



PRIME TIME FAMILY READING TIME® Exit Survey

Name: _____ Race: _____

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. Have you participated in a PRIME TIME program before? Yes No

If yes, please select one: Within last 6 months Within last year Within 2 Years Longer

3. 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

4. What is the name/title of the last book that you and your child(ren) read together?

5. Do you or your child(ren) ask questions about the stories during or after the reading?

- Frequently Sometimes Rarely Never

6. Do you and your child(ren) find new meaning, ideas, or conclusions during or after the reading?

- Frequently Sometimes Rarely Never

7. 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

8. 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

9. Participating in PRIME TIME has improved your child’s attitude about reading and learning?

- Strongly Agree Agree Disagree Strongly Disagree

Comments: _____

10. Participating in PRIME TIME has helped improve your child’s school performance?

- Strongly Agree Agree Disagree Strongly Disagree

Comments: _____

11. If you agree that your child’s school performance improved, in which subject(s) have you seen improvement?

- Language Arts Reading Math Science Other _____

THIS SECTION TO BE COMPLETED BY THE LIBRARY COORDINATOR:

Participant family number: _____

Site name: _____

Date: _____