



## Parent Survey

### Special Education for students ages 6 through 26

Please FILL IN circles like this ●, not ⊗ or ⊖. You can use a pen or pencil.  
Please think about your child whose initials are at the end of the code number located at the top right corner of this survey. Consider this child when answering the questions.

*This is a survey for parents of students receiving special education services. Your responses will help guide efforts to more successfully involve families in their children's education.*

*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 over the past year. You may skip any item that you feel does not apply to you or your child.*

(For each question, please FILL IN ONE circle)

Schools' Efforts to Partner with Parents:	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree
1. I am considered an equal partner with teachers and other professionals in planning my child's program.	①	②	③	④	⑤	⑥
2. I was offered special assistance (such as child care) so that I could participate in the Individualized Educational Program (IEP) meeting.	①	②	③	④	⑤	⑥
3. At the IEP meeting, we discussed how my child would participate in statewide assessments, such as the MEAP or MI-Access.	①	②	③	④	⑤	⑥
4. 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
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
7. I was given information about organizations that offer support for parents of students with disabilities.	①	②	③	④	⑤	⑥
8. 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
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

	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree
<b>Teachers and administrators:</b>						
13. - seek out parent input.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
14. - show sensitivity to the needs of students with disabilities and their families.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
15. - encourage me to participate in the decision-making process.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
16. - respect my cultural heritage.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
17. - ensure that I have fully understood the Procedural Safeguards [the rules in federal law that protect the rights of parents].	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
<b>The school:</b>						
18. - has a person on staff who is available to answer parents' questions.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
19. - gives me information regularly about my child's progress on IEP goals.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
20. - gives me choices about services that address my child's needs.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
21. - offers parents training about special education issues.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
22. - offers parents a variety of ways to get in touch with teachers.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
23. - gives parents the help they may need to play an active role in their child's education.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
24. - provides information on agencies that can assist my child in the transition from school.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6
25. - explains what options parents have if they disagree with a decision of the school.	<input type="radio"/> 1	<input type="radio"/> 2	<input type="radio"/> 3	<input type="radio"/> 4	<input type="radio"/> 5	<input type="radio"/> 6

**Now we would like to ask you some final questions about your family.**

26. Please identify your relationship to the child (*Please FILL IN ONE circle that best applies*):

- (A) Mother     
  (C) Grandparent     
  (E) Other Caregiver: \_\_\_\_\_  
 (B) Father     
  (D) Other Relative

27. Please select the *ethnic* category that best describes how you identify yourself:

- (Y) Hispanic/Latino     
  (N) Not Hispanic/Latino


28. Please select the *race identity* category that best describes yourself: (*Please FILL IN ONE or MORE*)

- (A) American Indian or Alaska Native     
  (C) Asian American     
  (E) Black or African American  
 (B) Native Hawaiian/Other Pacific Islander     
  (D) White

29. What was your child's age when first referred to early intervention or special education?

- Under 1 year OR  
 Age in years: \_\_\_\_\_

**THANK YOU for taking time to fill out the Parent Survey – Special Education for students ages 6 through 26.**

 Please return the survey in the enclosed self-addressed envelope.