

SUMMARY

GEAR UP PARENT ACTIVITY EVALUATION

FACE Coordinator: Complete this summary of the parent evaluations you receive at each event. Return the summary only to the GEAR UP office.

Event:	School:
Date:	Location:
FACE Coordinator:	Month:

Type of Event: (to be determined by GEAR UP staff)	<input type="radio"/> Counseling/Advising <input type="radio"/> College Visit	<input type="radio"/> Family Event <input type="radio"/> College Planning/Financial Aid
How would you rate this event?	<input type="radio"/> Very helpful <input type="radio"/> Somewhat helpful <input type="radio"/> Average	<input type="radio"/> Barely helpful <input type="radio"/> Not at all helpful

Comments/Suggestions:

Check one: _____ # completed this survey before _____ # have not completed this survey before

Indicate totals:

- 1. Has anyone from your child's school or GEAR UP ever spoken with you about college entrance requirements?
_____ Yes
_____ No

- 2. Has anyone from your school or GEAR UP ever spoken with you about the availability of financial aid to help you pay for college?
_____ Yes
_____ No

- 3. Have you talked with your child about attending college?
_____ Yes
_____ No

- 4. What is the highest level of education that you think your child will achieve?
_____ High school or less
_____ Some college but less than a 4-year college degree
_____ 4-year college degree or higher

- 5. Do you think that your child could afford to attend a public 4-year college using financial aid, scholarships, and your family's resources?
_____ Definitely
_____ Probably
_____ Not sure
_____ Probably not
_____ Definitely not

- 6. Has this event given you knowledge about effective parenting strategies?
_____ Yes
_____ No

- 7. Has this event provided you with personal enrichment and/or knowledge?
_____ Yes
_____ No

