

Appendix V: Parent Feedback



DO-IT Scholar Parent Feedback

The purpose of this survey is to determine how DO-IT activities have impacted your son or daughter. Participation is voluntary and will not affect his/her status in DO-IT. Please omit your name. If you have questions, contact [name], [phone].

- In which year did your son or daughter first attend a DO-IT Summer Study session?

____[2 years prior] ____[1 year prior] ____[current year]

- Indicate the degree to which each statement applies to your child where 1 = *not at all*, 5 = *a great deal*, and n/a = *not applicable*.

Participation in DO-IT activities has enhanced my child's

	Not at All		A Great Deal			Not Applicable
level of independence.	1	2	3	4	5	n/a
scholastic interest and participation.	1	2	3	4	5	n/a
interest in science, math, engineering.	1	2	3	4	5	n/a
interest in college.	1	2	3	4	5	n/a
perception of career options.	1	2	3	4	5	n/a
self-esteem.	1	2	3	4	5	n/a
social skills.	1	2	3	4	5	n/a
self advocacy skills.	1	2	3	4	5	n/a



Transition

- Indicate your impression of the value of the following specific activities in your child's development of social, academic, and career/employment skills, where 1 = *not valuable* at all, 5 = *extremely valuable*, and n/a = *not applicable*.

Not Valuable Extremely Valuable Not Applicable

Computer/Internet activities helped him/her develop

social skills	1	2	3	4	5	n/a
academic skills	1	2	3	4	5	n/a
career/employment skills	1	2	3	4	5	n/a

Summer Study at UW helped him/her develop

social skills	1	2	3	4	5	n/a
academic skills	1	2	3	4	5	n/a
career/employment skills	1	2	3	4	5	n/a

What is the most noticeable impact of DO-IT activities on your son or daughter?

What other activities do you recommend that DO-IT undertake (e.g., parent support group, junior high outreach)?

Additional comments:

Thank you for your participation.