

Student Name	Date	
Parent Name	Parent Email/Phone	
Student Grade	Homeroom Teacher	

	Not at all	Slightly	Somewhat	Quite	Extremely
How concerned are you about your student's learning while their school building is closed?	concerned	concerned	concerned	concerned	concerned
How concerned are you about your student's social or emotional well-being during remote learning?					
How much time is your student participating in learning activities from their school?	No or almost no time	Not enough time	Just enough time	A little too much time	Far too much
What best describes your student's typical internet access?	No internet access	Intermittent access	Access with a smartphone only	Access is reliable, but slow	Reliable high-speed internet
Section 2: Special Education Services	5				
	Unsure	Strongly disagree	Disagree	Agree	Strongly Agree
In the past week, I have received the support I need from my student's school to help with schoolwork and IEP services.					
The lessons and activities my student is receiving help them to reach their IEP goals.					
My student is receiving appropriate behavioral supports and/or interventions during remote learning.					
The accommodations and/or modifications in my student's IEP have been appropriately adapted for					

## **Section 3: Additional Needs for Information or Support**

My family would like to receive additional information and/or support on the following topics (check all that apply):

Helping my student with:	Check all that apply	Helping my whole family with:	Check all that apply
Staying on task		Staying physically healthy and safe	
Managing time		Obtaining housing	
Getting organized		Obtaining food	
Communicating with teachers and peers		Staying emotionally healthy	
Working with teachers to get appropriate support		Supporting my student while working or caring for others at home	

Please share additional comments, questions, or concerns in the space below.					

## **Section 5: Scheduling Student Service**

Generally speaking, when is your child available to engage in remote learning or service provision?

	Morning (7am-10am)	Mid-Day (10am-1pm)	Afternoon (1pm-4pm)
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

## **Section 6: Request a Virtual or Phone Meeting**

Please (	contact me to schedule a virtual	or phone	meeting to	discuss my	y student's	progress,	ask q	uestions,
and/or	share my concerns.							

Yes	Nο

