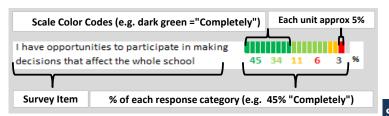
### **ORIOLE PARK**

# MY VOICE, MY SCHOOL Parent/Guardian Survey 2019 Report

#### **HOW TO READ THIS REPORT**



## **RESPONSE RATE**

My School's Response Rate

- Results not reported for schools with a response rate less than 25%.
- · Response rate estimated by dividing the school's April 2019 enrollment by total number of children parents report having at the school.

## SCHOOL RECOMMENDATION

How likely are parents to recommend this school, on a scale of 1 to 10?

### My School's Average Score

### SCHOOL COMMUNITY

### My School's Score

How much do you agree with the following statements about your child's school?

COMPLETELY MOSTLY A LITTLE NOT AT ALL NO RESPONSE

The office staff greets visitors warmly

The support staff (custodians, clerks, cafeteria staff, security) seem to care about the students

The school invites me to meetings and special school events

I know what the important issues are in the school

I have opportunities to participate in making decisions that affect the whole school community

### PARENT-TEACHER PARTNERSHIP

# My School's Score

How much do you agree with the following statements about your child's

SCALE: COMPLETELY

MOSTLY

A LITTLE

NOT AT ALL

NO RESPONSE

### The teacher(s) respects me

I am comfortable sharing my concerns with this teacher(s)

My child will be more successful as an adult because of this teacher(s)

The teacher(s) lets me know what they are working

The teacher(s) contacts me personally to discuss my child (strengths, weaknesses, etc.)

The teacher(s) provides suggestions for how to support my child in school

School ID - 610105 Network - Network 1

#### **MEASURE SCORES**

 Scores are calculated by aggregating the response items in that measure, giving more weight to those reponse items that are harder to agree with.

• Because schools are compared to other schools in the district, performance may be labeled "weak" despite having a majority of positive responses to individual items.

#### SCORE SCALE

80-100 VERY STRONG

STRONG

NEUTRAL 20-39 WEAK

0-19 VERY WEAK

## **SURVEYED PARENT RACE**

AFRICAN AMERICAN/BLACK

LATIN X

WHITE

**ASIAN** 

MULTIRACIAL

OTHER/NOT SPECIFIED

### **SCHOOL SAFETY**

How much do you agree with the following statements about your child's

school? SCALE:

< 25%

COMPLETELY

MOSTLY

A LITTLE

NOT AT ALL

NO RESPONSE

My child is safe going to and from school

My child is safe at school

My child feels like they are part of a community at

My child's social and emotional needs are met at

this school

Bullying is NOT a problem at this school

### **QUALITY OF FACILITIES**

### My School's Score

How would you rate the quality of the following facilities at your **school**?

EXCELLENT SATISFACTORY

POOR

DON'T KNOW/DNA NO RESPONSE

Your child's classroom

Access to technology

Gym

Food services/nutritious meals

Overall cleanliness of the school

# **ADDITIONAL ITEMS**

How much do you agree with the following statements?

COMPLETELY

MOSTLY

A LITTLE

NOT AT ALL

NO RESPONSE

The school's policies and programs reflect the

diversity of the families in the community Students and parents are treated fairly regardless of social or cultural background

There are many different ways I can be involved with the school

