

2026-27 Lee County Middle High School

Lee County Youth Service Center

Parent/Guardian Survey

2026-2027

Student Name: _____

Youth Service Centers serve children grades 6-12 and offer a unique blend of programs and services to serve the special needs of our student and family populations. The goal is to meet the needs of all children and their families served by the centers as a means to enhance student academic success.

District Mission

The mission of the Lee County School District is to foster trust, growth, and accountability in partnership with students, staff, parents, and the community.

***To help us plan for the upcoming year, we would appreciate it if you would please fill out this survey and return it to school. Parents/Guardian only need to fill out one survey per household. If you have any questions or concerns, please feel free to contact the Youth Service Center at 606-464-5023 Jennifer Wilder – Director, email jennifer.wilder@lee.kyschools.us

Health Services

Do you need help with the following?	YES	NO
Medical Care	☐	☐
Dental	☐	☐
Diet/Exercise/Physical Activities	☐	☐
Nutritional Information	☐	☐
Vision / Hearing	☐	☐
Do you have private insurance?	☐	☐
Do you have a medical card?	☐	☐
Comments:		

Substance Abuse Education & Counseling

Do you need help with the following?	YES	NO
Tobacco Education / Treatment	☐	☐
Alcohol Education / Treatment	☐	☐
Illegal Drug Use Education/Treatment, cocaine, marijuana, meth,etc...	☐	☐
Prescription Drug Education / Treatment (Prescribed or not)	☐	☐
Inhalant Abuse	☐	☐
Community Resources such AA, Parenting classes, information regarding new trends in drugs	☐	☐
Comments:		

Family Crisis and Mental Health Counseling

Do you need help and/or information about the following?	YES	NO
Domestic Violence	☐	☐
Suicide	☐	☐
Grief Counseling	☐	☐
Self-Esteem Issues	☐	☐
Teen Pregnancy	☐	☐
Anger Management	☐	☐
Depression	☐	☐
Peer Pressure	☐	☐
Comments:		

Job Development / Career Exploration & Development

	YES	NO
Job Preparation Workshops / completing job applications, interviewing, etc...	☐	☐
First Aid / CPR	☐	☐
Community Resources	☐	☐
Comments:		

Educational Support

	YES	NO
Food (backpack program or food boxes)	☐	☐
Clothing	☐	☐
School Supplies	☐	☐
Transportation	☐	☐
Budgeting Workshops / Financial Planning	☐	☐
Do you have a computer / internet in the home?	☐	☐
Are you interested in serving as a volunteer?	☐	☐
Are you a grandparent raising a grandchild / caregiver of other children?	☐	☐
Do you have a high school diploma or GED?	☐	☐
Do you think your child needs more after school or summer enrichment programs?	☐	☐
Christmas - Holiday Assistance (YSC will contact you if yes)	☐	☐

Any additional Comments? _____

Thank You for completing the survey. In order for your child to participate in YSC events, we need your permission (Project Prom, Career Day, Reality Store, Red Ribbon Week Activities, etc...)

Child's Name: _____ Grade _____

Child's Name: _____ Grade _____

Parent/Guardian Signature

Date