

Student Questionnaire

The *Regional Educational Laboratory—REL Northeast and Islands (REL-NEI)* appreciates your taking the time to fill out this questionnaire.

Instructions

1. Please log in to the web-based survey with your secure username and password
2. Please answer each question to the best of your ability.
3. Please direct any questions about this survey to:

American Institutes for Research
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PAPERWORK BURDEN STATEMENT

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 **1850-XXXX**. The time required to complete this information collection is estimated to average 20 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:** Brooks Bowden, U.S. Department of Education, Institute of Education Sciences, 555 New Jersey Avenue, NW, Washington, DC, Washington, D.C. 20208.

Your answers may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law. (Education Sciences Reform Act, Section 183)

1) What is the name of your school? _____

2) What is the name of your math teacher? _____

3) What is the name of your math class? _____

4) What is the name of the high school you will attend next year? _____

5) Are you male or female?

1 Male

2 Female

6) Are you of Hispanic or Latino origin? (Hispanic or Latino refers to someone from a Mexican, Mexican American, Chicano, Puerto Rican, Cuban or other Spanish, Hispanic, or Latino background.)

1 Hispanic or Latino

2 Not Hispanic or Latino

7) What is your race (check all that apply)?

1 American Indian or Alaska Native

2 Asian

3 Black or African-American

4 Native Hawaiian or Other Pacific Islander

5 White

Your Feelings about School

8) Think about the grades you earned during 6th, 7th, and 8th grade. How would you describe your overall grades in MATH classes?

1 Mostly As

2 Mostly Bs

3 Mostly Cs

4 Mostly Ds

5 Mostly below Ds

6 Classes not graded

9) Which of the following math classes do you expect to take next year (starting next fall, Fall 2009)?

- | | |
|---|--|
| 1 <input type="checkbox"/> Algebra I | 7 <input type="checkbox"/> Applied math |
| 2 <input type="checkbox"/> Geometry | 8 <input type="checkbox"/> Basic math |
| 3 <input type="checkbox"/> Algebra II | 9 <input type="checkbox"/> Integrated math |
| 4 <input type="checkbox"/> Pre-Calculus | 10 <input type="checkbox"/> Other |
| 5 <input type="checkbox"/> Calculus | 11 <input type="checkbox"/> Not sure |
| 6 <input type="checkbox"/> Trigonometry | 12 <input type="checkbox"/> None |

10) Which of the following math classes do you expect to take while you are in high school?

- | | |
|---|--|
| 1 <input type="checkbox"/> Algebra I | 7 <input type="checkbox"/> Applied math |
| 2 <input type="checkbox"/> Geometry | 8 <input type="checkbox"/> Basic math |
| 3 <input type="checkbox"/> Algebra II | 9 <input type="checkbox"/> Integrated math |
| 4 <input type="checkbox"/> Pre-Calculus | 10 <input type="checkbox"/> Other |
| 5 <input type="checkbox"/> Calculus | 11 <input type="checkbox"/> Not sure |
| 6 <input type="checkbox"/> Trigonometry | 12 <input type="checkbox"/> None |

11) Which of the following best describes your educational goals?

- 1 Will not finish high school
- 2 Graduate high school
- 3 Some education after high school
- 4 Graduate college
- 5 Go to graduate schools
- 6 I don't know

Your Math Class

12) How much do you agree with the following statements about your math class?

My math teacher:

		Strongly Disagree	Disagree	Agree	Strongly Agree
a.	Expects me to do my best all the time.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b.	Expects everyone to participate.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c.	Doesn't let me get away with being lazy.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

d.	Expects everyone to work hard.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e.	Really listens to what I have to say.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f.	Believes I can do well in school.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g.	Is willing to give extra help on schoolwork if I need it.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
h.	Helps me catch up if I am behind.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
i.	Notices if I have trouble learning something.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

13) How much do you agree with the following statements about your math class?

		Strongly Disagree	Disagree	Agree	Strongly Agree
a.	The topics we are studying are interesting and challenging.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b.	I usually look forward to this class.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c.	I work hard to do my best in this class.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d.	I am usually bored with what we study in this class.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e.	Sometimes I get so interested in my work I don't want to stop.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f.	I often count the minutes until class ends.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g.	This class really makes me think.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
h.	No student wastes time in this class.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

14) In your math class, how often:

		Never	Once in a While	Most of the Time	All of the Time
a.	Do you find the work difficult?	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b.	Are you challenged?	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c.	Does the teacher ask difficult questions on tests?	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d.	Does the teacher ask difficult questions in class?	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e.	Do you have to work hard to do well?	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

15) A) How often does your teacher give you homework in mathematics?

- 0 Never
- 1 Less than once a week
- 2 1 or 2 times a week
- 3 3 or 4 times a week
- 4 Every day

B) When your teacher gives you mathematics homework, about how many minutes are you usually given?

- 0 Fewer than 15 minutes
- 1 15-30 minutes
- 2 31-60 minutes
- 3 61-90 minutes
- 4 More than 90 minutes

16) Please answer the following questions about your math class this year.

Materials in my math class:

		Poor	Fair	Good	Very Good	Excellent
a.	The textbook	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b.	The handouts	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c.	My teacher's assignments	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d.	The quizzes	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e.	The tests/exams	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f.	Technology – use of computers	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g.	Technology – use of calculators and other tools	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

The instruction in my math class:

		Poor	Fair	Good	Very Good	Excellent
a.	Organization of my teacher's presentation	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b.	My teacher's preparation	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c.	My teacher's communication to the class	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

d.	My teacher is knowledgeable about the course content	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e.	My teacher is able to keep the class focused on the course material	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f.	My overall impression of my math teacher this year	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

Your Feelings about Using Computers

17) Approximately how many courses (including your current courses) have you taken that were delivered in the following modes?

	0	1-2	3-5	6-8	More than 8
a. Totally online course	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. Hybrid course (a mix of online and regular-face-to-face instruction in the same course)	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c. Supplemental course (extra instruction for a particular course that requires use of a computer program)	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

18) What type of Internet connection do you have at home?

- 0 Low speed (dial up)
- 1 High speed (cable, DSL, T1)
- 2 No Internet connection at home

19) How much do you agree with the following statements?

	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I enjoy doing things on a computer.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. I am tired of using a computer	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. I concentrate on a computer when I use one.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. I feel comfortable working with a computer.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. I think that it takes a long time to finish when I use a computer	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. I feel comfortable using E-mail to contact my teachers.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g. I enjoy lessons on the computer.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
h. I get a sinking feeling when I think of trying to use a computer.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

20) In your current or most recent mathematics class, how often do/did you use computers in the following ways?

	Never	Rarely	Less than once a Week	Once or twice a week	Every day or almost every day
a. Review work from the previous day.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. Do word problems or problem solving activities.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c. For graphing.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d. To practice math drills.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e. To analyze data	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f. To apply what was learned in class to new situations or problems	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g. The teacher uses/used the computer to instruct us individually.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h. The teacher uses/used the computer to demonstrate new topics in mathematics	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

21) How much do you agree with the following statements?

	Strongly Disagree	Disagree	Agree	Strongly Agree
a. A computer is an important tool for learning mathematics concepts.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Computer examples and simulations have helped me understand the concepts in my classes.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Using a computer makes learning math more complicated than it needs to be.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

Your Feelings about Math

22) How much do you agree with the following statements?

	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I usually do well in mathematics.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. I would like to take more mathematics in school.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Mathematics is more difficult for me than for many of my classmates.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. I enjoy learning mathematics.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Sometimes, when I do not initially understand a new topic in mathematics, I know that I will never really understand it.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. Mathematics is not one of my strengths.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g. I learn things quickly in mathematics.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

23) How much do you agree with the following statements?

	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I think learning mathematics will help me in my daily life.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. I need mathematics to learn other school subjects.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. I need to do well in mathematics to get to the college or university of my choice.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. I would like a job that involved using mathematics.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. I need to do well in mathematics to get the job I want.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

24) How much do you agree with the following statements?

	Strongly Disagree	Disagree	Agree	Strongly Agree
a. I would like to avoid using mathematics in college.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. I am willing to take more than the required amount of mathematics.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. I plan to take as much mathematics as I can during my education.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. The challenge of mathematics appeals to me.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. I don't want to take any more mathematics courses than I absolutely have to.	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

The Math Test You Just Took

25) How difficult was this math test?

- 0 Very difficult
- 1 Somewhat difficult
- 2 Normal
- 3 Fairly easy
- 4 Very easy

26) How important was your success on this math test to you?

- 0 Not very important
- 1 Somewhat important
- 2 Important
- 3 Very important

27) Please describe your level of effort on this math test.

- 0 Could have tried much harder
- 1 Could have tried harder
- 2 Tried about as hard as I could
- 3 Tried very hard

You are done with the survey. Thank you for participating.