

INSTRUCTIONS: Take this form with you to your school visit, ask questions, and take notes.

Your Elementary School Visit Checklist

School Name: _____

Phone: _____

Address: _____

School Size: _____

My contact at this school: _____

This school has the following:

- | | | |
|---|--|---|
| <input type="checkbox"/> Before-school daycare | <input type="checkbox"/> Library | <input type="checkbox"/> Garden |
| <input type="checkbox"/> After-school daycare | <input type="checkbox"/> Computer lab | <input type="checkbox"/> Parent Teacher Association |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Second language classes | <input type="checkbox"/> Clean facilities |
| <input type="checkbox"/> Hot lunch | <input type="checkbox"/> Special education services | <input type="checkbox"/> Safe & secure campus |
| <input type="checkbox"/> Cafeteria | <input type="checkbox"/> Gifted services | <input type="checkbox"/> Safe neighborhood |
| <input type="checkbox"/> Gym | <input type="checkbox"/> School work posted on walls | <input type="checkbox"/> Anti-bullying program |
| <input type="checkbox"/> Playground/outdoor space | <input type="checkbox"/> Art/Dance | <input type="checkbox"/> Wheelchair accessibility |

Questions

Notes

Did teachers and students seem interested in their work?

Are the classrooms cheerful and organized?

Is upper grade writing strong? Ask for a sample!

Are parents encouraged to volunteer?

Additional Questions/Comments

If you were rate this school on a scale from 1 to 10, 10 being your perfect school, what would it be?

1 2 3 4 5 6 7 8 9 10