**CCAMPIS Participant Survey Program Year \_\_\_\_\_\_**

**Please take a moment to answer the questions below.**

1. **Name of student parent**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. **The CCAMPIS grant has helped me to:**

* Enroll at the MVC
* Continue my studies at MVC
* Transfer to a 4yr university
* Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **The CCAMPIS child care tuition assistance allows me to stay enrolled at Moreno Valley College**

* True
* False

1. **The CCAMPIS child care tuition assistance has/will help(ed) me to graduate with my degree from Moreno Valley College.**

* True
* False

1. **How significant is/was the CCAMPIS child care tuition assistance in enabling you to complete your degree (select one)?**
   * Extremely important
   * Important
   * Helpful
   * Not important
2. **Please write any other information that would be helpful for future planning of your tuition assistance:**

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1. **Because I receive tuition assistance , I am able to….(check ALL that apply)**
   * Attend a class € Obtain tutoring assistance
   * Take earlier classes € Obtain advising or counseling support
   * Take later classes € Spend more time at the library/lab
   * Have additional study time € Participate in group study projects or meetings
   * Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_