

CULTURAL SURVEY

Family's Name _____

Date _____

Child's Name _____

Describe your parenting strategies and values regarding learning, playtime, and behavioral guidance.

Describe your family's language practices and abilities spoken in the home.

Describe any preferences you may have regarding your child's acquisition of language in the classroom.

Describe the nature and importance of routines in your home. Describe a typical day/week for your family.

Describe your family's views regarding mealtimes and nutrition.

What are some specific events, interests, or activities that your family enjoys together:

What are some ways that you might be able to share your areas of interest, your knowledge, or your abilities with other Head Start children and families?

Describe your experiences with school?

Describe your values for your child's educational experiences.
