All Guests

Our schools are dedicated to supporting all of our students. It's important that we get the opportunity to connect with the community to improve services for families and students that we serve. Your personal information will be kept confidential.

Please mark all that apply to you. How are you involved with your school district?

☐ Student ☐ Parent or Guardian of a student ☐ School Volunteer ☐ Licensed Staff ☐ Classified Staff
☐ Tribal member ☐ Community Based Organization ☐ Community Leader ☐ Student Program Coordinator
☐ Business Community ☐ Local Workforce/Chamber of Commerce ☐ Community College Staff ☐ University Staff
☐ Other:

Please mark all that apply. What is your race/ethnicity?

☐ American Indian/Alaska Native ☐ Asian
☐ Native Hawaiian or other Pacific Islander ☐ White
☐ Black or African American ☐ Prefer not to say
☐ Hispanic or Latino/Latina/Latinx
☐ I identify differently:

Do you identify as LGBTQ2SIA+?

☐ Yes ☐ Prefer not to say
☐ No
☐ I identify differently: _____

Please mark all that apply to you.

☐ I arrived in the USA as a refugee or asylum seeker
☐ I am an immigrant to the USA
☐ My parents were immigrants to the USA
☐ I was born in the USA and/or USA Territory
☐ I am an indigenous person.
☐ Prefer not to say.
☐ Other:

Is English your first language?

☐ Yes ☐ Prefer not to say
☐ No

Do you have a disability?

☐ Yes ☐ Prefer not to say
☐ No

If you are an immigrant, please answer the following question.

Please mark only one. How long have you lived in the USA?
☐ Less than 8 months
☐ 8 months to less than 3 years
☐ 3 years to 15 years
☐ More than 15 years
☐ Not applicable

Please mark all that apply. Which of the following do you have experience with?

☐ Foster care
☐ Homelessness
☐ Free or reduced school meals, food stamps or food assistance
☐ Jail, prison, juvenile detention or other correctional facilities
☐ Moving to pursue work as a migratory agricultural worker or fisher
☐ None of the above
☐ Prefer not to say

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Parents or Guardians of Students Only

Please complete the other side first.
Only complete this side if you indicated you are the parent or guardian of a student.

Please mark all that apply. I am the parent or guardian of one or more students who identify as:

- ☐ American Indian/Alaska Native
- ☐ Native Hawaiian or other Pacific Islander
- ☐ Black or African American
- ☐ Hispanic or Latino/Latina/Latinx
- ☐ I identify differently:
- ☐ Asian
- ☐ White
- ☐ Prefer not to say

Please mark all that apply. I am the parent or guardian of one or more students who identify as:

- ☐ living with a disability
- ☐ LGBTQ2SIA+
- ☐ an immigrant to the USA
- ☐ none of the above
- ☐ I prefer not to say

Please mark all that apply.
I am the parent or guardian of at least one student who:

- ☐ is eligible for free or reduced meals at school
- ☐ is receiving foster care
- ☐ is experiencing homelessness
- ☐ has spent time in a jail, prison, juvenile detention center, or other correctional facility
- ☐ has moved because the household is pursuing work as a migratory agricultural worker or fisher
- ☐ None of the above
- ☐ I prefer not to say

If you are the parent or guardian of one or more students who are immigrants, how long have they attended school in the USA? (Please mark only one).

- ☐ Less than 8 months
- ☐ 8 months to less than 3 years
- ☐ 3 years to 15 years
- ☐ More than 15 years
- ☐ Not applicable

Does your household speak a language other than English?

- ☐ Yes
- ☐ No
- ☐ Prefer not to say

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- ☐ LGBTQ2SIA+
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