

## Jackson Intermediate School

	<b>Strongly Agree</b>	<b>Agree</b>	<b>Somewhat Agree</b>	<b>Neutral</b>	<b>Somewhat Disagree</b>	<b>Disagree</b>	<b>Strongly Disagree</b>
<b>The school provides my child with all services documented on the IEP.</b>							
<b>The teachers understand my child's specific needs.</b>		1/1					
<b>The teachers understand their roles in implementing the IEP.</b>							
<b>General education teachers implement accommodations as indicated on the IEP.</b>							
<b>Special education teachers implement accommodations as indicated on the IEP.</b>							
<b>The school is a positive and welcoming place for my child.</b>		1/1					
<b>The principal supports special education services for my child.</b>							
<b>I am considered an equal partner with teachers and other professionals in planning my child's program.</b>	1/1						
<b>The school communicates regularly with me regarding my child's IEP progress.</b>							
<b>My concerns and recommendations are considered by the team in the development of the IEP.</b>							
<b>My input and opinions are valued and respected.</b>	1/1						

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	<b>Very Satisfied</b>	<b>Satisfied</b>	<b>Somewhat Satisfied</b>	<b>Neutral</b>	<b>Somewhat Dissatisfied</b>	<b>Dissatisfied</b>	<b>Very Dissatisfied</b>
<b>My overall satisfaction with the special education services my child receives.</b>							

### **SPECIFIC COMMENTS:**

**Please describe what you like best about the school/school district you are reviewing:**

**Please describe what you like least about the school/school district you are reviewing:**

I would like to see more Autism awareness.

**What changes would you like to see made at the school/school district you are reviewing:**

**What specific problems, if any, have you encountered with this school/school district:**

**Is there anything else you would like other parents to know about this school/school district:**