 O17 O18+
	30. Child's Age when First Referred to Early Intervention or Special Education 1 02 03 04 05 06 07 08 09 010 011 012 013 014
	31. Child's Race/Ethnicity O White O Black or African-American O Asian or Pacific Islander O Multi-racial
:	32. Child's Primary Exceptionality/Disability (Bubble one only. Use Multiple Disabilities if your child has more than one disability)
	O Autism
	Thank you for your participation!
-	FOR OFFICE USE ONLY - DO NOT WRITE IN THIS AREA
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