

PARENT/GUARDIAN FEEDBACK FORM

Dear Parent/Guardian,

Please take a moment to answer the questions below about your child’s advisor. Your input is valuable to us as we reflect on our practices as advisors. You do not need to note your child’s name, but please indicate the name of the advisor about whom you are giving feedback. Thank you.

Advisor _____

Observation	Yes	No	Comments
1 Do you feel you can contact your child’s advisor with any questions or concerns you have?			
2 Do you feel your child’s advisor has kept you informed of your child’s academic progress?			
3 Do you feel your child’s advisor has kept you informed of other issues related to your child’s school experience?			
4 Have you been invited to participate in the PLP process with your child by his/her advisor?			
5 Do you feel comfortable sharing information about your child that may impact his/her school experience with his/her advisor?			
6 Do you feel your child has developed a beneficial relationship with his/her advisor?			
7 Do you feel your child’s advisor is serving as his/her advocate in the school?			
8 Do you feel your child’s advisor sufficiently monitors his/her academic progress and advises your child and you accordingly?			
9 Do you feel your child’s advisor satisfactorily guides the advisory group toward meeting the stated purpose of the advisory program?			
10 Other comments?			

Source: Serving Smaller Learning Communities Topical Institute Design Team