



Parent Survey

Child's name(s): _____

Classroom(s): _____

1. What are your interest or hobbies?

Mom: _____

Dad: _____

2. Do you have any suggestions for school fund raisers?

Mom: _____

Dad: _____

3. When is it best for you to volunteer your time?

Mom: _____

Dad: _____

4. Do you have any suggestions on how to enrich your child's school environment?

Mom: _____

Dad: _____

Please return this form in the folder marked PTO at either canopy. Thank you.