

# 2025-2026 Exceptional Student Education (ESE) Parent\* Survey

The Florida Department of Education is seeking parent and guardian input to enhance services under the Individuals with Disabilities Education Act (IDEA). If your child has an Individualized Education Plan (IEP) or an Individual Family Service Plan (IFSP), please complete the following survey to help us improve our services. If you have more than one child with an IEP, please complete one survey for each child. The information gathered remains anonymous and will be used to inform support and resources for parents and students with IEPs. Results will be compiled at the district and school level.

\*Please note: If your child is 12 years of age or older, please complete the Transition Section located on page 11 of this survey.

\*Students 18 or over may complete this survey.

**1. Relationship to the student.**

- Parent/Guardian
- Self - 18 years or older

**2. How old is your child with an IEP?**

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**3. Is your child Hispanic or Latino?**

- Yes
- No

**4. Which of the following races describes your child with an IEP?**

- White
- Black or African American
- American Indian or Alaska Native
- Asian or Asian American
- Native Hawaiian or Pacific Islander
- Two or more races

**5. Enter the name of the school your child attends.**

District: \_\_\_\_\_

School: \_\_\_\_\_

**6. What is your child's primary exceptionality?**

\_\_\_\_\_

**7. Is your child with an IEP in Pre-Kindergarten (PK) or grades K-12?**

Pre-Kindergarten (PK)

K-12

**The 2025-2026 Exceptional Student Education (ESE) Parent Survey can be returned via mail, fax or email as follows:**

Mail

Florida Department of Education  
Bureau of Exceptional Education and Student Services  
Exceptional Student Education (ESE) Parent Survey  
325 West Gaines Street, Suite 614  
Tallahassee, Florida 32399-0400

Fax

850-245-0953

Email

[BEESsupport@fldoe.org](mailto:BEESsupport@fldoe.org)

## Preschool Section

- 1. I am considered a valued partner with personnel in the planning of my child's program.**
  - Very strongly agree
  - Strongly agree
  - Agree
  - Disagree
  - Strongly disagree
  - Very strongly disagree
  
- 2. My child's IEP/IFSP goals are written in a way that I can work on them at home during daily routines.**
  - Very strongly agree
  - Strongly agree
  - Agree
  - Disagree
  - Strongly disagree
  - Very strongly disagree
  
- 3. I understand the information I receive from the school about my child's program.**
  - Very strongly agree
  - Strongly agree
  - Agree
  - Disagree
  - Strongly disagree
  - Very strongly disagree

**4. The school involves parents in assessments of whether preschool special education is effective.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**5. I am offered a variety of ways to communicate with staff.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**6. I am provided with the support I need to play an active role in my child's education.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**6(a). If you disagree, what additional resources would you like to receive from the school? (Check all that apply)**

- Resources on how to navigate IEP meetings.
- Resources on how to interpret IEPs.
- Resources on how IEP decisions are made.
- Resources related to my legal rights.
- Resources related to outside support organizations.
- Information on my student's academic progress.
- Information on my student's behavior.
- Resources for contacting my child's teacher(s).

**7. School personnel ensure that I have fully understood my rights related to preschool special education.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**8. I know what options I have if I disagree with the decision of the IEP team.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**9. The school provides me with information about organizations that offer support and connections for parents.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**10. I am considered a valued partner to personnel in the planning and support of my child's program.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**11. Overall, I am satisfied with the efforts to facilitate my involvement in my child's educational planning.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**12. On a scale from 0-10 (with 10 being very satisfied, and 0 being not at all satisfied), how satisfied are you with your child's special education program?**

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

**13. Please share any other comments you have below:**

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## K-12 Section

**1. I understand the written information I receive from the school about my child's education.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**2. I am provided with the support I need to play an active role in my child's education.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**2(a). If you disagree, what additional resources would you like to receive from the school? (Check all that apply)**

- Resources on how to navigate IEP meetings.
- Resources on how to interpret IEPs.
- Resources on how IEP decisions are made.
- Resources related to my legal rights.
- Resources related to outside support organizations.
- Information on my student's academic progress.
- Information on my student's behavior.
- Resources for contacting my child's teacher(s).

**3. My child's Individual Educational Plan (IEP) addresses my child's development and describes progress towards goals.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**4. The school provides my child with all the services, accommodations and modifications documented on his/her IEP.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**5. I am offered a variety of ways to communicate with available staff.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**6. I know what options I have if I disagree with the decision of the IEP team.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**7. Overall, I am satisfied with the efforts to facilitate my involvement in my child's educational planning.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**8. On a scale from 0-10 (with 10 being very satisfied, and 0 being not at all satisfied), how satisfied are you with your child's special education program?**

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10

## Transition Section

**1. School personnel provide me with information on agencies and information that can assist my child in the transition from school.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree

**2. School personnel discuss options for work or continuing education after high school.**

- Very strongly agree
- Strongly agree
- Agree
- Disagree
- Strongly disagree
- Very strongly disagree