

**EHS 5<sup>TH</sup> GRADE FOLLOW-UP STUDY**  
**TEACHER QUESTIONNAIRE**

**SECTION 1**  
**CHILD'S CLASSROOM**

A11. **What grade is the child in?**

\_\_\_\_\_

- Not enrolled in a grade
- Refused
- Don't know

A2 **In which subject(s) do you instruct the child?**

**MARK ALL THAT APPLY**

- Language Arts
- Math
- Social Studies
- Science
- Other (Specify: \_\_\_\_\_)

A2.1 **Has the child been in your class since the beginning of this school year?**

- Yes
- No (Number of months child was in your class since the beginning of the school year: \_\_\_\_\_)

A3. **Including the child, what is the number of students you teach in the child's class?**

\_\_\_\_\_ Students

A4. **Including you, how many adults (teachers and aides) are usually in the child's class?**

\_\_\_\_\_ Adults

A9. **In a typical week, how many paid aides usually assist in the child's class by working directly with children on instructional tasks?**

- \_\_\_\_\_ Number of regular aides
- \_\_\_\_\_ Number of special education aides for whole class
- \_\_\_\_\_ Number of special education aides assigned to one single child
- \_\_\_\_\_ Number of ESL or bilingual education aides

A10. **What is the highest level of education completed for the paid aide who spends the most time in the child's class?**

**MARK ONLY ONE**

- Less than high school
- High school diploma or GED
- Associate's degree
- Bachelor's degree or above
- Don't know
- No paid aides assist in my classroom

**SECTION 2**  
**CHILD CHARACTERISTICS**

**Please rate the degree the child displays the following characteristics.**

**G1A Pays attention well.**

- Never
- Sometimes
- Often
- Very often

**G1B Persists in completing tasks.**

- Never
- Sometimes
- Often
- Very often

**G1C Shows eagerness to learn new things.**

- Never
- Sometimes
- Often
- Very often

**G1D Works independently.**

- Never
- Sometimes
- Often
- Very often

**G1F Keeps belongings organized.**

- Never
- Sometimes
- Often
- Very often

**H1A Respects the property rights of others**

- Never
- Sometimes
- Often
- Very often

**H1B Accepts peers' ideas for group activities**

- Never
- Sometimes
- Often
- Very often

**H1C Responds appropriately to peer pressure**

- Never
- Sometimes
- Often
- Very often

**H1D Forms and maintains friendships**

- Never
- Sometimes
- Often
- Very often

**H1E Gets along with people who are different**

- Never
- Sometimes
- Often
- Very often

**H1F Comforts or helps other children**

- Never
- Sometimes
- Often
- Very often

**H1G Is sensitive to feelings of others**

- Never
- Sometimes
- Often
- Very often

**Please rate the degree the child displays the following characteristics.**

**E1A. Uses free time in an acceptable way**

- Never
- Sometimes
- Very often

**E1B. Keeps desk clean and neat without being reminded**

- Never
- Sometimes
- Very often

**E1C. Puts away work materials or other school property**

- Never
- Sometimes
- Very often

**E1D. Uses time appropriately while waiting for your help with homework or some other task**

- Never
- Sometimes
- Very often

**E1F. Finishes class assignments within time limits**

- Never
- Sometimes
- Very often

**E1G. Produces correct schoolwork**

- Never
- Sometimes
- Very often

**E1H. Follows your directions**

- Never
- Sometimes
- Very often

E1I. **Ignores peer distractions when doing class work**

- Never
- Sometimes
- Very often

E1J. **Attends to your instructions**

- Never
- Sometimes
- Very often

E1K. **Easily makes transition from one classroom activity to another**

- Never
- Sometimes
- Very often

**Please rate the degree the child displays the following characteristics.**

**F1A. Responds appropriately when hit or pushed by other children**

- Never
- Sometimes
- Very often

**F1B. Receives criticism well**

- Never
- Sometimes
- Very often

**F1C. Controls temper when arguing with other children**

- Never
- Sometimes
- Very often

**F1D. Controls temper in conflict situations with adults**

- Never
- Sometimes
- Very often

**F1E. Responds appropriately to teasing from friends or relatives of his or her own age**

- Never
- Sometimes
- Very often

**F1F. Compromises in conflict situations by changing own ideas to reach agreement**

- Never
- Sometimes
- Very often

**F1I. Cooperates with peers without prompting**

- Never
- Sometimes
- Very often

**F1J. Gets along with people who are different**

- Never
- Sometimes
- Very often



D2A. **Disturbs ongoing activities**

- Never
- Sometimes
- Very often

D2B. **Fidgets or moves too much**

- Never
- Sometimes
- Very often

D2C. **Acts impulsively**

- Never
- Sometimes
- Very often

D2D. **Doesn't listen to what others say**

- Never
- Sometimes
- Very often

D2E. **Is easily distracted**

- Never
- Sometimes
- Very often

D2F. **Interrupts conversations of others**

- Never
- Sometimes
- Very often

**Please rate the degree the child displays the following characteristics.**

**D1A. Argues a lot**

- Not true
- Somewhat or sometimes true
- Very true or often true

**D1B. Cruelty, bullying, or meanness to others**

- Not true
- Somewhat or sometimes true
- Very true or often true

**D1C. Defiant, talks back to staff**

- Not true
- Somewhat or sometimes true
- Very true or often true

**D1D. Demands a lot of attention**

- Not true
- Somewhat or sometimes true
- Very true or often true

**D1E. Destroys his/her own things**

- Not true
- Somewhat or sometimes true
- Very true or often true

**D1F. Destroys property belonging to others**

- Not true
- Somewhat or sometimes true
- Very true or often true

**D1G. Disobedient at school**

- Not true
- Somewhat or sometimes true
- Very true or often true

**D1H. Gets in many fights**

- Not true
- Somewhat or sometimes true
- Very true or often true

D1I. **Physically attacks people**

- Not true
- Somewhat or sometimes true
- Very true or often true

D1J. **Explosive and unpredictable behavior**

- Not true
- Somewhat or sometimes true
- Very true or often true

D1K. **Demands must be met immediately, easily frustrated**

- Not true
- Somewhat or sometimes true
- Very true or often true

D1L. **Screams a lot**

- Not true
- Somewhat or sometimes true
- Very true or often true

D1M. **Stubborn, sullen, or irritable**

- Not true
- Somewhat or sometimes true
- Very true or often true

D1N. **Sudden changes in mood or feelings**

- Not true
- Somewhat or sometimes true
- Very true or often true

D1O. **Sulks a lot**

- Not true
- Somewhat or sometimes true
- Very true or often true

D1P. **Suspicious**

- Not true
- Somewhat or sometimes true
- Very true or often true

D1Q. **Teases a lot**

- Not true
- Somewhat or sometimes true
- Very true or often true

D1R. **Temper tantrums or hot temper**

- Not true
- Somewhat or sometimes true
- Very true or often true

D1S. **Threatens people**

- Not true
- Somewhat or sometimes true
- Very true or often true

D1T. **Unusually loud**

- Not true
- Somewhat or sometimes true
- Very true or often true

SECTION 3

CHILD'S USE OF SPECIAL SERVICES

16. **Is the child receiving any special education or related services because of Attention Deficit/Hyperactivity Disorder (ADD/ADHD)?**

**Do NOT include going to the nurse's office to get medication dispensed.**

Yes

No

17. **Has the child received any of the following services this year at school during the school day?**

A. Individual tutoring in reading/math.....  Yes  No

B. Pull out or "push in" small group program in reading/math.....  Yes  No

C. Pull out English as a Second Language (ESL) program (instructional program designed to teach listening, speaking, reading and writing English language skills) .....  Yes  No

D. In-class English as a Second Language (ESL) program .....  Yes  No

E. Learning a language other than English .....  Yes  No

F. Gifted and talented program .....  Yes  No

G. Counseling or psychological services.....  Yes  No

H. Audiology .....  Yes  No

I. Occupational therapy.....  Yes  No

J. Physical therapy .....  Yes  No

K. Health services .....  Yes  No

L. Special transportation.....  Yes  No

M. Speech or language therapy.....  Yes  No

N. Orientation services .....  Yes  No

O. Mobility services .....  Yes  No

P. Behavior Intervention Plan (BIP), in or out of the classroom ....  Yes  No

18. **Has the child participated in any of the following Federally funded Title I programs or services offered by the school during this school year?**

**MARK ALL THAT APPLY.**

A. Title I reading/English/language arts

- Yes, individually
- Yes, class-wide
- No; not offered

B. Title I ESL/Bilingual

- Yes, individually
- Yes, class-wide
- No; not offered

C. Title I handicapped/special education

- Yes, individually
- Yes, class-wide
- No; not offered

## SECTION 4

### YOUR RELATIONSHIP WITH THE CHILD'S PARENTS/GUARDIANS

- C1. **During the school year, did the child's parents/guardians attend a parent/teacher conference to talk about the child's progress?**
- Yes  
 No
- C2. **If you had a problem with the child, how comfortable would you feel talking to his/her parents/guardians about it?**
- Not at all  
 A little  
 Somewhat  
 A lot  
 A great deal
- C3. **How often do the child's parents/guardians ask questions or make suggestions about the child?**
- Not at all  
 A little  
 Somewhat  
 A lot  
 A great deal
- C4. **How much do you feel the child's parents/guardian have the same goals for their child that the school does?**
- Not at all  
 A little  
 Somewhat  
 A lot  
 A great deal

**SECTION 5**  
**SCHOOL CHARACTERISTICS**

The following questions are about the child's school.

A2. **Is this a public or private school?**

- Public **GO TO QUESTION A2.1**
- Private **GO TO QUESTION A2.2**

A2.1

**Is this public school a...**

- A. Regular public school (do not include a magnet school or school of choice)..... Yes  No
- B. School with a magnet program  
(e.g. science/math school, foreign language immersion school) ..... Yes  No
- C. School of choice (charter school, open enrollment, non-specialized curriculum) ..... Yes  No
- D. Bureau of Indian Affairs (BIA) or tribal school ..... Yes  No
- E. Special Education school (primarily serves children with disabilities) ..... Yes  No

A2.2

**Is this private school a...**

- A. Catholic school ..... Yes  No
- B. Private school not accredited by NAIS..... Yes  No
- C. Private school accredited by NAIS ..... Yes  No
- D. Special Education school (primarily serves children with disabilities) ..... Yes  No



A3. **Circle the lowest grade taught in this school:**

- Programs for special needs children
- Prekindergarten
- Regular kindergarten
- 1<sup>st</sup>
- 2<sup>nd</sup>
- 3<sup>rd</sup>
- 4<sup>th</sup>
- 5<sup>th</sup>
- 6<sup>th</sup>
- 7<sup>th</sup>
- 8<sup>th</sup>
- 9<sup>th</sup>
- 10<sup>th</sup>
- 11<sup>th</sup>
- 12<sup>th</sup>

A3.1. **Circle the highest grade taught in this school:**

- Programs for special needs children
- Prekindergarten
- Regular kindergarten
- 1<sup>st</sup>
- 2<sup>nd</sup>
- 3<sup>rd</sup>
- 4<sup>th</sup>
- 5<sup>th</sup>
- 6<sup>th</sup>
- 7<sup>th</sup>
- 8<sup>th</sup>
- 9<sup>th</sup>
- 10<sup>th</sup>
- 11<sup>th</sup>
- 12<sup>th</sup>

**SECTION 6**  
**SCHOOL CLIMATE**

**Indicate how much you agree or disagree with the following statements about school climate:**

**J1A. Parents are actively involved in this school's programs**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

**J1B. Teacher absenteeism is a problem at this school**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

**J1C. Teacher turnover is a problem at this school**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

**J1D. Child absenteeism is a problem at this school**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

**J1E. Order and discipline are maintained satisfactorily in the building(s)**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

J1F. **Overcrowding is a problem at this school**

- Strongly disagree
- Disagree
- Neither agree nor disagree
- Agree
- Strongly agree

J2. **Have any of the following types of problems happened during this school year at this school?**

- A. Children bringing weapons to school .....  Yes  No
- B. Things being taken directly from children or teachers by force or threat of force at school or on the way to school.....  Yes  No
- C. Children or teachers being physically attacked .....  Yes  No
- D. Children involved in physical fights .....  Yes  No
- E. Children bringing in or using alcohol at school .....  Yes  No
- F. Children bringing in or using drugs at school .....  Yes  No
- G. Vandalism of school property .....  Yes  No

## SECTION 7

### TEACHER CHARACTERISTICS

The following questions are about you as a teacher.

A4. **How do you classify your main assignment at this school, that is, the activity at which you spend most of your time during this school year?**

- Regular classroom teacher
- Special education teacher
- Itinerant teacher (i.e. your assignment requires you to provide instruction/related services at more than one school)
- Long-term substitute (i.e., your assignment requires that you fill the role of a teacher on a long term basis, but you are still considered a substitute)
- Teacher aide
- Other (Specify: \_\_\_\_\_)

A5. **Which category best describes the way your class(es) at this school (is/are) organized?**

- Self-contained class – you teach multiple subjects to the same class of children all or most of the day
- Team teaching – you collaborate with one or more teachers in teaching multiple subjects to the same class of children
- Departmentalized instruction –you teach subject matter courses (e.g. language arts, mathematics, science) to several classes of different children all or most of the day
- “Pull-Out” Class – you provide instruction (e.g. special education, reading) to certain students who are released from their regular classes

K1. **What is the highest level of education you have completed?**

**MARK ONLY ONE RESPONSE.**

- High school diploma or GED
- Associate’s degree
- Bachelor’s degree
- At least 1 year of coursework beyond a bachelor’s, but not a graduate degree
- Master’s degree
- Education specialist or professional diploma based on at least one year of course work past a Master’s degree level
- Doctorate
- Other (please specify: \_\_\_\_\_)

K2. **Counting this school year, how many years have you been a schoolteacher, including part-time teaching?**

\_\_\_\_\_ Years

K3. **What kind of teaching certification do you have?**

- None
- Temporary or emergency certification
- Probational, provisional or transitional, certification
- Certification for completion of an alternative certification program
- Regular certification but less than the highest available
- The highest certification available (permanent or long term)

K4. **Are you certified in the following areas?**

- A. Elementary education .....  Yes  No
- B. Early childhood education .....  Yes  No
- C. Secondary education .....  Yes  No
- D. Reading specialist certification .....  Yes  No
- E. Elementary mathematics.....  Yes  No
- F. Middle/junior high school or secondary mathematics .  Yes  No
- G. Elementary science .....  Yes  No
- H. Middle/junior high school or secondary science.....  Yes  No
- I. ESL certification .....  Yes  No
- J. Special education .....  Yes  No
- K. Other (please specify: \_\_\_\_\_) .....  Yes  No

K5. **What is your gender?**

- Male
- Female

K6. **What is your date of birth?**

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Mo. Day Year

K7. **Are you of Hispanic or Latino origin?**

Yes

No

K8. **Which describes your race?**

**PLEASE MARK ALL THAT APPLY.**

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White

Other (please specify: \_\_\_\_\_)

**SECTION 8**

**CHILD'S SCHOOL RECORD SECTION**

To answer the question in the following section, we would like you to consult the child's school records if necessary.

S1. For this school year, date the child entered this school?

\_\_\_/\_\_\_/\_\_\_

S2. Is the child currently still attending or enrolled in this school?

Yes  No

S3. (IF NO LONGER IN SCHOOL) Date child left this school?

\_\_\_/\_\_\_/\_\_\_

S4. (IF NO LONGER IN SCHOOL) Reason child left this school?

- Transfer
- Expulsion
- End of School Year
- Other Reason. Please Describe \_\_\_\_\_

S5. For this school year, record in the table below the total number of absences for the child. Please also indicate how many of these absences were excused and unexcused absences

Check if school does not maintain these records

	Number
Total Number of Absences	
Number of Excused Absences	
Number of Unexcused Absences	

S6. For this school year, record in the table below the total number of times this child came late to school and indicate how many of these times were excused and unexcused.

Check if school does not maintain these records

	Number
Total Number of Times Late for School	
Number of Excused Times Late for School	
Number of Unexcused Times Late for School	

S7 **In this school year, how many times was this child suspended from school?**

\_\_\_\_\_ Number of Times Suspended

S8 **(IF SUSPENDED) How many total days was this child suspended in this school year?**

\_\_\_\_\_ Number of Days Suspended

S9. **In this school year did the child receive special education services through an Individualized Education Program (IEP)?**

Yes

No **IF NO SKIP TO QUESTION S14.**

S10. **What is the child's primary disability as identified on the child's IEP?**

**MARK ONLY ONE**

- Learning disability
- Serious emotional disturbances
- Speech or language impairment
- Mental retardation
- Blind/Visual impairment
- Deaf/Hard of hearing
- Health impairment
- Orthopedic/Physical impairment
- Multiple impairments
- Deaf/blind
- Developmental delay
- Autism
- Traumatic brain injury
- No classification is given



S11. Which of the following best describes the IEP goals for the child during this school year?

**MARK ALL THAT APPLY**

**Academics**

- Reading
- Mathematics
- Language arts
- Science

**Speech and Language**

- Auditory processing
- Listening comprehension
- Oral expression
- Voice/speech articulation
- Language pragmatics

**Social**

- Social skills
- Behavior goals

**Life Skills**

- Adaptive behavior or self-help skills
- Fine motor skills
- Gross motor skills
- Orientation and mobility
- Other (Specify: \_\_\_\_\_)

S12. Approximately how many hours per week of direct special education and related services (that is, services provided directly to the child from a teacher or another adult), is the child receiving in this school year?

\_\_\_\_\_ Hours per week

S13. Was the child's primary placement in this school year in a general education classroom?

- Yes
- No

S14. Please provide the child's test scores for the most recently administered standardized test.

	<b>Name of Test such as the CAT or ITBS</b>	<b>Description of Assessment or Subject</b>	<b>Test Score</b>	<b>Type of Score such as Raw, Scaled, or T-Score</b>	<b>Grade Level</b>	<b>Date Administered</b>
1						__/__/__
2						__/__/__
3						__/__/__
4						__/__/__