

We are conducting a survey to determine how well the needs of Lassen County Families are being met. Please take a moment to answer the following questions. Your input will be used to develop better programs and services for parents and children throughout Lassen County. Thank you for your help.

- 1. Where do you receive care? (town) _____
- 2. What types of child care or preschool do you currently have for your children? Please enter the number in each age group and services used.

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Age Group	Number of Kids	Months in Care	Hours in Care	Type of Care (i.e. Licensed Family Day Care Home, Child Care Center, Preschool, After School Program, Family Member Care, or Other)
Under 12 mos.				
2 yrs - 4 yrs				
5 - 13 yrs				
Over 13 yrs				

- 3. Have you had difficulty finding quality child care providers? \Box Yes \Box No
- 4. Please indicate the reason for needing child care (check all that apply)
 □ I am working □ I am seeking work □ I attend a training/education program □ I am disabled
 □ My child needs preschool experience Other
- 5. Do you receive free child care or help paying for child care /preschool from an agency or program? □ Yes □ No Would you like more information about help paying for child care? □ Yes □ No *A family of 4 can make \$4877 a month and possibly qualify.* Phone Number: ______
- 6. If you are not using child care, why not? (Check all that apply.)
 □ My children don't need child care □ I can't afford to pay for child care
 □ I can't find a child care provider □ Other_____
- 7. Would you like more information about what Child and Family Resources offers? □ Yes □ No Phone Number: _____

THANK YOU FOR YOUR HELP!

PLEASE RETURN COMPLETED SURVEY TO YOUR PROVIDER or if you prefer, you can mail your response to: LASSEN CHILD & FAMILY RESOURCES Attn: Child Care Needs Assessment 472-013 Johnstonvilee Rd SUSANVILLE, CALIFORNIA 96130



IF YOU HAVE QUESTIONS, PLEASE CALL US AT (530) 257-9781.