

Last Updated: 7/13/20

The following is a list of sample questions systems and schools may choose to use as they gather feedback from stakeholders ahead of and during the 2020-2021 school year. These questions appeared in surveys from systems in Louisiana and across the country. This is by no means an all-inclusive list and systems are not required to use these questions. Systems or schools can use these questions exactly as they appear, alter them to best fit their needs or create their own list of questions that cover different topics and focus on different stakeholder groups.

**NOTE:** For parents/guardians who have multiple children in your system/school, you may choose to alter the questions to reflect multiple children (instead of “child” use “children”) or ask parents/guardians to fill out the survey once for each child.

### General Questions

Q: Please select the answer that best describes your relationship to our schools.

A: *Parent/Guardian | Teacher | School administrator | Other school-based staff | District-level employee | Parent and employee | Community member | Student*

Q: How do you prefer to receive communications from the district? Check all that apply.

A: *Phone | Email | Text | District website | School website | Newsletter | Social media*

Q: How satisfied are you with the frequency of district communications about COVID-19, including safety precautions and health information?

A: *Too frequent | The right frequency | Not frequent enough*

Q: Please share any additional comments or concerns you feel would be helpful for us to know.

A: *(Use a text box)*

### Parent/Guardian, Employee and Student Questions

Q: Which scenario do you prefer for the 2020-2021 school year?

A: *Traditional | Hybrid | Distance learning*

Q: What are the biggest challenges you and your family are facing during the pandemic? (Select all that apply)

A: *Keeping a regular schedule | Social isolation | Loss of job or reduced income | Technology | Childcare | Internet connectivity | Getting enough food | Sick or helping others who are sick | Not facing additional challenges*

Q: How has COVID-19 impacted you or your family?

A: *A family member or I have been diagnosed with and recovered from COVID-19. | A family member or I have been diagnosed and are still recovering from COVID-19. | A family member was diagnosed and has passed away. | A family member in the home or I have lost a job. | My family and I have not been impacted.*

### Parent/Guardian and Student Questions

Q: Do you have internet access for distance learning?

A: *Yes | No*

Q: Do you have device access for distance learning?

A: Yes / No

Q: Please list the system resources you or your family have utilized during the pandemic.

A: *Curb-side meals | Google Classroom instruction | Online learning resources | Printed learning materials | Academic call center | Emotional support call center*

### **Parent/Guardian Questions**

Q: Please select the school your child attends.

A: *(List each school in a dropdown menu or other selection option)*

Q: Please select the grade your child will enter for 2020-2021.

A: *(List each grade in a dropdown menu or other selection option)*

Q: Which of the following best describes your preference for sending your child to school on campus with all health precautions in place?

A: *My child will resume traditional learning when school opens. | My child will return when school opens, but I have some concerns. | I plan to keep my child at home and prefer distance learning.*

Q: Which of the following transportation options will you use during the 2020-2021 school year?

A: *My child will ride the bus | I will provide my child's transportation*

Q: What is the best way for teachers to communicate with you and your child?

A: *Email | Newsletters | Phone | Text | Virtual platform | System or school website*

Q: Is your child able to complete technology-based assignments at home?

A: Yes / No

Q: Is your child able to attend live video lessons scheduled during the traditional school hours?

A: Yes / No

Q: If our schools operate using full distance learning for 2020-2021, are you able to provide childcare?

A: *Yes | Yes, but I'm concerned I may lose my job. | No*

Q: What statement best describes your child's experience with distance learning?

A: *We are doing well. | We are struggling with adjustments to distance learning, but overall we are getting by. | We are struggling greatly and could use some support (please contact your school).*

Q: How can we better support distance learning?

A: *(Use a text box)*

Q: How helpful have you found the following system resources during the pandemic?

	Very Helpful	Helpful	Neither Helpful or Unhelpful	Unhelpful	Very Unhelpful
<i>Curb-side meals</i>					
<i>Google Classroom instruction</i>					
<i>Online learning resources</i>					
<i>Printed learning materials</i>					
<i>Academic call center</i>					
<i>Emotional support call center</i>					

**Teacher/Employee Questions**

Q: What are your concerns about coming back to your school? Choose all that apply.

A: *Health guidelines not being followed | Classroom or office not properly disinfected | Availability of disinfecting materials or PPE | Childcare/care for family members | Having in-person interactions with others | My students' loss of instruction during school closures | My health or the health of a member of my household*

Q: What can the system or your school do to better support you professionally?

A: *(Use text box)*

Q: What can the system or your school do to better support your well-being?

A: *(Use text box)*

Q: How much would you agree or disagree with the following statements?

	Strongly Agree	Agree	Neither Agree Or Disagree	Disagree	Strongly Strongly Disagree
<i>I have been actively engaged in virtual instruction with my students.</i>					
<i>I understand how to manage virtual instruction.</i>					
<i>I have felt supported from the system.</i>					
<i>I have felt supported from my school.</i>					

**Student Questions**

Q: Please select the school you will attend for 2020-2021.

A: *(List each school in a dropdown menu or other selection option)*

Q: Please select the grade you will enter for 2020-2021.

A: *(List each grade in a dropdown menu or other selection option)*

Q: What can the system or your school do to better support your well-being?

A: *(Use text box)*

Q: How much would you agree or disagree with the following statements?

	Strongly Agree	Agree	Neither Agree Or Disagree	Disagree	Strongly Strongly Disagree
<i>I have felt supported.</i>					
<i>I have been able to easily access system resources.</i>					
<i>My teacher(s) have been accessible.</i>					
<i>I received regular, high-quality instruction from my teacher(s).</i>					
<i>My teacher(s) and school have kept me regularly informed about important updates.</i>					
<i>The system has kept me regularly informed about important updates.</i>					

