

Student Survey

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NOTE: EACH SCHOOL WOULD CHOOSE ONLY 3-5 OF THE FOLLOWING QUESTIONS FOR STUDENTS, DEPENDENT ON THE FOCUS OF THEIR INDIVIDUAL SCHOOL IMPROVEMENT PLAN, AND THE GRADE LEVELS OF STUDENTS.

Student Achievement

1. On a scale of 1-5, with 5 being “Very Good” and 1 being “Very Poor” how well do you think you are performing in each of the following areas? (Schools would provide as choices only the areas below they are focusing on from the following list).

	Very Poor	Poor	Neither Poor nor Good	Good	Very Good
	1	2	3	4	5
Reading comprehension	0	0	0	0	0
Writing	0	0	0	0	0
Oral communication	0	0	0	0	0
Listening	0	0	0	0	0
Math computation	0	0	0	0	0
Math reasoning/problem solving	0	0	0	0	0
Science	0	0	0	0	0
Social Studies/History	0	0	0	0	0
Health/Physical Education	0	0	0	0	0
Foreign Language	0	0	0	0	0
Art	0	0	0	0	0
Music	0	0	0	0	0
Problem Solving	0	0	0	0	0
Reasoning/Inquiry	0	0	0	0	0
Using technology	0	0	0	0	0
Leadership	0	0	0	0	0
Personal Discipline/Self-control	0	0	0	0	0
Study Skills	0	0	0	0	0

2. On a scale of 1-5, with 5 being “Very Good” and 1 being “Very Poor,” please rate the quality of instruction your school provides in each of the following subject areas.

	Very Poor	Poor	Neither Poor nor Good	Good	Very Good
	1	2	3	4	5
Reading	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Writing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Mathematics	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Science	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social Studies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. Pick the THREE areas below where you feel you need the most help. (**Place checks by the three areas where you feel you need the most help**). (Schools would provide as choices only those areas of focus from the following list).

Reading comprehension	<input type="checkbox"/>		Reasoning/Inquiry	<input type="checkbox"/>
Writing	<input type="checkbox"/>		Using technology	<input type="checkbox"/>
Oral communication	<input type="checkbox"/>		Leadership	<input type="checkbox"/>
Listening	<input type="checkbox"/>		Personal Discipline/Self-control	<input type="checkbox"/>
Math computation	<input type="checkbox"/>		Foreign Language	<input type="checkbox"/>
Math reasoning/problem solving	<input type="checkbox"/>		Art	<input type="checkbox"/>
Science	<input type="checkbox"/>		Music	<input type="checkbox"/>
Social Studies/History	<input type="checkbox"/>		Problem Solving	<input type="checkbox"/>
Health/Physical Education	<input type="checkbox"/>			

4. When I need help with my school work, someone at my school is available to help me. (**Please mark one**).

- Strongly agree
- Agree
- Undecided
- Disagree
- Strongly disagree

5. This school is preparing me well for the next grade. (**Please mark one**).

- Strongly agree
- Agree
- Undecided
- Disagree
- Strongly disagree

6. [FOR HIGH SCHOOL STUDENTS ONLY] This school is preparing me well for what I want to do after high school. **(Please mark one).**

- Strongly agree
- Agree
- Undecided
- Disagree
- Strongly disagree

7. [FOR HIGH SCHOOL STUDENTS ONLY] This school is preparing me well for the world of work. **(Please mark one).**

- Strongly agree
- Agree
- Undecided
- Disagree
- Strongly disagree

8. **When I graduate I am confident in my:**

	<u>Yes</u>	<u>No</u>
Ability to write	<input type="radio"/>	<input type="radio"/>
Ability to read	<input type="radio"/>	<input type="radio"/>
Ability to do mathematics	<input type="radio"/>	<input type="radio"/>
Ability to present information	<input type="radio"/>	<input type="radio"/>
Technology skills	<input type="radio"/>	<input type="radio"/>

Safe Environment

9. My school maintains good discipline. **(Please mark one).**

- Strongly agree
- Agree
- Undecided
- Disagree
- Strongly disagree

10. How safe do you feel at school? **(Please mark one).**

- Very safe **[Skip to Question 12]**
- Safe **[Skip to Question 12]**
- Undecided **[Skip to Question 12]**
- Unsafe
- Very Unsafe

11. [FOLLOWUP QUESTION ONLY FOR THOSE WHO ANSWERED “UNSAFE” TO PRIOR QUESTION] How often do you feel unsafe when you are at school? (**Please mark one**).

- Never
- Rarely
- Some days
- Most days
- Every day

12. On a scale of 1-5, with 5 being very safe and 1 being unsafe, how safe do you feel in the following locations in your school?

	Very unsafe 1	Unsafe 2	Neither safe nor Unsafe 3	Safe 4	Very Safe 5	Does Not Apply
a. School Hallways	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
b. Classrooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
c. School Lunchroom	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
d. School Playground	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
e. School Parking Lot	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
f. School Restrooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
g. School Buses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Walking to and from school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Other (please specify): _____	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

13. My school deals appropriately with students who bully other students. (**Please mark one**).

- Strongly agree
- Agree
- Undecided
- Disagree
- Strongly disagree

14. What can teachers and administrators do to help stop bullying? (**Check all that apply**).

- Supervise the playground and halls better
- Establish rules against bullying
- Enforce rules against bullying
- Teach kids how to get along better
- Other _____

15. Discipline problems are handled quickly at my school. (***Please mark one***).

- Strongly agree
- Agree
- Undecided
- Disagree
- Strongly disagree

16. Discipline problems are handled fairly at my school. (***Please mark one***).

- Strongly agree
- Agree
- Undecided
- Disagree
- Strongly disagree

School Partnerships

17. Does your school openly invite parent(s)/guardian(s) to take part in school related events? (Examples might include parent nights, sports, or field trips.) (***Please mark one***).

- Yes
- No
- No answer

18. How often do your teachers communicate with your parent(s)/guardian(s) (by phone, email, classroom newsletter, etc.)? (***Please mark one***).

- At least once a week
- At least once a month
- Once or twice a year
- No answer