

# Parent Survey Questions and Responses (Pre & Post)

Completed at beginning and end of program. Questions in **bold**; responses options *italicized*

1. **How often do you take your child to a library, book mobile, reading center, or another place where books are available?** *Never; A Few Times A Year; Monthly; Twice A Month; Weekly*
2. **How often do you take your child to activities outside the home (for example, playgrounds, health or community fairs, schools events, outdoor concerts, museums, story times)?**  
*Never; A Few Times A Year; Monthly; Twice A Month; Weekly*
3. **In a typical WEEK, how many days does your child play with other children his or her same age? This includes going to daycare or preschool, but it does not include playing with brothers/sisters.** *Never; 1 Day; 2 Days; 3 Days; 4 Days; 5 Days; 6 Days; Every Day (7 Days)*
4. **In a typical WEEK, how many days do YOU do the following with your child?**
  - a. **Read aloud to your child:** *0 Days; 1 Day; 2 Days; 3 Days; 4 Days; 5 Days; 6 Days; Every Day (7 Days)*
  - b. **Tell your child stories:** *0 Days; 1 Day; 2 Days; 3 Days; 4 Days; 5 Days; 6 Days; Every Day (7 Days)*
  - c. **Play games with your child:** *0 Days; 1 Day; 2 Days; 3 Days; 4 Days; 5 Days; 6 Days; Every Day (7 Days)*
  - d. **Eat with your child:** *0 Days; 1 Day; 2 Days; 3 Days; 4 Days; 5 Days; 6 Days; Every Day (7 Days)*
  - e. **Follow a bedtime routine:** *0 Days; 1 Day; 2 Days; 3 Days; 4 Days; 5 Days; 6 Days; Every Day (7 Days)*
  - f. **Hold and cuddle your child:** *0 Days; 1 Day; 2 Days; 3 Days; 4 Days; 5 Days; 6 Days; Every Day (7 Days)*
  - g. **Practice counting numbers:** *0 Days; 1 Day; 2 Days; 3 Days; 4 Days; 5 Days; 6 Days; Every Day (7 Days)*
  - h. **Practice alphabet:** *0 Days; 1 Day; 2 Days; 3 Days; 4 Days; 5 Days; 6 Days; Every Day (7 Days)*
  - i. **Play rhyming games/recite rhymes:** *0 Days; 1 Day; 2 Days; 3 Days; 4 Days; 5 Days; 6 Days; Every Day (7 Days)*
  - j. **Practice name writing:** *0 Days; 1 Day; 2 Days; 3 Days; 4 Days; 5 Days; 6 Days; Every Day (7 Days)*
  - k. **Sing songs with your child:** *0 Days; 1 Day; 2 Days; 3 Days; 4 Days; 5 Days; 6 Days; Every Day (7 Days)*
5. **When you read to you child, how often do you do the following?**
  - a. **Hold the book upright in child's view, reading from left to right:** *Always; Sometimes; Never*
  - b. **Discuss the topic of book with child:** *Always; Sometimes; Never*
  - c. **Track words with finger as you read to child:** *Always; Sometimes; Never*
  - d. **Stop reading and ask child to tell you what is in a picture:** *Always; Sometimes; Never*
  - e. **Stop reading and point out letters and/or words:** *Always; Sometimes; Never*

6. **Read the following statements carefully. Using a scale of 1 to 7 (1 is low, 7 is High), please rate your current knowledge about the following:** (please circle the appropriate number)
  - a. **My knowledge of how my child is growing and developing:** 1; 2; 3; 4; 5; 6; 7
  - b. **My knowledge of what behavior is typical at this age:** 1; 2; 3; 4; 5; 6; 7
  - c. **My knowledge of how my child's brain is growing and developing:** 1; 2; 3; 4; 5; 6; 7
  
7. **Read the following statements carefully. Using a scale of 1 to 7 (1 is low, 7 is High), please rate your current confidence about the following:** (please circle the appropriate number)
  - a. **My confidence in myself as a parent:** 1; 2; 3; 4; 5; 6; 7
  - b. **My confidence in setting limits for my child:** 1; 2; 3; 4; 5; 6; 7
  - c. **My confidence that I can help my child learn at this age:** 1; 2; 3; 4; 5; 6; 7
  
8. **Read the following statements carefully. Using a scale of 1 to 7 (1 is low, 7 is High), please rate your current ability regarding the following:** (please circle the appropriate number)
  - a. **My ability to identify what my child needs:** 1; 2; 3; 4; 5; 6; 7
  - b. **My ability to respond effectively when my child is upset:** 1; 2; 3; 4; 5; 6; 7
  - c. **My ability to keep my child safe and healthy:** 1; 2; 3; 4; 5; 6; 7