Training Interest Assessment

Parent’s Name____________________________________________ Date ___________
Child’s Name___________________________________  Child’s Teacher _________________________

WOULD YOU LIKE TO KNOW MORE ABOUT ANY OF THESE TOPICS?
PUT A CHECK NEXT TO THE WORKSHOPS YOU WOULD ATTEND.

EDUCATION

☐ Getting a High School Diploma or GED
☐ English for Spanish Speaking Adults
☐ Enrolling in College

☐ Understanding the referral process for your child and/or your child’s IFSP/IEP
☐ Other:

EMPLOYMENT

☐ Career Planning: job searching, resume writing, preparing for an interview
☐ Better Time Management
☐ Computer Skills

☐ Other:

PARENTING

☐ Typical Child Growth & Development
☐ Effective Discipline Strategies
☐ Supporting your child with a diagnosis

☐ Grandparents as parents
☐ Other:

HEALTH & HOME

☐ First Time Home Buyers Program
☐ Budgeting & Money Management
☐ Managing Stress

☐ Preparing Healthy Foods
☐ Other:

HEAD START NEEDS YOUR IDEAS, COMMENTS AND SUGGESTIONS
Please list any other topics you are interested in learning more about. Share any information about trainers/trainings that you think would benefit other families.
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