SmartJ Parent Survey

#### Introduction

Thank you for taking this survey!

We are eager to learn about you, a SmartJ participating family, and your experience with SmartJ. This survey will help us understand the effect SmartJ is making on your child so we can improve the program in the future. This survey will take about 10 minutes to complete and is 100% confidential.

This survey is administered by an independent professional services firm, Rosov Consulting, who will collect and analyze the data. Please be assured that your responses will remain confidential. Your participation in this research is voluntary. Information will be collected for research purposes only and is subject to Rosov Consulting’s Privacy Policy. You have the right to withdraw at any point during the study, for any reason, and without any prejudice. If you would like to discuss our Privacy Policy, please email privacy@rosovconsulting.com.

If you have any questions about this survey, please contact Natasha Nefedyeva at nnefedyeva@rosovconsulting.com.

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*This survey is completely confidential. We are asking you to provide the information below in case you will be taking any of our surveys in the future.*

Q1: What are the first two letters of your child’s first name (please answer about the child who is enrolled in SmartJ; if you have more than one child enrolled in SmartJ, please answer about the youngest child enrolled in SmartJ): \_\_\_\_\_

Q2: What are the first two letters of your child’s last name? (please answer about the child who is enrolled in SmartJ; if you have more than one child enrolled in SmartJ, please answer about the youngest child enrolled in SmartJ): \_\_\_\_\_

Q3: What is your child’s date of birth? (DD/MM/YYYY) \_\_\_\_\_\_\_\_\_\_

#### Household Block

*The following questions ask about your household and Jewish things you do.*

Q4: Which of the following best describes your family:

* We are all Jewish
* Some of us are Jewish, some of us are not
* We are not Jewish

Q5: Have you or anyone on your immediate family ever been to Israel:

* Yes
* No

Q6: How many people in your social network are Jewish?

* None
* A few
* Half
* Most
* All

Q7: When you think about other parents at SmartJ, which of the following best describes your relationship with them?

* I never interact with other SmartJ parents
* I sometimes interact with other SmartJ parents
* I often interact with other SmartJ parents
* I have close friends among other SmartJ parents

Q8: Does your child, who is enrolled in SmartJ, currently attend a Jewish day school?

* Yes
* No

Q9: How often does your family participate in Jewish community-wide events (e.g. High Holidays celebration, concerts at the community center, etc.)

* Never
* A few times a year
* About once a month
* About once a week

Q10: How often does your family go to a synagogue?

* Never
* A few times a year
* About once a month
* About once a week

Q11: How often does your family celebrate Shabbat together?

* Never
* A few times a year
* About once a month
* About once a week

Q12: How would you describe your relationship with the Jewish community in your city?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### SmartJ Satisfaction

Q13: So far, how satisfied are you with SmartJ’s general educational content (e.g. English, robotics, etc.)

* Extremely dissatisfied
* Very dissatisfied
* Somewhat dissatisfied
* Neither satisfied nor dissatisfied
* Somewhat satisfied
* Very satisfied
* Extremely satisfied

Q14: So far, how satisfied are you with SmartJ’s Jewish content?

* Extremely dissatisfied
* Very dissatisfied
* Somewhat dissatisfied
* Neither satisfied nor dissatisfied
* Somewhat satisfied
* Very satisfied
* Extremely satisfied

Q15: On a scale from 0 to 10 (0 being “not at all likely”, and 10 being “extremely likely”), how likely would you be to recommend SmartJ to a friend?

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 0Not at all likely | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10Extremely likely |

*[If “Detractor”]*

Q16: Why are you not likely to recommend SmartJ to a friend?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q17: How likely are you to enroll your child in SmartJ next year?

* Not at all likely
* Not very likely
* Somewhat likely
* Very likely
* Extremely likely

#### Jewish Outcomes Block

*The following questions ask about things that are important to you when it comes to your child’s participation in SmartJ. If you have more than one child enrolled in SmartJ, please choose response options that are most closely reflecting your overall sense of what’s important for your children.*

Q18: [Randomize] When thinking about your child’s connection to "things Jewish," how much, if at all, has the following changed as a result of their participation in SmartJ?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Significantly decrease | Decreased | Somewhat decreased | Stayed the same | Somewhat increased | Increased | Significantly increased |
| 1. My child’s sense of not being connected to Israel
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s sense of connection to the Jewish people
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child not feeling part of a Jewish community
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s desire to visit Israel
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s feeling that Jewish programs and events are among his/her most favorite activities
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s actively seeking to grow his/her Jewish social network
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s sense of strong Jewish identity
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s sense of strong Russian identity
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s participation in activities that have explicit Jewish content
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |

Q19: In your opinion, to what extent is your child growing Jewishly as a result of their participation in SmartJ?

* Not at all
* A little bit
* Somewhat
* A lot
* A great deal

*[If “A lot” or “A great deal”]*

Q20: Please briefly describe how is you child growing Jewishly at SmartJ?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### Personal Growth Outcomes Block

Q21: [Randomize] When thinking about your child’s personal growth and development, how much, if at all, has the following changed as a result of their participation in SmartJ?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Significantly decrease | Decreased | Somewhat decreased | Stayed the same | Somewhat increased | Increased | Significantly increased |
| 1. My child’s self-confidence
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s being comfortable expressing their opinion
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s need for adult assistance
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s sense of independence
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s desire to play more
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s sense of responsibility
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s maturity
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |
| 1. My child’s ability to teamwork
 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 | 🗖 |

Q22: In your opinion, to what extent is your child growing personally as a result of their participation in SmartJ?

* Not at all
* A little bit
* Somewhat
* A lot
* A great deal

*[If “A lot” or “A great deal”]*

Q23: Please briefly describe how is you child growing personally at SmartJ?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Q24: Thank you for completing this survey. Would you be interested in participating in a 45-minute confidential follow up interview over the phone? If so, please leave us your first name and email address so we can reach out to you.

First name: \_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_