

Data Collection: Community Partners Survey

Our Head Start/Early Head Start is currently conducting its annual Community Assessment which looks at the available local services and the services we provide to families. We are asking that you please take a minute to complete this brief questionnaire and return it in the self-addressed envelope.

COUNTY _____ COMMUNITY _____ AGENCY _____
 CONTACT INFO: NAME _____ PHONE _____ E-MAIL _____

1. In the last year, has your agency seen changes in the following:

	Increase	Decrease	No Change	Comments
Average household income				
Number of low income families contacting your agency				
Number of individuals or families slightly over your income guidelines				
Number of multi-generational families you serve				
Number of female head of households				
Number of teen pregnancies				
Number of licensed childcare providers				
Job availability in community				
Drug abuse in community				
Low income housing availability				
Homelessness				
Transportation needs				
Services you offer				

2. Are your services free? NA YES NO
3. If NO to Question 2: are your fees based on income? YES NO
4. If YES to Question 3: do you have a sliding scale based on income? YES NO
5. What do you believe are your agency/community's strengths when working with low-income families?
6. What do you believe are your agency/community's obstacles when working with low-income families?
7. Are there other concerns that you think are issues for our community?
8. What other programs/services do you believe that our Head Start/Early Head Start could offer to better serve our community – i.e. mental health or elderly services?
9. Do you have suggestions about how HS/EHS could collaborate or partner with your agency/community in order to better meet the needs of low-income children and families?
10. Other comments:

Adapted from Community Assessment TREC Baildards Head Start/Early Head Start 2006-2007 Grant Year.