

# *School Success Profile for Parents*



## **Instructions**

- Read each question carefully.
- Use a Number 2 lead pencil.
- Place a check  in the square that matches your answer.
- Erase completely any answer you wish to change.

School of Social Work  
The University of North Carolina at Chapel Hill

Serial Number: \_\_\_\_\_

## Please Read Carefully

### **What is the School Success Profile?**

The School Success Profile (SSP) is a survey used to assess the factors that affect students' success at school. Information is collected from students, their parents/guardians, and their teachers. Students complete the survey on a computer at school. Parents and teachers fill out a paper questionnaire.

### **Who is conducting this survey?**

Dr. Gary L. Bowen, Kenan Distinguished Professor and Director of the School Success Profile Project, School of Social Work, The University of North Carolina at Chapel Hill, is coordinating the administration of the SSP at this school.

### **What do you want me to do?**

We want you to complete the parent version of the SSP. It should take you no more than 30 minutes to complete. This is not a test. There are no right or wrong answers. Please try to answer every question. By completing and returning the SSP Parent Survey you are providing active consent to participate.

### **Must I participate?**

No. Your participation is voluntary. However, we encourage your participation. Your views and opinions are very important to understanding the general consensus of views and opinions of parents and guardians.

### **Who will see my answers?**

Only the project staff at The University of North Carolina at Chapel Hill will see your actual responses to each individual item. Your answers will be combined with the answers from other parents to produce a summary group profile. You will have access to the summary results.

### **Will you know who I am?**

Yes. The serial number at the front page links this survey to you. This serves three functions. First, we are able to identify the parents/guardians who returned the survey for purposes of follow-up from those who did not. Second, we are able to link your responses to those of your child who has the same serial number. Third, we are interested in monitoring changes in the views and opinions of parents during the school year—you will be asked to complete the SSP again in spring 2008.

### **Are there any special instructions?**

Yes, it is important that you follow the directions for each question. Please indicate your answer to each question by marking the response that best represents your answer. You may change your response by erasing your answer and selecting one of the other choices. Please answer the questions in the order in which they are presented.

### **Whom do I contact if I have questions?**

Please contact Dr. Gary Bowen by phone (919-962-6542) or email ([glbowen@email.unc.edu](mailto:glbowen@email.unc.edu)).

*Thank you!*

Produced by Dr. Gary L. Bowen, 2007, School of Social Work, The University of North Carolina at Chapel Hill.

## Family-Professional Partnership Scale

**1. Please indicate the extent to which you agree (strongly disagree to strongly agree) that each statement is descriptive of the faculty and staff at the school your child attends.**

	STRONGLY DISAGREE	DISAGREE	SLIGHTLY DISAGREE	SLIGHTLY AGREE	AGREE	STRONGLY AGREE
<b>Faculty and staff at my child's school . . .</b>						
a. Have the skills to help my child succeed at school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Assist me in gaining skills or information that I need to help my child.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Provide services that meet the individual needs of my child.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Are willing to speak up for my child when working with other professionals outside the school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Let me know about the good things my child does at school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Keep my child safe when he/she is in their care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Treat my child with dignity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Build on my child's strengths.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Value my opinions about my child's needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Are honest, even when there is bad news to give.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Are available when I need them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Use words that I understand.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Protect my family's privacy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Show respect for my family's values and beliefs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Pay attention to what I have to say.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Are people I can depend on and trust.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Are friendly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. Encourage my involvement and participation as a school volunteer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s. Work with me as a partner in the education of my child.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t. Welcome and appreciate my ideas and suggestions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Parent Involvement Scale

**2. Please indicate the extent to which you agree (strongly disagree to strongly agree) that each statement is descriptive of your interaction and involvement with your child.**

	STRONGLY DISAGREE	DISAGREE	SLIGHTLY DISAGREE	SLIGHTLY AGREE	AGREE	STRONGLY AGREE
<b>In my interactions and involvement with my child, I . . .</b>						
a. Make sure my child knows of my unconditional love.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Say or do things to make my child feel appreciated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Tell my child when he/she does a good job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Say or do things to make my child feel special.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Spend free time with my child.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Ask my child about school activities or events.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Ask my child about things he/she studied in class.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Talk with my child about current events or politics.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Check on the status of my child's homework.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Talk with my child about his/her plans for the future.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Talk with my child about work/career choices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Encourage my child to read (apart from homework).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Attend school events or informational sessions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Encourage my child to do well in school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Encourage my child to participate in school activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Help my child get required books or school supplies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Praise and reward my child for working hard at school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. Offer homework help to my child.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s. Let my child know I expect his/her best effort at school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
t. Spend time with my child just laughing or playing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
u. Spend time together doing things my child enjoys.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Limit amount of time my child spends watching TV.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
w. Monitor my child's whereabouts after school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
x. Try to get to know my child's friends.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
y. Try to get to know the parents of my child's friends.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Parent-School Involvement

**3. Please indicate your level of agreement with the following statement:**

*Overall, I am satisfied with the performance of the faculty and staff at my child's school in working with me as a parent.*

- Strongly Disagree
- Disagree
- Slightly Disagree
- Slightly Agree
- Agree
- Strongly Agree

**4. Please indicate your level of agreement with the following statement:**

*Overall, I am satisfied with my performance as a parent in working with the faculty and staff at my child's school.*

- Strongly Disagree
- Disagree
- Slightly Disagree
- Slightly Agree
- Agree
- Strongly Agree

**5. Please indicate your level of agreement with the following statement:**

*The faculty and staff at my child's school are committed to helping my child succeed in school.*

- Strongly Disagree
- Disagree
- Slightly Disagree
- Slightly Agree
- Agree
- Strongly Agree

**6. Please indicate your level of agreement with the following statement:**

*I can make a positive difference in my child's ability to succeed at this school.*

- Strongly Disagree
- Disagree
- Slightly Disagree
- Slightly Agree
- Agree
- Strongly Agree

**7. Please indicate your level of agreement with the following statement:**

*My child's teachers or other school staff would contact me if they had a concern or question about my child's school behavior or progress.*

- Strongly Disagree
- Disagree
- Slightly Disagree
- Slightly Agree
- Agree
- Strongly Agree

**8. Please indicate your level of agreement with the following statement:**

*I would contact my child's teachers or other school staff if I had a concern or question about my child's school behavior or progress.*

- Strongly Disagree
- Disagree
- Slightly Disagree
- Slightly Agree
- Agree
- Strongly Agree

## School Outcome Profile

**9. Please indicate your level of agreement with the following statement:**

*I am satisfied with the performance of the faculty and staff at this school in successfully addressing the educational needs of my child?*

- Strongly Disagree
- Disagree
- Slightly Disagree
- Slightly Agree
- Agree
- Strongly Agree

**10. Please indicate your level of agreement with the following statement:**

*Overall, I am satisfied with this school as a school for my child?*

- Strongly Disagree
- Disagree
- Slightly Disagree
- Slightly Agree
- Agree
- Strongly Agree

## About Your Child at Home

**11. On most school nights (Sunday-Thursday), how much time does your child spend studying or doing homework?**

- None
- Less than one hour
- About 1 hour
- About 2 hours
- About 3 hours
- About 4 hours
- More than 4 hours

**12. How much time does your child spend each week on chores (such as helping with meals, looking after younger children, taking care of pets, or cleaning)?**

- None
- Less than one hour
- About 1 hour
- About 2 hours
- About 3 hours
- About 4 hours
- More than 4 hours

## About You

**13. I am the child's:**

- Mother/Stepmother
- Father/Stepfather
- Grandparent
- Other Relative
- Foster Parent
- Other

**14. What is your child's current grade?**

- 5<sup>th</sup> Grade or Earlier Grade
- 6<sup>th</sup> Grade
- 7<sup>th</sup> Grade
- 8<sup>th</sup> Grade
- 9<sup>th</sup> Grade
- 10<sup>th</sup> Grade
- 11<sup>th</sup> Grade
- 12<sup>th</sup> Grade

## *Thank You!*

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