



Parent Name: _____

The Judy Center is planning parent education for the upcoming school year. We would like feedback from parents on topics you would like to see. **Please check all that apply.**

Children's Behavior

Safe Sleep

Nutrition

English Classes

Health Related Topics

Children with Disabilities

GED/Continuing Education

Finance/Budgeting

School Readiness

Computer/Internet Assistance

Mealtime Troubles

Potty Training

Bedtime Routines

Other

Days and times you would like for playgroup.

Please select the day you prefer most:

Please select the time you prefer most:

Monday

9-11

Tuesday

12-2

Wednesday

Thursday