

Name (optional): _____
Age of child or children attending the program: _____
Phone number (optional): _____

Program Survey

(Please feel free to use the back to add any additional comments)

What are the reasons why you are choosing to enroll your child in Cornerstone Kids for the 2010-2011 school year?

Drop off and pick up procedures work well.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
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Your child had a positive experience at Cornerstone Kids.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
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You are satisfied with the activities and lessons in your child's classes.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
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The building and classrooms are well maintained.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
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You recommend this program to other parents.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
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You are completely satisfied with our program.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
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Cornerstone administrators and teachers communicate with you adequately.

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
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Please list three aspects of the Cornerstone Kids program that you liked.

Please list three areas that you would like to see improvement.