

# North Coast Tutoring Services

## End of School Year Survey for Families

*This survey was designed so you can reflect on your student's academic progress and create a plan of action for the summer and upcoming school year. For your own reference, please be as thorough and specific as possible.*

Today's Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ For School Year Ending: \_\_\_\_\_

Student's Name: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Teachers and Subjects: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Did your student pass the grade?     YES     NO    Final Grade: \_\_\_\_\_

If NO, explain why: \_\_\_\_\_

\_\_\_\_\_

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What new ACADEMIC skills did your student gain this year? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What new SOCIAL skills did your student gain this year? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Favorite Subject(s) and Why: \_\_\_\_\_

\_\_\_\_\_

**Favorite Project(s) and Why:** \_\_\_\_\_

\_\_\_\_\_

**List any extracurricular activities your student chose to participate in:** \_\_\_\_\_

\_\_\_\_\_

**List any AWARDS or ACHIEVEMENTS your student received:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**List any POSITIVE FEEDBACK from your student's teachers:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**Where did your student struggle this year ACADEMICALLY?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Where did your student struggle this year SOCIALLY?** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Least Favorite Subject(s) and Why:** \_\_\_\_\_

\_\_\_\_\_

**Least Favorite Project(s) and Why:** \_\_\_\_\_

\_\_\_\_\_

List any DISCIPLINARY ACTION your student received: \_\_\_\_\_

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Do you think this was fair? If not, why? \_\_\_\_\_

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List any CONSTRUCTIVE CRITICISM from your student's teachers: \_\_\_\_\_

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Did your student receive an appropriate amount of homework?       YES       NO

Why or why not? \_\_\_\_\_

Did your student turn in homework on time?       YES       NO

Did your student have difficulty with organizational skills?       YES       NO

How did your student feel about his/her teachers? \_\_\_\_\_

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How did YOU feel about your student's teachers? \_\_\_\_\_

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If YOU could change one thing about this past school year, what would you do differently?

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**Summer Reading Assignment:**

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**Plans/Goals for Summer Reading:**

Read \_\_\_\_\_ pages a day / week.      Finish reading by: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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**Academic Goals for Summer Vacation:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Social Goals for Summer Vacation:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Extracurricular Activities for Next School Year:**

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**Additional Plans for Next School Year:** \_\_\_\_\_

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Completed by: \_\_\_\_\_      \_\_\_\_\_  
*Signature*      *Date*