

APPENDIX H

**PRINCIPAL QUESTIONNAIRE
(CONTROL SCHOOLS)**

NWREL Experimental Study of Project CRISS

NOTE: The intent is to show the content of the questionnaire. This questionnaire will be reformatted into a paper scannable form or an on-line questionnaire.

Principal Questionnaire¹
(CONTROL School Version)

This questionnaire is part of an experimental study being conducted by Northwest Regional Educational Laboratory (NWREL) under contract with the U.S. Department of Education. Your answers are critically important and will be used to better understand principal characteristics in the schools participating in the study. Please be candid in your answers. Responses to this data collection will be used only for statistical purposes. The reports prepared for this study will summarize findings across the sample and will not associate responses with a specific district, school, or individual. We will not provide information that identifies you or your district or school to anyone outside the study team, except as required by law.

*For questions 1–4, please answer in reference to activities during the **current school year**.*

1. Have teachers in your school participated in any *group* professional development that is explicitly related to improving student reading, writing, or literacy?

_____ Yes

_____ No

IF YES, PLEASE PROVIDE DETAILS BELOW:

¹ According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is xxxx-xxxx, expiration date xx-xx-xx. The time required to complete this information collection is estimated to average 10 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, D.C. 20202-4700. **If you have comments or concerns regarding the status of your individual submission of this form, write directly to:** Gil Garcia, U.S. Department of Education, 555 New Jersey Avenue, N.W., Room 506E, Washington, D.C. 20208.

Topic/Content Covered <i>(Include Provider/Program if known)</i>	Approx. contact hours per teacher	Participating Teachers <i>(specify grades/subjects or write in ALL if all teachers participated)</i>
		GRADE(S): _____ SUBJECT(S): _____ _____
		GRADE(S): _____ SUBJECT(S): _____ _____
		GRADE(S): _____ SUBJECT(S): _____ _____

2. Have you personally participated in the professional development activities listed above or any others explicitly related to improving student reading, writing, or literacy?

___ Yes

___ No

IF YES, PLEASE LIST THE ACTIVITIES YOU PARTICIPATED IN:

3. Beyond routine employee personnel evaluations, how often do you conduct classroom “walk throughs” for the purpose of observing instructional practices and providing feedback to teachers?

___ Hardly ever or never

___ Less than once a month

___ About once a month

___ Several times a month

___ About once a week

____ More than once a week

IF "HARDLY EVER OR NEVER" SKIP QUESTION 4

4. Do you use any specific materials, methods, or rubrics for classroom "walk throughs?"

____ Yes

____ No

IF YES, PLEASE BRIEFLY DESCRIBE THE METHODS OR RUBRICS YOU USE:

The remaining questions ask about your background and experience.

5. How many years (including this year) of principal experience do you have in a high school or middle school?

____ years

6. How many years (including this year) have you been the principal at *this* school?

____ years

7. How many years of middle or high school *teaching experience* did you have before becoming a principal?

____ years

IF NONE, SKIP QUESTION 8

8. What core content subjects did you teach in middle or high school during your teaching career? (*check all that apply, and write in other subjects under Other, if applicable*)

- Language Arts
- Science
- Mathematics
- Social Studies
- Other: _____

9. What is your highest educational degree completed?

- Bachelor (B.S. or B.A.)
- Masters (M.S., M.A., M.Ed.)
- Doctorate (Ph.D, Ed.D, J.D)
- Other: _____

Thank you. Please return your completed questionnaire to the Northwest Regional Educational Laboratory in the postage-paid envelope provided.

Rev. 10/11/07