

Tell us how to get in touch with you (optional):

Name \_\_\_\_\_  
E-mail \_\_\_\_\_  
Phone \_\_\_\_\_  
Child/Grade \_\_\_\_\_

Bear Creek Middle School  
7415 Herndon Rd  
Fairburn, GA 30213  
470-254-6080/470-254-3584 fax  
Dr. Anthony Newbold  
newbolda@fultonschools.org

## PARENT FEEDBACK FORM 2015-2016

Please share your input about the following FY16 Title I parental involvement documents and our overall school parental involvement program. Your feedback is essential in helping us to build parent capacity and increase parent engagement at *Bear Creek*. We welcome all of your comments and suggestions. Please enter your comments in the spaces provided. If you have no comments at this time, please indicate that in the space also. Thank you

How did you hear about the parent input meeting?

☐ Parent Liaison      ☐ PTA/PTSA Meeting      ☐ School Website  
☐ Social Media      ☐ School Messenger      ☐ Other \_\_\_\_\_

**School Parental Involvement Plan:** (e.g. How can the school effectively communicate with parents? What type of workshops would you like for the school to provide?, etc.)

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**School-Parent Compact:** (e.g. how can the school support you in assisting your child at home achieve the school and district goals? In what core content area does your child need the most help? etc.)

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**Parental Involvement Budget 1% set-aside:** (e.g. If available, how would like to see these funds spent? What resources do you need available in the parent resource center to help your child at home?)

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**Overall Parental Involvement Program**

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☐ Yes, I am interested in serving on the 2015-2016 Title I Committee.

Please return to your Parent Liaison, *Ms. Wilson*, [wilsononly@fultonschools.org](mailto:wilsononly@fultonschools.org) or by calling 470-254-6080 ext. 48296

Thank you, again, for your time.