

GT Survey

* Required

1. Please put your student's name. *

2. Please look at your child's academic goal(s). How would you prefer to move forward with this goal during online learning? *

Mark only one oval.

- Continue with the goal as written
- "Pause" the goal until next year, giving Audrey a summary of work completed so far
- Do alternative work that fulfill's my child's current needs
- Other: _____

3. If your child's goal requires materials/equipment, do you have this equipment? If it is still at the school, can we arrange a pickup/delivery time? *

4. Please look at your child's affective goal. How would you prefer to move forward with this goal during online learning? *

Mark only one oval.

- Continue with the goal as written
- "Pause" the goal until next year
- Focus on alternative needs
- Other: _____

5. Are there any resources you would like me to find for you at this point? (EG online math, science experiments, challenging reading, emotional/social support, etc) *

6. Would you like me to set up virtual meetings for parents and/or students to check in and ask questions? *

Mark only one oval.

- Yes
- No

- 7. If your answer to the previous questions was "Yes," please specify weekdays & times that would work for you for a meeting.

- 8. What is the #1 thing you would like me to help you with? This might be working on your child's goal(s), finding alternative resources, or simply putting aside the ALP at this time so that your family can do what's best for you. *

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