



Eva J Thomas, Principal
 Dr. Charles T. Lunsford School # 19
 465 Seward Street
 Rochester, New York 14608
 Phone: 585-328-7454
 Fax: 585-935-7419
Eva.Thomas@rcsdk12.org

"Together We are One"

Dr. Charles T. Lunsford School No. 19 School Parent Survey

A School Climate Survey for Parents and Guardians 2015-2016

This survey is an opportunity for you to help this school by sharing your opinions about it. Your opinions are important, and the school is interested in hearing them.

We are particularly interested in your thoughts on this school's efforts to promote academic success and well-being for every student, regardless of race, ethnicity, disability, or other characteristics.

If you have more than one child at this school, please think about the oldest of these children as you answer these questions.

Answer all the questions based on your experiences at this school only. Remember, we appreciate the honest opinions.

Your answers are completely private and unknown to others. Please check the box that corresponds with your answer

1.	I am a ...
	Parent of at least one child at this school
	Grandparent, other relative, and/or legal guardian of a child at this school
	Not applicable/ not sure, or decline to answer
2	Is your child in any of these programs (Mark all that pply)
	Special education Program or has had an Individual Education Plan (IEP)
	English Language Development (for children learning English)
	504 Plan
	Not applicable, not sure, or decline to answer

Vision

Our vision of excellence to SOAR success by:

- ◇ Caring about ourselves and others ◇ Caring about our environment ◇ Caring about learning
 ◇ Because Together we are ONE

3	How many years has your child been at this school?		
	Less than one year		
	1 to 2 years		
	3 to 5 years		
	6 to 10 years		
	Over 10 years		
	Not applicable, not sure, or decline to answer		
4	What is your race or ethnicity?		
	American Indian or Alaskan Native		
	Asian or Asian American		
	Black or African American (Not Hispanic)		
	Filipino		
	Hispanic or Latino		
	Native Hawaiian or Pacific Islander		
	White (Not Hispanic)		
	Two or more races/ ethnicities		
	Not applicable, not sure, or decline to answer		
5	Does one or more of your children receive free or reduced- price breakfast or lunch at this school?		
	No		
	Yes		
	Not applicable, not sure, or decline to answer		
6.	How are you related to your child		
	Biological parent		
	Adoptive parent		
	Stepparent		
	Foster parent		
	Grandparent		
	Other guardian		
7.	In what Grade is your child		
	Kindergarten		5 th grade
	1 st grade		6 th grade
	2 nd grade		7 th grade
	3 rd grade		8 th grade
	4 th grade		
8.	Does one or more of your children participate in this school's afterschool program (Report for your child that most frequently participates in afterschool program.)		
	No		Yes – 3 days a week
	Yes- 1 day a week		Yes- 4 days a week
	Yes- 2 days a week		Yes- 5 days a week

Please indicate how much you agree or disagree with the following statements about this school						
	This school....	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know/ NA
9	Promotes academic success for all students					
10	Treats all students with respect					
11	Clearly tells students in advance what will happen if they break school rules					
12	Encourages all student to enroll in challenging courses regardless of their race, ethnicity, or nationality					
13	Gives all student opportunities to “make a difference” by helping other people, the school, or the community					
14	Keeps me well informed about school activities					
15	Provides quality counseling or other ways to help students with social or emotional needs					
16	Is an inviting place for students to learn					
17	Allows input and welcomes parents’ contributions					
18	Provides students with healthy food choices					
19	Communicates the importance of respecting all cultural beliefs and practices					
20	Gives my child opportunities to participate in classroom activities					
21	Provides instructional materials that reflect my child’s culture, ethnicity, and identity					
22	Enforces school rules equally for my child and all students					
23	Provides quality activities that meet my child’s interests and talents, such as sports, clubs, and music					
24	Has quality programs for my child’s talents, gifts, or special needs					
25	Is a safe place for my child					
26	Promptly responds to my phone calls, messages, or e-mails					
27	Encourages me to be an active partner with the school in educating my child					

Based on your experience, how much of a problem at this school is						
		Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know/ NA
28	Student tobacco use (cigarette smoking and/or smokeless tobacco such as dip, chew, or snuff)?					
29	Student use of electronic cigarettes, e-cigarettes, or other vaping device such as e-hookah, hookah pens, vape pens?					
30	Student alcohol and drug use?					
31	Harassment or bullying of students?					
32	Physical fighting between students?					
33	Racial/ethnic conflict among students?					
34	Students not respecting staff?					
35	Gang-related activity?					
36	Weapons possession?					
37	Vandalism (including graffiti)?					
Please indicate how much you agree or disagree with the following statements about this school						
	This school is	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know/ NA
38	Actively seeks the input of parents before making important decisions					
39	Has clean and well-maintained facilities and properties					
40	Motivates students to learn					
41	Has a supportive learning environment for my child					
42	Has adults that really care about students					
Additional Questions						
What do I like best about this school?						
What's a good time to set up a parent workshop?		Mondays_____ Time: _____ Tuesdays_____ Time: _____ Wednesdays_____ Time: _____ Thursdays_____ Time: _____ Fridays_____ Time: _____ Saturdays_____ Time: _____ Sundays_____ Time: _____				