

Lubavitch Early Childhood  
Living and Learning Center  
 1778 Ford Parkway St. Paul, MN 55116  
 (651) 698-0556 (651) 698-2460

## Parent Evaluation of Child Care Program

Date:

Please check the age group that your child falls in

Infant     Toddler     Preschooler     Schoolager

Is there open communication

a) Between you and the staff  Yes  No

b) Between you and the director  Yes  No

If not, how do you feel communication might be improved?

Does your child enjoy coming to the program?  Yes  No

If not, how could we help make this a more positive experience?

Is the staff accessible to parents?  Yes  No

Is the director accessible to parents?  Yes  No

Is your child greeted by staff in the morning?  Yes  No

Is your child said good-bye to at the end of the day?  Yes  No

Does the staff appear to enjoy what they are doing?  Yes  No

Does the director appear to enjoy what she’s doing?  Yes  No

Please circle the number that indicates the degree of comfort you generally feel when you leave your child:

Apprehensive    1    2    3    4    5    Very comfortable

Is there any way we can make the transition easier for you?

Is your child well supervised?  Yes  No

*Integrating tradition and the wonders of the world we live in.*

Overall, how would you rate the care that we provide your child? Circle one:

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1	2	3	4	5
<b>Needs Improvement</b>		<b>Meets our needs</b>		<b>Wonderful</b>

1. What could we do to improve our program?

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2. What could we do to improve our program?

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3. Is there anything you could do to improve the care your child receives in our program?

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4. Would you recommend our program to other parents? Why or why not?

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5. Do you have any other comments?

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*Optional:*

Your name: \_\_\_\_\_

Your child’s name: \_\_\_\_\_

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