



# San Benito County SELPA

San Benito County Special Education Local Plan Area  
Dr. Susan Villa, SELPA Director

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## Community Advisory Committee (CAC) Parent Survey

This is a survey for parents of students receiving special education services. Your responses will help guide efforts to improve services and results for children and families. For each statement below, please select one of the following response choices, if it does not apply to your child just mark n/a. In responding to each statement, think about your experience and your child's experience with special education over the past year.

	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Very Strongly Agree
<b>SCHOOL'S EFFORT TO PARTNER WITH PARENTS</b>					
1.) I feel I am considered an equal partner with teachers and other professionals in planning my child's program.					
2.) I feel my concerns and recommendations were documented on the IEP.					
3.) I have been asked for my opinion about how well special education services are allowing my child to progress.					
4.) I feel school staff encourage me to participate in the decision-making process.					
5.) I feel school staff ensure that I have fully understood the Procedural Safeguards.					
6.) I feel special education staff communicate regularly with me regarding my child's progress on IEP goals.					
7.) Special education staff explain what options parents have if they disagree with a placement or service.					
8.) I am aware special education teachers make accommodations and modifications as indicated on my child's IEP.					
9.) I am aware general education & special education teachers work together to ensure that my child's IEP is being implemented.					
10.) I am aware the service providers deliver all the services documented on my child's IEP.					
<b>OPTIONAL</b>					
Name:					
School/District:					
Child's Disability:					
<b>COMMENTS</b>					

Please return to the school site office or to the San Benito County SELPA.