

In the Nest

In the Nest: Follow Up Survey

Introduction:

Thank you for completing this follow-up survey! Please tell us about how you have used the information from the *Hatchlings* program by completing the following questions:

1. Your Name



- 2. Baby's Name
- 3. How old is your baby now?
- 4. I have used the information from the Hatchlings: In the Nest program.
 - Strongly disagree
 - Disagree
 - 🔵 Neither agree nor disagree
 - Agree
 - Strongly agree

5. Since the Hatchlings: In the Nest program, how often do you do the following activities:

	1 - Never	2 - Every now and then	3 - Occasionally	4 - Frequently	5 - Daily or almost daily
Read (share a book) with my baby	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Sing to my baby	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Talk to my baby	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Play with my baby	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Comment					

6. Please tell us about how you fit any of the above activities into your daily routine with your baby. For example, you may sing, talk or play with your baby during feeding, diapering and/or bathing. You may share a book at times throughout the day that seem to work for you and your baby.



7. The activities from the *Hatchlings: In the Nest* program helped me bond with my baby.

Strongly disagree	Agree
Disagree	Strongly agree
O Neither agree nor disagree	

8. The activities and materials from the *Hatchlings: In the Nest* program helped me feel more confident about supporting my baby's early literacy development.

Strongly disagree	Agree
Disagree	Strongly agree
Neither agree nor disagree	

program.	1 - Did not enjoy	2 - Enjoyed a little	3 - Enjoyed somewhat	4 - Enjoyed very much	5 - Enjoyed a lot!
Happy Baby Book	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Shakers	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Wiggle! March! Book	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Frog Finger Puppet	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
Hatchlings Songbook	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc
The Early Literacy Calendar	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc

9. Please tell us how much you and your baby enjoyed the materials you took home from the program.

10. The *Hatchlings: In the Nest* program had a total of four sessions. How many did you attend?

11. Has anyone else in your household been doing the activities from the program with your baby also? If yes, please tell us who in the comment box below (for example, husband, partner, etc.)

- O Yes
- O No

Comment

12. Do you have any other comments, questions, or concerns?