PRIME TIME FAMILY READING TIME®
Enter Survey

Name: ________________________________________________

Prime Time Location: ____________________________________

Please answer the questions below for you and the child(ren) who attended PRIME TIME with you.

1.) What is your relationship to the child(ren) attending PRIME TIME with you?
   □ Mother          □ Father          □ Grandmother       □ Grandfather
   □ Guardian        □ Brother/Sister  □ Uncle Aunt       □ Other: ________________

2.) How often do you and your child(ren) read together?
   □ Every Day        □ At Least Once Weekly □ At Least Once Monthly □ A few times a year □ Never

3.) How often do you and your child(ren) visit the public library?
   □ Every Day        □ At Least Once Weekly □ At Least Once Monthly □ A few times a year □ Never

4.) How much do you agree with the following statements?
   
   a. It is very important for families to share stories together.
      □ Strongly Agree □ Agree □ Disagree □ Strongly Disagree

   b. Reading and talking about books at home helps my child(ren) do better in school.
      □ Strongly Agree □ Agree □ Disagree □ Strongly Disagree

   c. Reading together as a family is an enjoyable activity.
      □ Strongly Agree □ Agree □ Disagree □ Strongly Disagree

5.) What do you hope to learn from the Prime Time Family Reading Time program?