## Flipside Parent/Guardian Survey

At Flipside, it is important to us that we offer a high quality program that has intentional outcomes and priorities along with opportunities for youth, parent and family involvement. Please help us understand from your perspective how we are doing in these areas. This survey is anonymous.

* In	dicates required question
1.	What school does your Flipside Participant attend? *
	Mark only one oval.
	American Indian Magnet
	Battle Creek Middle
	Capitol Hill
	Creative Arts Secondary
	E-STEM Middle
	Farnsworth Aerospace Upper
	Global Arts Upper
	Hazel Park Preparatory
	Hidden River Middle
	Highland Park Middle
	Hmong Language & Culture
	Humboldt High
	Murray Middle
	Open World
	Washington Technology
2.	Current Grade *
	Mark only one oval.
	4
	5
	<u> </u>
	8
	<u> </u>
	10
	<u>11</u>

3.	Which of the afterschool program outcomes are most important to you? *						
	Mark only one oval.						
	Increasing school grades.						
	Keeping children safe & supervised.						
	Increased sense of belonging at school.						
	Improved relationships with school staff.						
	Improved or expanded relationships with peers.						
	Improved health through fitness and nutrition activities.						
	New skill development (art, music, cooking, technology etc.)						
4.	Since attending the Flipside afterschool program in what area did you see the most improvement for your child?  Mark only one oval.  Academic Grades  School day attendance  Ability to make friends  Homework completion  School Day Behavior						
	Belief in their academic abilities.						
	Sense of belonging at school.						
	Positive attitude toward school.						
	I did not see any changes in my child's skills or behavior.						

j.	Please tell us about your CHILD'S experience with the Flipside Afterschool program? *							
	On a scale of 1-4, 4 strongly agree, 3 agree, 2 disagree, 1 strongly disagree  Mark only one oval per row.							
	-	4	3	2	1			
	My child feels welcome in the program.							
	Staff treat my child with respect.							
	Staff listen to what my child has to say.							
	At Flipside my child has learned a new skill.							
	Overall, Flipside has been a positive experience for my child.							

Mark only one oval per row. 3 2 1 Did you get enough communication regarding the program? Did you have opportunities to provide input on the program. Overall, Flipside has been a positive experience for my child. I would recommend this program to other parents.

6. Please tell us about YOUR experience with the Flipside Afterschool program? \*
On a scale of 1-4, 4 strongly agree, 3 agree, 2 disagree, 1 strongly disagree

7.	Which parent education topics would interest you? (check all that apply) *							
	Flipside is now producing a Podcast named: <u>Community Connect 625</u> . Our goal is to create audio content that is relevant and supportive for navigating the journey through the middle school years with pre-teen and teen youth. We want to hear from you what topics you would like to learn more about to improve your ability to support a middle school age youth today. Check all that apply.							
	Check all that apply.							
	Internet Safety & Cyberbullying							
	Friendships & Bullying							
	Mental Health							
	Anxiety & Depression							
	Talking About Race							
	Sexual Health							
	Gender Identity							
	Underage Drinking							
	Chemical Health & Substance Abuse							
	College Readiness & Exploration							
	Career Readiness & Exploration							
	Growth Mindset							
	Mindfulness & Meditation							
	Cooking Healthy with your Student							
	Getting Outside in Saint Paul							
	Financial Literacy							
	Other:							
8.	Is there anything you would like to share with us about how we can improve?							
9.	Do you have a story to share about how Flipside has positively impacted you and your student or your family? Please share:							

10.	Would you like to share more?						
	You can email us at flipside@spps.org or share below.						
Co	ontact Information						
	e would love to talk with you more about your thoughts and are your contact information. Thanks!	ideas for our Flipside afterschool program. Please					
Sna	are your contact information. Thanks:						
11	First and last name:						
11.	First and last name:						
12.	Post phone number to reach you at:						
12.	Best phone number to reach you at:						
13.	Post amail address to reach you at:						
13.	Best email address to reach you at:						
Th	ank you for completing this survey!						
If y	rou have questions, please email: flipside@spps.org.						

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