
PARENT SURVEY

To assist us in providing the best care possible at our center please take a few minutes and complete this confidential survey. Your opinions and insights are valuable. Thank you!!!

Date Completed: _____

Things I like best about this center are:

Things I think the center does well at the center are:

Something that I would like to see more of at the center:

If I could change one thing about the center, it would be:

Other thoughts you'd like to share:
