# COSHOCTON ELEMENTARY

1203 Cambridge Rd. * Coshocton OH 43812 * PH: (740) 622-5514 * FX: (740) 623-5803 * www.coshoctoncityschools.com
Principal, Tony Meiser
Assistant Principal, Tricia English

November 12, 2026

Dear Coshocton City Schools Families,

Coshocton City Schools, in partnership with the Muskingum Valley Educational Service Center, is seeking grant funding to provide after-school intervention opportunities for our students. This program would offer additional academic support to help students strengthen their skills and achieve success.

An important component of the grant application is a family survey that will help us determine how many students may be interested in participating. Strong family participation and survey responses will help demonstrate the need for this program and the positive impact it could have on our students and families.

Please take a few minutes to complete the survey by either scanning the QR code located in the top right-hand corner on the back of this letter or returning the paper family survey to your child's teacher as soon as possible.

Your feedback and participation are important in helping us secure this opportunity for our students. Thank you for your continued support of Coshocton City Schools!

Sincerely,

Tony Meiser

Mr. Tony Meiser

Coshocton Elementary School Principal

# AFTERSCHOOL FAMILY SURVEY

Scan here to take the survey online!

*The Muskingum Valley Educational Service Center is applying for a 21st Century Community Learning Center grant to offer free after school programming at Coshocton Elementary School next school year (2027 - 2028). The grant application asks us to show what families want and need, and your answers will help us as we plan. Only combined results will be shared in the grant. Thank you for sharing your voice!*

**How likely are you to sign your child up for after-school programming in the next school year (2027 - 2028)?**

☐ Absolutely ☐ Likely ☐ Maybe ☐ Not Sure ☐ Not Interested

**How many students would you enroll in the program next year?** _____

**Because of grant funding, the program will have a participation requirement which means that students who sign up are expected to attend regularly. How often do you think your child would attend after school next school year (2027 - 2028)?**

☐ All of the time (5 days per week)

☐ Regularly (multiple days per week)

☐ Occasionally (one time per week)

**What hours would you prefer the after school program be offered? (check all that apply)**

☐ 3:15 pm - 5:15 pm

☐ 3:15 pm - 5:45 pm

**Which transportation option would you use for your student? (check all that apply)**

☐ Bus transporation to a stop in your area

☐ Gas vouchers

☐ Pick up my student at the school

☐ Public transportation (i.e. Transit)

**What would you like to see offered in this program? (check all that apply)**

☐ Homework help / academic support

☐ Workforce Development (college/career exploration, financial literacy)

☐ Fun academic activities

☐ Family events and education

☐ Health and wellness activities

☐ Art and drama

☐ Mentoring

☐ Other (please tell us) _____ _____ _____ _____

**What grade(s) will the student(s) in your home be in school next year? (check all that apply)**

☐ K ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

**Parent/Guardian Name** _____ **Email** _____