**Weekly Check-In**

*Please take a moment to fill out this survey and let me know how distance learning is going in your home. I will use the information to guide my future plans. Thank you!*

1. 1. What word or phrase would you use to describe your child’s feelings towards virtual learning?

 Click or tap here to enter text.

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 Click or tap here to enter text.

1. What are your feelings on the amount of work assigned to your child this week?
	1. My child didn’t have enough to do.
	2. My child had just the right amount.
	3. My child struggled a bit to complete the assignments.
	4. My child had way too much work.

Please add comments if desired.

Click or tap here to enter text.

1. What activity went the best this week? Why?

Click or tap here to enter text.

1. What activity went the worst this week? Why?

Click or tap here to enter text.

1. Is there anything I can do to better support you and your child?

Please let me know if you would like a phone call to discuss this support.

Click or tap here to enter text.

1. Is there anything else you want me to know?

Click or tap here to enter text.