**Parent-Teacher Conference Feedback Form**

## [SCHOOL NAME]

[Street Address] [City, ST ZIP Code] [Phone] | [Fax] | [Website] | [Email]

Conference Date: [dd/mm/yyyy]

Thank you for your time at this parent-teacher conference. Your input is essential to ensure the best learning experience for your student. Please take a moment to provide us with feedback.

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| --- | --- |
| Parent Name |  |
| Address |  |
| Email |  |
| Phone |  |
| Teacher Name |  |

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| --- | --- |
| The environment was welcoming. | Choose an item. |
| I felt comfortable talking with my child’s teacher. | Choose an item. |
| The teacher was prepared to discuss my child’s work. | Choose an item. |
| The teacher was aware of my child’s progress, level of participation, work quality, etc. | Choose an item. |
| I could ask the teacher questions openly. | Choose an item. |
| The teacher provided me with ways to help my student. | Choose an item. |
| The teacher offered solutions to problems I presented. | Choose an item. |
| The teacher and I made joint decisions regarding my child’s schooling. | Choose an item. |
| The teacher discussed the School-Parent Compact with me. | Choose an item. |
| I made plans with the teacher to keep in touch. | Choose an item. |
| I plan on scheduling a future conference with the teacher. | Choose an item. |
| My overall satisfaction with the meeting is very high? | Choose an item. |

### **Please include any additional comments**

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| [Response] |
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