

Demo Survey

Welcome to your survey! We need your feedback to help your child(ren)'s school be the best it can be. If you have more than one child at the school, we ask that you take the survey about your oldest child's experiences at the school. No one at the school will be able to connect your answers back to you, so please answer the questions below as honestly as possible. Thank you in advance for your thoughtful responses.

School Environment

In this section, we would like to learn more about your overall perceptions of your child's school.

1. Do you have someone in your child's school whom you can go to with questions about your child?

Yes

No

Clear

2. How much stress does your child experience due to academics?

No stress at all

A little bit of stress

Some stress

Quite a bit of stress

A tremendous amount of stress

Clear

3. Has your child ever been bullied online, through social media or text?

Yes

No

I don't know

Clear

4. Has your child ever been bullied by other students in-person at school?

Yes

No

I don't know

Clear

5. If your child was bullied, how easy was it for you to get support from the school?

Not
easy
at all

Slightly
easy

Somewhat
easy

Quite
easy

Extremely
easy

N/A

Clear

6. How consistently does your child's school enforce school rules for all students?

Not
consistently
at all

Slightly
consistently

Somewhat
consistently

Quite
consistently

Extremely
consistently

Clear

7. How often do you feel you are treated differently by staff at your child's school because of your race, ethnicity, culture, gender, socio-economic status or sexual orientation?

Almost never Once in a while Sometimes Frequently Almost always

Clear

8. Overall, how respectful have school administrators been in their interactions with you?

Not at all respectful Slightly respectful Somewhat respectful Quite respectful Extremely respectful

Clear

9. Overall, how respectful have teachers been in their interactions with you?

Not at all respectful Slightly respectful Somewhat respectful Quite respectful Extremely respectful

Clear

10. Overall, how respectful have other school staff been in their interactions with you?

Not at all respectful Slightly respectful Somewhat respectful Quite respectful Extremely respectful

Clear

11. Which of the following resources do you use to stay informed about important things happening throughout APS? **Please select all that apply.**

- APS Website
- APS School Talk Messages
- APS Social Media (e.g. APS Facebook and Twitter)
- APS NewsReview
- AETV Videos (e.g. Snapshots, Green Scene, Partners in Action)
- What's Up APS Podcast
- School-Based Sources (e.g. school or PTA newsletters)
- Non-APS Sources (e.g. Arlington Now, other social media, listservs)
- None of the above

Clear

12. Have you used the “Engage with Us” section on the APS website to find information on any of the following topics? **Please select all that apply.**

- Boundary changes
- Options and transfer policy changes
- Details on the 1:1 devices for personalized learning
- The new APS Strategic Plan
- None of the above

Clear

13. How do you provide feedback to APS about school-wide and APS-wide issues? **Please select all that apply.**

Community Meetings and Forums

"Engage with Us" on the APS website

Online Surveys

School Parent Ambassador

"Contact Us" link on website

Speak to my child's teacher about school-wide or APS-wide issues

Speak to the principal at my child's school about school-wide or APS-wide issues

Speak to School Board members

Speak at School Board meetings

Other

N/A - I have not provided feedback.

Clear

14. If you choose "other" in the question above, please describe your answer below.

Clear

Learning

In this section, we would like to hear more from you about your perception of your child's learning at his or her school.

15. In general, how high are teachers' expectations for your child?

Not high at all Slightly high Somewhat high Quite high Extremely high

Clear

16. How supportive is your child's school if you need to advocate for your child's needs?

Not at all supportive Slightly supportive Somewhat supportive Quite supportive Extremely supportive N/A

Clear

17. How often does your child's school provide learning opportunities about supporting your child's **academic achievement**? (e.g. College/High School Information Nights, orientations, Back to School Nights, Math Nights, etc.)

Almost never Once or twice a year Every few months Monthly Weekly or more I don't know

Clear

18. How often does your child's school provide learning opportunities about supporting your child's **well-being**?(e.g. principal chats/coffees, PTA sponsored speakers, etc.)

- Almost
never
- Once
or
twice
a year
- Every
few
months
- Monthly
- Weekly
or more
- I don't
know

Clear

19. How well does your child's school communicate with you?

- Not
well
at all
- Slightly
well
- Somewhat
well
- Quite
well
- Extremely
well

Clear

20. How well does your child's school communicate about the appropriate use of educational technology (like iPads and MacBooks)?

- Not
well
at all
- Slightly
well
- Somewhat
well
- Quite
well
- Extremely
well

Clear

21. How challenging is your child's school work?

Not
challenging
at all



Slightly
challenging



Somewhat
challenging



Quite
challenging



Extremely
challenging



Clear

22. How well do your child's teachers partner with you to support your child's learning?

Not
well
at all



Slightly
well



Somewhat
well



Quite
well



Extremely
well



Clear

23. On a typical school night, how much time does your child spend on homework?

My child's
school
does not
assign
homework



Less
than
1
hour



About
1 hour



About
2
hours



About
3
hours



4
hours
or
more



Clear

Engagement Barriers

How big of a problem are the following issues for becoming involved with your child's current school?

24. Child care needs

Not a problem at all Small problem Medium problem Large problem Very large problem

Clear

25. Transportation-related challenges

Not a problem at all Small problem Medium problem Large problem Very large problem

Clear

26. Concerns about getting to the school safely

Not a problem at all Small problem Medium problem Large problem Very large problem

Clear

27. How busy your schedule is

Not a problem at all Small problem Medium problem Large problem Very large problem

Clear

28. Scheduling conflicts

Not a problem at all Small problem Medium problem Large problem Very large problem

Clear

29. School staff seem too busy

Not a problem at all Small problem Medium problem Large problem Very large problem

Clear

30. You feel unsure about how to communicate with the school

Not a problem at all Small problem Medium problem Large problem Very large problem

Clear

31. The school provides little information about involvement opportunities

Not a problem at all Small problem Medium problem Large problem Very large problem

Clear

32. The school is not welcoming to parents

Not a problem at all Small problem Medium problem Large problem Very large problem

Clear

33. The school does not communicate well with people from your culture

Not a problem at all Small problem Medium problem Large problem Very large problem

Clear

34. The school does not communicate well with people who speak your language

Not a problem at all Small problem Medium problem Large problem Very large problem

Clear

35. You do not feel a sense of belonging with your child's school community

Not a problem at all Small problem Medium problem Large problem Very large problem

Clear

36. Negative memories of your own school experience

Not a problem at all Small problem Medium problem Large problem Very large problem

37.

Clear

Your child does not want you to contact the school

Not a problem at all



Small problem



Medium problem



Large problem



Very large problem



Clear

38. You worry that adults at the school will treat your child differently if you raise a concern

Not a problem at all



Small problem



Medium problem



Large problem



Very large problem



Clear

Health Services

In this section, please share your perspective on efforts to support your child's health.

39. How healthy are the food choices for students at your child's school?

Not at all healthy



Slightly healthy



Somewhat healthy



Quite healthy



Extremely healthy



I don't know



Clear

40. If your child has a chronic health condition, how satisfied have you been with the support you have received from your child's school?

Not at all satisfied

Slightly satisfied

Somewhat satisfied

Quite satisfied

Extremely satisfied

N/A - My child does not have a chronic health condition.

Clear

Out-of-School Time

The following questions ask for your thoughts on out-of-school time for your child. When answering these questions, think about your child's experiences outside of school, including in the morning, at night, and on the weekends.

41. What activities does your child do regularly outside of school? **Please select all that apply.**

Sports team at school

Recreation or Travel sports team (soccer, baseball, gymnastics, etc.)

Club or activity at school (other than sports) such as drama, hobby club, or enrichment activity

Club or activity outside of school (drama, dance, etc.)

Other Afterschool Program (AHC, Aspire, Reach Far, YMCA, etc.)

Extended Day / Check In

Tutoring

Job /
Employment
(including
babysitting or
dog walking)

Community
Service

Spend
time
home
with a
parent or
other
adult

Spend time
home alone
without a
parent or
other adult

N/A - My
child does
not
participate
in activities

Clear

42. Considering all activities, how often does your child participate in outside-of-school activities?

Less
than
once
per
year

About
once
per
year

2-5
times
per
year

Once
per
month

More
than
once
per
month

N/A - My
child does
not
participate
in activities

Clear

43. Which of the following barriers prevent your child from participating in out-of-school activities? **Please select all that apply.**

Transportation

Cost

Time

Knowing
how to
access

Safety
concerns

Accessibility

N/A -
barrie

Clear

44. How confident do you feel talking with your child about sensitive topics (for example, bullying at school or concerning current events)?

Not at all confident Slightly confident Somewhat confident Quite confident Extremely confident

Clear

45. How well does your child's school help you understand community resources available to your family outside of APS?

Not well at all Slightly well Somewhat well Quite well Extremely well

Clear

Background Questions

For the final section, we need to know a bit of background information about you so that we can describe the types of families who completed this survey.

46. How does your child normally get to school in the morning?

School Bus Walking Public Transportation Car (Guardian Drives) Car (Student Drives) Combination

Clear

47. How does your child normally get home?

School Bus Walking Public Transportation Combination

Car (Guardian Drives) Car (Student Drives)

Clear

48. How far do you live from your child's school?

Under 1 mile Between 1-2 miles Between 2-5 miles Greater than 5 miles

Clear

49. What is your race or ethnicity?

Asian Black or African American Hispanic or Latino White Two or More Races/Ethnicities Other

Clear

50. If you marked "Other" or "Two or More Races/Ethnicities," please describe in the space below.

Clear

51. Please select the highest level of education you have completed.

No formal education Some high school High school diploma or equivalent Some vocational or technical training Some college

An
associate's
degree

A
bachelor's
degree

A master's
degree

A
professional
degree (JD,
MD)

A
doctoral
degree
(PhD)

Clear

52. Please indicate your approximate
average household income.

\$0 to
\$24,000

\$24,001 to
\$51,000

\$51,001 to
\$72,000

\$72,001 to
\$87,000

\$87,001 to
\$110,000

\$110,001 to
\$150,000

\$150,001 to
\$200,000

\$200,001 or
higher

Clear

Submit