

State Evaluation of Michigan 21st Century Community Learning Centers 2021 Family Survey (For Families with K-12th Grade Children)

This is a survey about your child's experiences with AFTERSCHOOL. Researchers from Michigan State University conduct this survey. Questions can be directed to Dr. Jamie Wu at wuhengch@msu.edu. Your answers will be kept private – no one in the program or your family will know what you answered.

What is your relationship to the child?

Mother/mother figure	Father/father figure	Grandmother	Grandfather	Other
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please identify your race/ethnicity (check all that apply):

<input type="radio"/> Black or African American	<input type="radio"/> White or Caucasian	<input type="radio"/> Hispanic or Latinx
<input type="radio"/> Asian or Asian American	<input type="radio"/> American Indian or Alaskan Native	<input type="radio"/> Native Hawaiian or other Pacific Islander
<input type="radio"/> Arab or Middle Eastern	<input type="radio"/> Bi-Racial or Multi-Racial	<input type="radio"/> Prefer not to answer

Other

What grade is your child in?

K	1	2	3	4	5	6	7	8	9	10	11	12
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

	Yes	No
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Does your child receive extra help in speaking or understanding English at school?	<input type="radio"/>	<input type="radio"/>
Does your child have an IEP (Individualized education program)?	<input type="radio"/>	<input type="radio"/>

How often does your child attend this afterschool program (Online or In-Person)?

A few times a week	Once a week	Bi-weekly	Monthly	On-and-off/Not very consistent
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What is your home zip code?

«GranteeID» «Grantee», «GranteeID»

«SiteID» «Site», «SiteID»

Your child participated in THIS PROGRAM during the COVID-19 pandemic because...	Strongly Agree				Strongly Disagree	
	Strongly Agree	Agree	Neutral	Disagree	Disagree	Strongly Disagree
My child needed the academic help and learning opportunities it provided	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child needed the support and interaction it provided	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults in our family have to work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

During the COVID-19 pandemic, how helpful has THIS PROGRAM been to your child?	Strongly Agree					I don't know/ My child didn't do it
	Extremely helpful	Very helpful	Moderately helpful	Slightly helpful	Not at all helpful	
Connecting with friends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling comfortable with program adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having an adult to help my child	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Receiving academic help	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Having activity packets or boxes from this program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Watching the PRE-RECORDED activities this program put online	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attending this program's LIVE online sessions (e.g., Zoom, Google Meet)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other helpful things						

How true are the following statements?	All the time	Sometimes	A few times	Not at all
Our Internet at home can easily load videos	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child has a computer or device to use at home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What would you miss if your child did not have this program?

Is there anything else you would like to share with us?

Thank you for completing the survey. You may return it to the program or take a picture of the pages and send it to ezhelp@msu.edu