School Parent/Guardian Exit Survey

We at ______________ Catholic school are saddened that you have chosen not to re-enroll your child/children in our school. We do understand and respect your decision. The decision to transfer a child/children is never an easy one. So, please help us to understand the reason or reasons that you decided not to re-enroll your child/children in our school. Your comments and thoughts will help us to improve and address those issues directly. **All responses are confidential.** And please remember that should you decide to bring your child/children back to us, we will be here ready to welcome you back!

Sincerely,

Pastor                          Principal

From the following list, please choose the top four reasons for not re-enrolling your child/children in our school:

Cost____ Poor academics____ Appearance of facilities____
Poor communication___ Limited technology____ Lack of resources____
Non-certified teachers____ Child/children unhappy___ Lack of respect____
Class sizes too large___ Lack of Special Ed programs___ Lack of gifted student programs__
No before/after school programs___ Poor teacher/parent communication__ Too much fundraising____
No tuition assistance program____ Not treated with respect____ Too much discipline____
Not enough religion____ Afraid school will close____ Don’t feel welcome____
Child/children’s friends go elsewhere___ Pastor not supportive______ Staff doesn’t care____
Moved out of area: __________ Other ________________________________________________
What did you like best about us?

What changes would we need to accomplish in order for you to re-enroll your child/children in the school?

How would you rate our school to others in the area?

Equal to others:____ Better than others:____ Not as good:___

Did you children receive a good education at our school?

Do you want someone to call you to further discuss your answers? Yes__ No__

If yes, what is the best time to call you? __________________________

At what phone number can you be reached? __________________________

Name: __________________________________________________________________

Optional:

Teacher(s) names:______________________________ Grade(s)______________________________

Your name:______________________________ Child/children's name(s):________________________

Do you wish to be kept informed of events and activities at our school? Yes__ No__