

**DATA ELEMENTS OF Educator Survey
Using NASA Resources in the Classroom**

Common Collection Categories			
Question	Staff and Project Participant Characteristics	Project Implementation Characteristics	Project Outputs
Part I			
<p>1. Please select the NASA program(s) from which you received NASA education materials (<i>check each that applies</i>):</p> <ul style="list-style-type: none"> <input type="checkbox"/> Aerospace Education Service (AESP) <input type="checkbox"/> Digital Learning Network (DLN) <input type="checkbox"/> Educator Astronaut <input type="checkbox"/> Educator Resource Center (ERC) <input type="checkbox"/> NASA Explorer Schools (NES) <input type="checkbox"/> Science Engineering Mathematics Aerospace Academy (SEMAA) <input type="checkbox"/> Unsure <input type="checkbox"/> Other, please specify: _____ 		x	
<p>2. After participating in a NASA program, I have been confident in my ability to apply the knowledge and/or skills learned.</p> <p>Strongly Agree Agree Neutral Disagree Strongly Disagree</p>			x

<p>3. Did you receive any NASA curriculum materials or publications during the program?</p> <p>Yes No</p>		X	
<p>4. Did you receive training on materials?</p> <p>Yes No</p>		X	
<p>5. Have you used these materials in your classroom?</p> <p>Yes No</p>			X
<p>6) If so, please discuss how you used them, and the outcome, or if not, why not?</p>			X
<p>Please indicate the amount you are currently performing the following activities, based on your participation in the program</p> <p>7) Sharing the NASA resources with other teachers, formally or informally.</p> <p>A major amount High Some Minimal None</p>			X
<p>8) Using NASA resources to enhance my instruction</p> <p>A major amount High Some Minimal None</p>			X
<p><u>Changes:</u></p>			X

<p>9) Based on your program experience, have you changed any of your teaching activities?</p> <p>Yes No</p>			
<p>10. If yes, which activities did you change or add to?</p> <ul style="list-style-type: none"> – Used NASA materials – Used subject matter covered in the program – Used technology resources introduced in the program – Used web resources presented in the program – Used teaching techniques taught in the program <p>Other Please Specify</p>			X
<p><u>Barriers:</u></p> <p>11. What barriers, if any, have prevented you from using or integrating NASA materials in your classroom? Please a check mark before any or all of the following that apply.</p> <ul style="list-style-type: none"> – Lack of opportunity to use the skills/knowledge – Insufficient knowledge and understanding of the material – Lack of computer and/or technology resources – Not enough time to integrate the material into the curriculum – Systems and processes within the school will not support the use of skills/knowledge – Lack of alignment 			X

<p>between local and/or state standards with NASA content</p> <p>– Other Please Specify:</p>			
<i>Part II: Participant Demographic Data</i>			
<p>1) What is your ethnicity? (Check one)</p> <p>– Hispanic or Latino</p> <p>– Not Hispanic or Latino ___</p> <p>– Do Not Wish to Report ___</p>	X		
<p>2) What is your Race? (Check one or more)</p> <p>– American Indian or Alaska Native ___</p> <p>– Asian ___</p> <p>– Black or African American ___</p> <p>– Native Hawaiian or other Pacific Islander ___</p> <p>– White</p> <p>– Do Not Wish to Report</p>	X		
<p>3) Disability Status? (Check one or more):</p> <p>– Hearing Impairment</p> <p>– Visual Impairment</p> <p>– Mobility/Orthopedic Impairment</p> <p>– Other (specify)</p> <p>– None</p> <p>– Do Not Wish to Report</p>	X		
<p>4) Citizenship? (Choose one)</p> <p>– U.S. Citizen/U.S. National</p> <p>– U.S. Permanent Resident</p> <p>– Other non-U.S. Citizen</p> <p>– Do Not Wish to Report</p>	X		