

Virtual/At-Home Learning Feasibility

Note: The questions in this section assess whether virtual learning would be feasible for you and your child.

	Does Not Apply	Disagree	Unsure	Agree
I am able to work while my child is not in school (i.e., can still successfully do my job or I am able to telework).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have access to reliable internet and a device, such as a computer or tablet, which my child can use for virtual learning.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can supervise or identify someone who can supervise my child during periods of virtual/at home learning.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child has a space where I live that is free of distractions during school hours.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My school provides a virtual learning option that allows students to have real-time interactions with their teachers (e.g., have live instruction).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child's learning style and needs are compatible with digital modes of learning.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Academic and Social-Emotional Wellbeing

My child will be able to keep up academically through virtual/at-home learning.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child will receive quality education through virtual/at-home learning.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child will be sufficiently engaged during prolonged periods of virtual/at-home learning.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child will be able to stay socially connected during prolonged periods of virtual/at-home learning.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If my child needs specialized adaptive communication devices, equipment, or learning aides, I am able to have them where I live.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Back to School Decision Making Tool

Note: These questions address your views about how your school is preparing for school year 2020-2021. If you answer "unsure" to any items regarding your school's plan, consider reaching out to your school administrator for more information.

	Does Not Apply	Disagree	Unsure	Agree
I feel comfortable with my school's reopening plans for reducing risk of spreading COVID-19.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I believe my school has the resources needed to effectively implement their reopening plan (e.g., staffing, supplies, training).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel comfortable with my school's plan if a student or staff member test positive for COVID-19.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I believe my school has a plan to provide an effective program of instruction every day of the regular school week (generally five days).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with how my school communicates with families about the changes it is considering.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with how my school is addressing parents' or caregivers' concerns and questions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child knows how to properly wear a mask and understands the importance of doing so.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child can wear a mask for an extended period of time, if required by the school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My child has a reliable mode of transportation to and from school (e.g., school bus, carpool, walk/bike, public transit).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am comfortable with how my child's mode of transportation to and from school is reducing the risk of spreading COVID-19 (e.g., decreased bus/transit capacity, wearing masks, increased cleaning and disinfecting practices).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

