Parent Education Needs Assessment

Please fill out and email to: bfoland@sccapinc.org

Or mail to: Schoharie County Community Action Program
            Attn: Child Care Resource and Referral Center
            795 East Main Street, Suite 5, Cobleskill, NY 12043

Would you like information on parenting strategies?  Yes  No
If yes, please provide your contact information:

Name: ........................................................................
Address: ......................................................................
Email: ___________________________ Phone: ______________________

How do you currently get your parenting information/advice/knowledge regarding parenting issues?

_____ Doctors’ office
_____ Family members
_____ Internet
_____ Newspapers
_____ Magazines
_____ Other local agencies (please identify which agencies):

_____ Other (please identify where):

Topics that interest you:

_____ Recognizing and choosing high-quality child care
_____ Promoting positive parent and child care provider relationships
_____ Addressing children’s behavioral issues
_____ Children’s social and emotional development
_____ Age-appropriate activities
_____ Developing children’s language and literacy skills
_____ Children’s health and safety
_____ Positive parenting
Child Care Issues:

- Federal policies
- State policies
- Local policies
- Availability of child care
- Accessibility of child care
- Quality of child care
- Economic impact of child care
- Cost of child care

Other Topics: ________________________________

Please rank your preferred delivery method: (1 = first choice, 8 = last choice)

- One time workshop
- Course work (multiple sessions)
- Mini workshops (15-20 minutes)
- Online workshop
- Online course
- Parent newsletter
  - E-mail
  - US postal service
- Website
- Brochures/fliers

What days and times would you prefer? (Please circle)

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<th>Day of the Week</th>
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What months are best for you? (Please circle)

- January
- February
- March
- April
- May
- June
- July
- August
- September
- October
- November
- December

What location is best for you?

Near Home-town: ________________________________
Near Work-town: ________________________________
Near Work – employer & town: ________________________________

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Child Care Resource and Referral Center

Phone: (518) 234-2568
Toll Free: (866) 849-2402
Fax: (518) 237-3507
Website: www.sccapinc.org