



Parent Dyslexia Survey Questions

School Experience

What types of services does your child receive from school?

1. Section 504
2. Individual Education Program (IEP)

Do you believe your child's plan was followed?

1. Yes
2. No
3. Not Applicable
4. Additional Comments (Optional):

What level of confidence do you have in the school's ability to meet your child's learning needs?

1. Not confident at all
2. Slightly confident
3. Somewhat confident
4. Quite confident
5. Extremely confident

Does your child receive specific intervention for:

1. Reading
2. Writing
3. Spelling
4. Math
5. None of the Above
6. Additional Comments (Optional):

Does your child receive appropriate accommodations to be successful at school?

1. True
2. False
3. Additional Comments (Optional):



How aware are you about your child's academic progress and achievements?

1. To a great extent
2. Somewhat
3. Very little
4. Not at all

The school keeps me updated about the progress of my child.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree
5. Don't know

The school has regular Parent-meetings to encourage parent engagement and provide information pertaining to dyslexia.

1. Strongly agree
2. Agree
3. Disagree
4. Strongly disagree
5. Don't know

How satisfied are you with the following services offered by the school? (Answer options: Very dissatisfied, Dissatisfied, Satisfied, Very satisfied, Don't know)

1. Section 504
2. Special Education/Specially Designed Instruction

Follow up: Do you have suggestions to improve the dyslexia services the school provides to your child?

How would you describe your child's teacher(s) interaction with him or her?



Education Accessibility

Does your child receive assessments/tests that he/she is able to read and demonstrate mastery?

1. Yes
2. No
3. Additional Comments (Optional):

Does your child receive assignments that he/she is able to read and demonstrate mastery?

1. Yes
2. No
3. Additional Comments (Optional):

Did the school offer accessible texts or technology support for reading?

1. Yes
2. No
3. Additional Comments (Optional):

Was your child's teacher(s) willing to try different instructional techniques to meet your child's needs?

1. Yes
2. No
3. Additional Comments (Optional):