North Fork Local Title 1 Professional Staff Survey

1. My students participated in Title I:

_____Reading _____Intervention _____Other

2. My students are in the following grade (check grade levels that apply if you are a special area teacher):

___K ___1 ___2 ___3 ___4 ___5

3. Please rank order (1 being the highest) the following grade levels in which you believe students need supplemental instruction:

___K ___1 ___2 ___3 ___4 ___5

4. Please rank order the following school subject areas in which you believe students need supplemental instruction:

___reading ___language arts ___math ___other

5. Mark your preferred method of Title I instruction:

___small group ___inclusion ___combination ___reading groups

6. Do you feel that current Title 1 services have helped your students?

___very helpful ___somewhat helpful ___not much help

Over

7. In your opinion, what are the strongest features of the Title I program?

_____

_____

_____

_____

_____

8. In your opinion, what improvements could be made to the Title I program?

_____

_____

_____

_____

_____

****Please return to any Title I teacher's mailbox. Thanks!