



LEARNING CENTER  
P.O. Box 465  
Rockport, Texas 78381

All Children  
Beginning Learning  
in a  
Christian Environment

Dear Parents:

We are continually making efforts to improve our program, in order that we may offer the highest quality of service to your child. In order to help us in this respect, please complete the following questionnaire and return it to us. We assure you that your comments will be taken into careful consideration in planning our future course.

1. Do you read the newsletter we send home? Yes \_\_\_ No \_\_\_

2. Do you find them of value? Yes \_\_\_ No \_\_\_

Please comment \_\_\_\_\_

3. Have you received periodic communication from your child's teacher? Yes \_\_\_ No \_\_\_

Comment: \_\_\_\_\_

4. Do you feel the school safeguards your child's health? Yes \_\_\_ No \_\_\_

Comment: \_\_\_\_\_

5. Have you been appropriately notified of minor injuries which your child has received at school? Yes \_\_\_ No \_\_\_

Comment: \_\_\_\_\_

6. Have your educational expectations been met? Yes \_\_\_ No \_\_\_

Comment: \_\_\_\_\_

7. Are the school policies as outlined to you at the time of enrollment consistent with what is actually practiced? Yes \_\_\_ No \_\_\_

Comment: \_\_\_\_\_

8. Would you recommend this school to your friends? Yes \_\_\_ No \_\_\_

Comment: \_\_\_\_\_

9. Additional Comments:

\_\_\_\_\_  
\_\_\_\_\_