

KINDERGARTEN REGISTRATION SURVEY

1. Did the child you are registering for Kindergarten attend a preschool program?

- Yes, Preschool Program
- Yes, Day Care Program
- Yes, Frazier Pre-K Program
- Yes, Head Start
- Yes, Early Head Start
- No

2. Name of Preschool program or day care your child attended.

3. If your answer was yes, was the program.....

- Half Day Program
- Full Day Program
- N/A

4. How many years did your child attend the program you indicated?

- Attended Head Start as a three year old.
- Did not attend Preschool or Head Start at any time.
- ½ Year
- 2 years
- 3 years
- More than 3 years

5. Do you feel the program they attended prepared them for Kindergarten?

- Yes
- No
- N/A

6. Will your Kindergarten child attend our Readiness Program in the Summer?

Yes

No

7. If you do not plan on having your child attend, please indicate the reason why not.

I don't feel I know enough about the program.

I don't think it is necessary.

We have vacation plans.

Other (please specify)

8. Is there any other information you need about Kindergarten at this time?

9. Do you have any input for information you think would be helpful to parents for our Kindergarten orientation?

10. Would you be interested in participating in parent workshops during the school year that focus on how you can support your child's education at home?

Yes

No

11. If we offer parent workshops, when would you most likely be able to attend?

Mornings (9:00 AM – 11:00 AM)

Afternoons (1:00 PM – 3:00 PM)

After School (4:00 PM – 6:00 PM)