Kentucky Chamber
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Kentucky Chamber of Commerce
Employee Child Care Survey Template

This survey template provides a list of recommended questions for employers to use to gauge their employees' child care needs and determine what type(s) of employer-provided child care support might be most impactful on the well-being of their employees. Because the survey asks for information about children and disabled children, the survey should be completely voluntary, anonymous, the results kept confidential, and it should be used only in accordance with the ADA. It is recommended that company leadership review these questions with the assistance of a qualified human resources professional. An employer may find that additional questions or modifications to the questions below are necessary to truly capture the child care needs of their employees. In addition, an employer may find some questions irrelevant.

Recommended Employee Child Care Survey Questions

Recommended Disclaimer: This survey is being used to gauge employees' child care needs and determine what type of employer-provided child care support might be most impactful to employees. The following questions request information about current childcare needs/costs and include two questions concerning disabled children. Your participation in this Survey is completely voluntary and the responses are anonymous. You may decide not to complete the Survey at any time. Refusal to participate in the Survey will not subject you to any adverse treatment. The responses to the Survey will be kept confidential, will not be used for employment decisions, and will only be used in accordance with the ADA.

1. **How many children under the age of thirteen are currently legally under your care?**

2. **How old are the children in your care who are under 13?**

3. **What are your current child care arrangements for the children under your care while you are at work? Please select all that apply.**

   ☐ Regulated child care program (center-based or family child care home)

   ☐ Parent or spouse/partner of parent

   ☐ Paid babysitter/nanny

   ☐ Other paid caregiver

   ☐ Other unpaid caregiver

   ☐ K-12 educational setting

   ☐ Other (please specify) _____

4. **How much do you pay for child care?**

   Per week: _____

   Per month: _____

   I currently do not pay for child care _____

5. **Do you or anyone else in your household currently receive government assistance to help you pay for child care?**

   ☐ Yes

   ☐ No

   ☐ Unsure

   ☐ Other

6. **Does your spouse or partner have access to child care assistance through their employer?**

   ☐ Yes

   ☐ No

   ☐ Unsure

   ☐ Other

7. **Are there adults or children with disabilities under your care?**

   ☐ Yes

   ☐ No

   ☐ Other

8. **If there are adults or children with disabilities under your care, what arrangements do you have in place to ensure their care while you are at work?**

9. **Please describe your general working hours and work schedule.**

10. **Approximately how far from your primary place of employment is your child care arrangement located?**

11. **Approximately how far from your primary residence is your child care arrangement located?**

12. **Has the financial cost of your child care arrangement or other difficulties associated with child care ever caused you to consider quitting your job or reducing your hours (all responses are anonymous)?**

    ☐ Yes

    ☐ No

    ☐ Unsure

    ☐ Other

13. **Please estimate how many days per year that your child care service falls through, causing the need for you to make alternate plans.**

    ☐ 0 days

    ☐ 1-2 days

    ☐ 3-5 days

    ☐ 6-9 days

    ☐ 10 or more days

14. When your primary child care arrangement falls through, what do you do? Select all that apply.

- ☐ I care for my child(ren) myself
- ☐ I request time off or an alternative work arrangement
- ☐ I call a family member
- ☐ I call a friend
- ☐ I drop into a childcare center to see if they have availability
- ☐ I call a babysitter
- ☐ I ask to work from home
- ☐ Other (please specify) _____

15. For those with school-age children, do your child care needs and expenses change in the summer or at other times when school is out?

- ☐ Yes
- ☐ No
- ☐ I do not have school-age children

If yes, please explain. _____