**PTR Classroom Team Survey**

**School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Complete this survey if*** *the team meets on a regular basis for planning purposes****.***

1. Our team meets for planning purposes:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Rarely | Monthly | Bimonthly | Weekly | Daily |
| 0 | 1 | 2 | 3 | 4 |

1. Our team plans daily classroom activities collaboratively:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Rarely | Occasionally | Frequently | Usually | Almost Always |
| 0 | 1 | 2 | 3 | 4 |

1. Our team plans collaboratively around implementing IEP objectives and making adaptations and modifications for children in the classroom:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Rarely | Occasionally | Frequently | Usually | Almost Always |
| 0 | 1 | 2 | 3 | 4 |

1. Our team communicates well and problem solves collaboratively:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree |
| 0 | 1 | 2 | 3 | 4 |

1. We interact and work with children across developmental domains and disciplines:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Rarely | Occasionally | Frequently | Usually | Almost Always |
| 0 | 1 | 2 | 3 | 4 |

1. Professional roles and responsibilities are shared across team members members:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree |
| 0 | 1 | 2 | 3 | 4 |

1. Parents play an active role on their child’s team regarding the identification of goals, supports and services, modifications and adaptations.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree |
| 0 | 1 | 2 | 3 | 4 |

8. Our team has access to additional resources (e.g., technology, personnel, classroom materials, etc.) to help us work with children in the classroom.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| None | Limited | Adequate | Good | Excellent |
| 0 | 1 | 2 | 3 | 4 |

***PTR Form 2a***

**Please answer the following questions:**

1. List some strengths of the Team.

2. What challenges face the Team?

3. What are the most pressing needs of the team?

4. What might help to enhance the team’s productivity?

***PTR Form 2a***