APPENDIX C

TEACHER BACKGROUND QUESTIONNAIRE OMB No.: 1850-0802 Expiration Date: xx/xx/xxxx

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TEACHER BACKGROUND QUESTIONNAIRE



STUDY OF TEACHER INDUCTION PROGRAMS



Induction refers to a program of professional development and support for beginning teachers. Teacher induction programs consists of various components and activities and often include mentoring and professional development workshops.

The questions on this baseline form ask about your background, your current teaching experiences, and your plans for the future. For each item, please mark only one answer, unless instructions say to "MARK (X) ALL THAT APPLY." Thank you very much for helping us to learn more about teacher induction.

We want you to know that:

- 1. We are asking you these questions to gather information about new teachers' career decisions and their experiences with teacher induction.
- 2. You may skip any questions you do not wish to answer; however, we hope that you answer as many questions as you can. Your answers to questions will not affect your eligibility for any public program.
- 3. All responses are <u>confidential</u>. Your responses will be combined with those of other teachers, and the answers you give will never be identified as yours.

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For questions, call Pat Nemeth at 877-840-4740

The U.S. Department of Education wants to protect the privacy of individuals who participate in surveys. Your answers will be combined with other surveys, and no one will know how you answered the questions. This survey is authorized by law (1) Sections 171(b) and 173 of the Education Sciences Reform Act of 2002, Pub. L. 107-279 (2002); and (2) Section 9601 of the Elementary and Secondary Education Act (ESEA), as amended by the No Child Left Behind (NCLB) Act of 2001 (Pub. L. 107-110).

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1850-0802. The time required to complete this information collection is estimated to average 25 minutes per respondent, including the time to review instructions, gather the data needed, and complete and review the information collected. 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, DC 20202. If you have comments or concerns regarding the status of your individual submission of this form, write directly to: U.S. Department of Education, Institute of Education Sciences, 555 New Jersey Avenue, NW, Washington, DC 20208.

A. PROFESSIONAL BACKGROUND INFORMATION

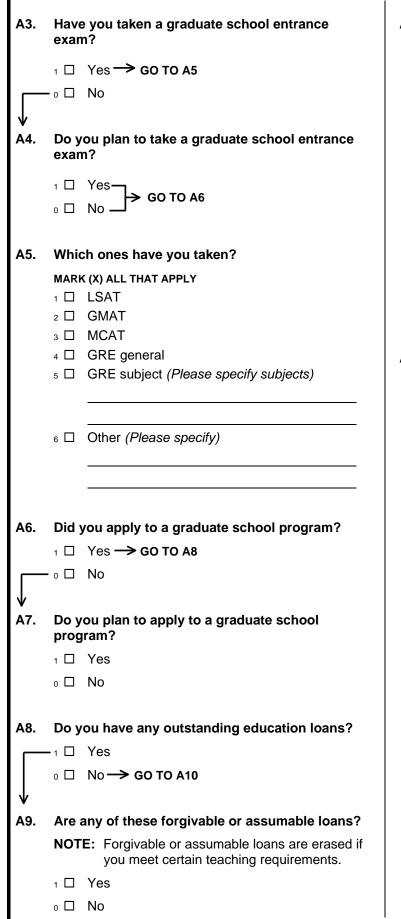
YOU MAY USE EITHER A PENCIL OR A PEN.

A1. Please describe your postsecondary degrees in the chart below.

Α.	В.	С.	D.	E.
Year Degree Awarded	Type of Degree	Name of College or University	Major Field of Study	Minor Field of Study
	1 🗆 Associate's			
	2 🗆 Bachelor's			
	2 🗆 Bachelor's			
	з 🗆 Master's			
	4 🛛 Other (Please specify)			
	з 🗆 Master's			
·	4 🛛 Other (Please specify)			

A2. Are you currently working toward an advanced degree (for example, Master's, Ed.D., or Ph.D.) or additional credits?

₁ 🗆 Yes→	
° □ No]	² Additional Credits
↓ GO TO A3	a. NAME OF COLLEGE OR UNIVERSITY:
	b. MAJOR FIELD OF STUDY:



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A10. Approximately how much do you have in outstanding education loans?

NOTE: If you have consolidated your education loans with other loans, please estimate the amount for education, as best as you can.

- 1 Under \$5,000
- 2□ \$5,000 to \$9,999
- ₃□ \$10,000 to \$19,999
- ₄□ \$20,000 to \$29,999
- ₅□ \$30,000 to \$39,999
- 6□ \$40,000 to \$49,999
- 7□ \$50,000 to \$59,999
- 8□ \$60,000 to \$69,999
- 9□ \$70,000 to \$79,999
- 10□ \$80,000 or greater
- 11 Don't know

A11. Which of the following statements most accurately describes the <u>type of teaching</u> <u>certificate/license/credential</u> that you currently hold?

States vary in the types of certificates they issue. Please select from the list below the statement that BEST describes the certificate/license/ credential that you hold.

MARK (X) ONE ANSWER ONLY

A regular or standard state certificate

Year certified | | | |

 A certificate that is issued to candidates after satisfying all requirements except the completion of a probationary teaching period

Year certified | | | | |

- A certificate that is issued to candidates with the expectation that additional requirements be completed, such as passing a test or coursework
- An emergency certificate or waiver that is issued for a specified time period to persons with insufficient teacher preparation
- 5 □ Other (Please describe)

2

 $_{6}$ \Box I am not certified \rightarrow GO TO A14

A12. Which of the following statements best describes how you earned your teaching certificate?

- 1 In a traditional teacher certification program (see below for definition) as part of a bachelor's degree
- ² In a traditional teacher certification program (see below for definition) as a "5th year" or master's degree
- ³ As part of an alternative teacher certification program (see below for definition)
- ₄ □ Other (*Please specify*)

Traditional teacher certification program – An education program in which a candidate completes the necessary initial study leading to an entry-level teaching certificate before beginning employment as a school teacher. Higher education institutions deliver the training as part of a bachelor's or master's degree program.

Alternative teacher certification program – A program designed for individuals who already have a post-secondary degree. Minimal or no education courses or training are required before beginning employment in a school. Candidates often take courses and receive training while teaching. Training is delivered by higher education institutions, state agencies, or local school districts. Full certification is received one to three years after beginning the first teaching job.

A13. From the list below, select the areas in which you are certified.

MARK (X) ALL THAT APPLY

- 1 General elementary education
- 2 D Bilingual education
- ³ D Special education (*Please specify*)
- ⁴ A specific subject area or areas (*Please specify*)

5 □ Other (Please specify)

A14.	Are you currently pursuing state certification? • 1	A20.	 How would you describe your student teaching experience in terms of the classroom teacher with whom you spent the most time? 1
A16.	Are you currently pursuing advanced professional certification? $-1 \Box$ Yes $0 \Box$ No \rightarrow GO TO A18 Have you completed all your course work for this certification? $1 \Box$ Yes $0 \Box$ No \rightarrow GO TO A18	A21. A22.	 Did you teach children from families of the same socio-economic level as children you're now teaching? 1
	 Did you student teach? 1 ☐ Yes 0 ☐ No → GO TO A23 NOTE: Student teaching (also called practice teaching) – A school-based experience for students enrolled in a post-secondary education institution that is supervised by both a certified experienced teacher and a university or college supervisor. It is generally a requirement of pre-service teachers who have completed the education coursework leading to a degree and are seeking certification or licensure to teach in a public school. How many weeks did you student teach? _ NUMBER OF WEEKS 	A23.	NOT INCLUDING STUDENT TEACHING, have you ever worked in a classroom <u>before</u> this current school year? □ Yes □ No → GO TO A25

A24. NOT INCLUDING THIS SCHOOL YEAR, please indicate the number of years you've worked in schools, the type of school, and the grade level you taught in any of the following positions (either part-time or full-time).

NOTE: Enter "00" in Column A if you have never worked in this capacity Enter "01" in Column A if you worked less than one year

	Enter 01 in Column A li you					
			M	B. School ARK (X) ALL THAT AF		-
		A. Number of Years	This School	Different Public School	Private School	C. Grade Level(s) or Main Assignment
а.	Certified teacher		1 🗆	2 🗆	з 🗆	
b.	Emergency certified teacher		1 🗆	2 🗆	з 🗆	
с.	Teacher aide		1 🗆	2 🗆	з 🗆	
d.	Long-term substitute teacher		1 🗆	2 🗆	з 🗆	
e.	Substitute teacher		1 🗆	2 🗖	з 🗆	
f.	Other (Please specify)		1 🗆	2 🗆	з 🗆	
A25	. Which grade level do you currently	v teach?	A28.	How many of the	se students	are:
	 Prekindergarten Kindergarten 1 Kindergarten 1 St 2 2nd 3 3rd 3 3rd 4 4th 5 5th 5 5th 6 6th 7 7th 8 8th 9 Other (<i>Please specify</i>) 		A29. A30.	 b. Not Hispanic of How many are: a. American India b. Asian, c. Black or Africa d. Native Hawaiia Other Pacific Is e. White? 	an or Alaska n American, an or slander, or	Native,
A26	 Is this the grade level you prefer te 1 □ Yes 0 □ No 	aching?		 a. Have an Individ Plan (IEP)? DO NOT include students. b. Have a 504 Set 	de gifted and	
A27	in the class you taught during the FULL WEEK of teaching?			c. Were approved reduced-priced. Are in an ESL/e. Receive Title I	lunches? ELL program	
	_ STUDENTS → INDICATE: a. _ NUM	BER OF BOYS	A31.	Are you a membe employee associa		
	b. NUM	BER OF GIRLS		1 □ Yes 0 □ No		

		B. YOUR TEAC	HING	CAREER
B1.	helo teac	CE GRADUATING FROM COLLEGE, have you d a full-time job other than your current ching job?	В3.	Thinking back to your job search activities before your current teaching position, did you interview for any non-teaching jobs?
	0	Yes No, this is my first job since college —> GO TO B3		-1 \Box Yes $\circ \Box$ No \rightarrow GO TO B6 Describe the binds of isba yes interviewed for
B2.	tell	CE GRADUATING FROM COLLEGE, please us about the job you held the longest FORE your current teaching position.	B4.	Describe the kinds of jobs you interviewed for.
	you	NOT include a job that was an official part of r teacher preparation program (for instance, dent teaching).		
	a.	What was your job title?		
		1 Self-employed		
	b.	What were your responsibilities? What did you do in this job? (<i>Please be specific</i>)		
			B5.	Did you receive any job offers?
				1 □ Yes 0 □ No
	C.	What did your employer make, do, or sell?	B6.	For your current teaching position, did you interview at
				<u>Yes</u> <u>No</u>
	d.	Was this job in the public or private sector?		a. Other schools within your current district?₁ □ ₀ □
		MARK (X) ONE ANSWER ONLY		b. Other school districts? 1 0 0
				c. Other types of schools
		 ² □ Private, for profit ³ □ Private, not for profit 		(e.g., private or parochial)? $1 \square 0 \square$
	e.	How many years did you work in this job?		
		Image: Image with the system of the syste		

Did the school district allow you any input as to where you would be placed?	B11. Which of the following statements best describes your plans?
₁ □ Yes	MARK (X) ONE ANSWER ONLY
₀ □ No	I D I plan to teach at least until I am eligible for retirement
Is the school you're teaching in the one that you wanted to be placed in?	 I will probably continue teaching unless another opportunity presents itself I plan to leave teaching as soon as I can
1 □ Yes	
• 🗆 No	I plan to pursue another education-related career at some point
2 Had no preference -> GO TO B10	 I plan to pursue another career outside the field of education at some point
Did any of the following reasons influence your	6 I plan to have children and stop teaching at some point
preference in a particular school?	7 □ I plan to stop working outside the home at some point for reasons not related to children
1 The principal's leadership	₀ □ I am going to see if I like teaching before
 A program of support and information provided to beginning teachers 	I make plans I am undecided at this time
3	10□ Other (<i>Please specify</i>)
 Other opportunities offered to you such as coaching a sports team, etc. 	
₅ □ The school's organization/environment	
6 🗆 The school's location	
$_7$ \Box Knew other teachers in the school	B12. Approximately how many years do you think you
${}_{8}$ \Box Did student teaching at same school	will remain in teaching after this year?
9 □ Other reason (Please specify)	I will probably teach for
	more years
 Prior to being hired, had you heard about a new teacher induction program in the district? 1 □ Yes 0 □ No 	
	 where you would be placed? 1 □ Yes 0 No Is the school you're teaching in the one that you wanted to be placed in? 1 □ Yes 0 No 2 □ Had no preference → GO TO B10 Did any of the following reasons influence your preference in a particular school? MARK (X) ALL THAT APPLY 1 □ The principal's leadership 2 □ A program of support and information provided to beginning teachers 3 □ The grade level/subject in which there was an opening 4 □ Other opportunities offered to you such as coaching a sports team, etc. 5 □ The school's location 7 □ Knew other teachers in the school 9 □ Did student teaching at same school 9 □ Other reason (<i>Please specify</i>)

	following questions refer to your before-tax earnings from teaching and other employment. Consider current school year to run from July 1, 2005 to June 30, 2006.
B13.	During the current school year, what is your academic-year, base teaching salary?
	\$,,, 0 0
B14.	Does your base teaching salary include additional compensation for teaching in a more challenging school?
	1 🗆 Yes
	o □ No
B15.	During the current school year, do you, or do you expect to, earn any additional compensation from this school system for extracurricular or additional activities such as coaching, student activity sponsorship, or professional development activities?
	1 □ Yes → a. How much? \$, _ . _0 0
B16.	During the current school year, do you, or do you expect to, earn additional compensation from working in
	any job OUTSIDE this school system?
	1 \Box Yes \rightarrow a. How much? $, , $

	C. PERSONAL BACKG	ROUN	ID INFORMATION
C1.	In what year were you born?	C8.	Are you male or female?
	<u>1 9 1 YEAR</u>		1 🗆 Male
	·		2 🗆 Female
C2.	Are you currently married or living with a partner, or are you single, separated, divorced, widowed, or have you never been married?	C9.	Do you currently own or rent the residence where you live, or do you live with your parents?
	$_{1}$ \Box Married or living with a partner		¹ Own (either paying a mortgage or own outright)
	² Single, separated, divorced, widowed, or		2 🗆 Rent
	never married -> GO TO C6		$_{3}$ \Box Live with parents
			4 Live with someone else rent-free
C3.	What was your spouse or partner's total income (before taxes and other deductions) for last year? \$	C10.	Do you have any children living with you? Include birth, adopted, foster, or stepchildren.
C4.	How much time does your spouse or partner spend commuting to or from work each day?		$\circ \Box \text{No} \longrightarrow \text{GO TO C12}$
		C11.	How many of your children are
	NOTE: Please indicate miles and minutes. Your best estimate is fine.		a. Under the age of 1?
	MILES COMMUTING ONE WAY		b. Ages of 1 to 5?
	MINUTES COMMUTING ONE WAY		c. Ages 6 to 11?
			d. Ages of 12 to 18?
C5.	What is the likelihood that your spouse or partner's job will require your family to relocate in the next five years?		e. Over the age of 18? _
		C12.	Do you live in the same school district where you teach?
	 Very likely Somewhat likely 		
	3 Somewhat unlikely		
	₄ □ Not at all likely		₀ □ No
C6.	What is your ethnic background?	C13.	How far do you live from the school where you teach?
	1 Hispanic or Latino		NOTE: Please indicate miles and minutes. Your best estimate is fine.
	o D Not Hispanic or Latino		MILES COMMUTING ONE WAY
C7.	Mark the box or boxes that best describes your race.	014	··
	 American Indian or Alaska Native Asian 	C14.	Did you attend elementary school(s) in a school with a socio-economic level similar to the one you're now teaching in?
	 Black or African American Native Hawaiian or Other Pacific Islander 		1 🗆 Yes
	⁴ □ Native Hawaiian of Other Pacific Islander ⁵ □ White		₀ □ No

	D. CONT	TACT INFORMAT	ION
D1.	The survey you have completed involves bri in the labor force. Providing the information us contact you if you move or change jobs.	below is voluntary, n	ot mandatory. This information will help
	Please PRINT your name, your spouse's nan and the most convenient time to reach you.	ne (if applicable), your	home address, your telephone number,
	Your Name:		
	Spouse's Full Name:		
	Street Address:		
	City:	State:	Zip Code:
	Home Telephone: () - Area Code I	- <u> </u> _ _ Number	
	In whose name is the telephone number liste	ed?	
	MARK (X) ONE ANSWER ONLY		
	1 D My name		
	² Other (<i>Please specify name</i>)		
	Cell Phone Number: () - Area Code	 Number	_
	Social Security Number: _ -	_ -	
	Home Email Address:		
	Work Email Address:		
D2.	Please indicate the most convenient time to	reach you.	
	a. Best day(s) to reach you	b. Best time of day to	reach you
	MARK (X) ALL THAT APPLY	MARK (X) ONE ANSW	ER ONLY
	1 🗆 Monday	1 🛛 Before schoo	
	2 🗆 Tuesday	² After school, i	
	3 🗆 Wednesday	3 🛛 In the evening	1
	₄ □ Thursday ₅ □ Friday		
	₀ □ Saturday		
	7 □ Sunday		
D3.	Please indicate today's date:		
	_ / / <u>2 0 0 </u> Month Day Year		

D4. What are the names and addresses of two other people who would know where to get in touch with you during the coming years? Remember to record the relationship of these persons to you (for example, parent, friend, sister, cousin, etc.). We will contact these people only if we can't get in touch with you.

lame:		
Relationship to you:		
Street Address:		
City:	State:	Zip Code:
l ome Telephone: () - _ Area Code	- Number	
n whose name is the telephone nun	nber listed?	
ARK (X) ONE ANSWER ONLY		
Name entered above		

What is the name and address of another person who would know where to get in touch with you during the coming years? <u>Don't list any person who now lives with you</u>. Remember to record the relationship of this person to you (for example, parent, friend, sister, cousin, etc.).

Name:		
Relationship to you:		
Street Address:		
City:	State:	Zip Code:
Home Telephone: (_ _) Area Code	- - Number	
In whose name is the telephone n	number listed?	
MARK (X) ONE ANSWER ONLY		
□ □ Name entered above		
² \Box Other (<i>Please specify name</i>)		

Thank you for completing this survey. Please mail it to MPR in the envelope provided.