

**San Diego State University  
Community Reading Clinic Parent Survey**

Dear Parents,

Thank you for bringing your child to the SDSU Community Reading Clinic for literacy tutoring!  
Please provide us with feedback on the services provided to your child and return this form to:

Dr. Sharan A. Gibson  
5500 Campanile Drive  
San Diego, CA 92182-1153

Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_

1. How did your child feel about the tutoring we provided?
2. What improvements did you see in your child's reading and writing skills as a result of his or her participation in our tutoring program?
3. Would you like your child to receive tutoring again at our next set of sessions?
4. What other types of programs or services would you like us to provide?
5. Other comments on our tutoring services?