

U.S. DEPARTMENT OF EDUCATION  
National Center for Education Statistics

Conducted by:  
U.S. DEPARTMENT OF COMMERCE  
Economics and Statistics Administration  
U.S. CENSUS BUREAU

# **TEACHER FOLLOW-UP SURVEY (Longitudinal)**

## **QUESTIONNAIRE FOR CURRENT TEACHERS 2008-09 SCHOOL YEAR**

**THIS SURVEY HAS BEEN ENDORSED BY MANY ORGANIZATIONS. THE NAMES OF  
THESE ORGANIZATIONS ARE SHOWN ON THE NEXT PAGE.**

NOTICE> This survey is authorized by Title I, Part E, Sections 151(b) and 153(a) of Public Law 107-279, the Education Sciences Reform Act of 2002. The results will only be produced as statistical summaries.

**THIS SURVEY HAS BEEN ENDORSED BY:**

American Federation of Teachers  
Association Montessori International  
Association of Christian Schools International  
Association of Christian Teachers and Schools  
Bureau of Indian Affairs, Office of Indian Education Programs  
Christian Schools International  
Council for American Private Education  
Evangelical Lutheran Church in America  
Islamic School League of America  
Jesuit Secondary Education Association  
Jewish Community Day School Network  
Jewish Education Services of North America  
Lutheran Church-Missouri Synod  
National Association of Elementary School Principals  
National Association of Episcopal Schools  
National Association of Independent Schools  
National Association of Private Special Education Centers  
National Association of Secondary School Principals  
National Catholic Educational Association  
National Coalition of Girls' Schools  
National Council for Private School Accreditation  
National Education Association  
National Independent Private Schools Association  
National Indian Education Association  
North American Division of Seventh-Day Adventists  
Oral Roberts University Educational Fellowship  
Solomon Schechter Day School Association  
Wisconsin Evangelical Lutheran Synod

**Dear Teacher:**

You have been selected to be part of the Teacher Follow-up Survey because you completed the 2007-08 Schools and Staffing Survey. Your participation is important. Below are answers to some general questions.

**What is the purpose of this survey?**

The purpose of this survey is to obtain information about the career paths of new teachers, including current teachers' experiences and satisfaction, and about former teachers' current employment and reasons for leaving the teaching profession.

**Who is conducting this survey?**

The U.S. Census Bureau is conducting this survey for The National Center for Education Statistics (NCES) of the U.S. Department of Education.

**Why should you participate in this survey?**

Policymakers and educational leaders rely on data from this survey to inform their decisions concerning K-12 schools. This survey provides important insight into the career paths of beginning teachers and your participation will contribute to the success of this data collection. Because it is a sample survey, your responses represent the responses of many. Higher response rates give us confidence that the findings are accurate.

**Will your responses be kept confidential?**

Your responses are protected from disclosure by federal statute (P.L. 107-279, Title I, Part E, Sec. 183). All responses that relate to or describe identifiable characteristics of individuals may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose, **except** as provided for in the Patriot Act (P.L. 107-056, Section 508).

**How will your information be reported?**

The information you provide will be combined with the information provided by others in statistical reports. No individually-identifiable data will be included in the statistical reports.

**Where should you mail your completed questionnaire?**

Please return your completed questionnaire in the enclosed pre-addressed, postage-paid envelope or mail it to:

U.S. Census Bureau  
ATTN: DCB 60A  
1201 E. 10<sup>th</sup> Street  
Jeffersonville, IN 47132-0001

**We hope you will participate in this voluntary effort.**

Sincerely,

Mark Schneider  
Commissioner for Education Statistics  
National Center for Education Statistics

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 1850-0617. The time required to complete this information collection is estimated to average 32 minutes per response, including the time spent to review instructions, search existing data sources, 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, DC 20202-4651. If you have comments or concerns regarding the status of your individual submission of this form, e-mail: [dsd.sass@census.gov](mailto:dsd.sass@census.gov), or write directly to: Schools and Staffing Survey, National Center for Education Statistics, 1990 K Street, N.W., #9018, Washington, DC 20006.

Form TFS-3L

09/23/2008

## INSTRUCTIONS

Please print all information clearly in ordinary characters, using a **blue or black ballpoint pen**.

**Correct** marking example – *(Use care to keep characters in their designated spaces.)*

**Incorrect** marking example –

- a. If you are the teacher named on the cover page label, please complete the questionnaire.
- b. Please do not write any comments near the answer boxes.
- c. If you are unsure about how to answer a question, please give the best answer you can rather than leaving it blank.
- d. If you have any questions, call the U.S. Census Bureau at 1-800-872-6868. Someone will be available to take your call Monday through Friday, between 8:30 a.m. and 5:00 p.m. (Eastern Time). The U.S. Census Bureau is also available to answer your questions via e-mail at: [dsd.sass@census.gov](mailto:dsd.sass@census.gov).

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Please correct any errors in name, address, and ZIP Code.

Teacher name

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Address

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City

-----

State

ZIP Code

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Please note you will be asked to record how many minutes it takes you to complete this questionnaire.

## I. ASSIGNMENTS AT YOUR CURRENT SCHOOL

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1. **a. Do you CURRENTLY TEACH any regularly scheduled class(es) in any of grades pre-K – 12?**

*\*If you work as a library media specialist or librarian at your current school, do not include classes in which you teach students how to use the library (e.g., library skills or library research).*

Yes

No → Please STOP now and return this questionnaire to the U.S. Census Bureau. You will be sent a different form to complete.

**b. How do you classify your position at your CURRENT school, that is, the activity at which you spend most of your time during this school year?**

*\*Mark (X) only one box.*

Regular teacher (full-time or part-time)

Itinerant teacher (i.e., your assignment requires you to provide instruction at more than one school)

Long-term substitute (i.e., your assignment requires that you fill the role of a regular teacher on a long-term basis, but you are still considered a substitute)

Administrator (e.g., principal, assistant principal, director, school head)

Library media specialist or librarian

Other professional staff (e.g., counselor, curriculum coordinator, social worker)

Support staff (e.g., secretary)

Short-term substitute → Please STOP now and return this questionnaire to the U.S. Census Bureau. You will be sent a different form to complete.

Student teacher → Please STOP now and return this questionnaire to the U.S. Census Bureau. You will be sent a different form to complete.

Teacher aide → Please STOP now and return this questionnaire to the U.S. Census Bureau. You will be sent a different form to complete.

2. **Are you teaching full-time or part-time?**

*\*Mark (X) only one box.*

Teaching full-time

Teaching part-time

**Table 1. Teaching Assignment Codes For Question 4**

**General Education**

**Elementary Education**

- 101 Early childhood or pre-K, general
- 102 Elementary grades, general

**Special Education**

- 110 Special education, any

**Subject Matter Specific**

**Arts and Music**

- 141 Art or arts and crafts
- 143 Dance
- 144 Drama or theater
- 145 Music

**English and Language Arts**

- 151 Communications
- 152 Composition
- 153 English

- 154 Journalism
- 155 Language arts
- 158 Reading
- 159 Speech

**English as a Second Language (ESL)**

- 160 ESL or bilingual education: General
- 161 ESL or bilingual education: Spanish
- 162 ESL or bilingual education: Other languages

**Foreign Languages**

- 171 French
- 172 German
- 173 Latin
- 174 Spanish
- 175 Other foreign language

**Health Education**

- 181 Health education
- 182 Physical education

**Mathematics and Computer Science**

- 191 Algebra I
- 192 Algebra II
- 193 Algebra III
- 194 Basic and general mathematics
- 195 Business and applied math
- 196 Calculus and pre-calculus
- 197 Computer science
- 198 Geometry
- 199 Pre-algebra
- 200 Statistics and probability
- 201 Trigonometry

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**Natural Sciences**

- 210 Science, general
- 211 Biology or life sciences
- 212 Chemistry
- 213 Earth sciences
- 215 Integrated science
- 216 Physical sciences
- 217 Physics

**Social Sciences**

- 220 Social studies, general
- 221 Anthropology
- 225 Economics
- 226 Geography
- 227 Government or civics
- 228 History
- 231 Native American studies
- 233 Psychology
- 234 Sociology

**Vocational, Career, or Technical Education**

- 241 Agriculture and natural resources
- 242 Business management
- 243 Business support
- 244 Marketing and distribution
- 245 Health occupations
- 246 Construction trades, engineering, or science technologies (including CADD and drafting)
- 247 Mechanics and repair
- 249 Manufacturing or precision production (electronics, metalwork, textiles, etc.)
- 250 Communications and related technologies (including design, graphics, or printing; not including computer science)
- 253 Personal and public services (including culinary arts, cosmetology, child care, social work, protective services, custodial services, and interior design)
- 254 Family and consumer sciences education
- 255 Industrial arts or technology education
- 256 Other vocational, career, or technical education

**Miscellaneous**

- 262 Driver education
- 264 Library or information science
- 265 Military science or ROTC
- 266 Philosophy
- 267 Religious studies, theology, or divinity

**Other**

- 268 Other

**3. In which grades are the STUDENTS you teach at your CURRENT school?**

*\*Mark (X) all that apply.*

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Prekindergarten | <input type="checkbox"/> 4 <sup>th</sup> | <input type="checkbox"/> 9 <sup>th</sup>  |
| <input type="checkbox"/> Kindergarten    | <input type="checkbox"/> 5 <sup>th</sup> | <input type="checkbox"/> 10 <sup>th</sup> |
| <input type="checkbox"/> 1 <sup>st</sup> | <input type="checkbox"/> 6 <sup>th</sup> | <input type="checkbox"/> 11 <sup>th</sup> |
| <input type="checkbox"/> 2 <sup>nd</sup> | <input type="checkbox"/> 7 <sup>th</sup> | <input type="checkbox"/> 12 <sup>th</sup> |
| <input type="checkbox"/> 3 <sup>rd</sup> | <input type="checkbox"/> 8 <sup>th</sup> | <input type="checkbox"/> Ungraded         |

**4. This school year, what is your MAIN teaching assignment field at your CURRENT school?**

(Your main teaching assignment is the field in which you teach the most classes.)

*\*Record one of the assignment field codes and names listed in Table 1 on page 6.*

Code                      Main teaching assignment

**5. Which statement best describes the way YOUR classes at your current school are organized?**

*\*Mark (X) only one box.*

- You instruct several classes of different students most or all of the day in one or more subjects (sometimes called Departmentalized Instruction).
- You are an elementary school teacher who teaches only one subject to different classes of students (sometimes called an Elementary Subject Specialist).
- You instruct the same group of students all or most of the day in multiple subjects (sometimes called a Self-Contained Class).
- You are one of two or more teachers, in the same class, at the same time, and are jointly responsible for teaching the same group of students all or most of the day (sometimes called Team Teaching).
- You instruct a small number of selected students released from or in their regular classes in specific skills or to address specific needs (sometimes called a "Pull-Out" Class or "Push-In" Instruction).

**6a. This school year, are you a Highly Qualified Teacher (HQT) according to your state's requirements?**

*(Generally, to be Highly Qualified, teachers must 1) have a bachelor's degree; 2) hold full state certification or licensure, including an "alternative certification"; and 3) demonstrate competency in the subject area(s) they teach. The HQT requirement is a provision under No Child Left Behind [NCLB].)*

- Yes → GO TO item 7 on page 9.
- No

**b. Do you meet your state's requirements for a Highly Qualified Teacher in at least one subject that you teach this school year?**

Yes

No



## II. INFORMATION ABOUT YOUR TEACHING POSITION IN THE 2007-08 SCHOOL YEAR

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7. When did you begin teaching, either full-time or part-time, at the elementary or secondary level?

*\* Do not include time spent as a student teacher.*

|\_|\_| Month    AND    |\_|\_|\_|\_| Year

8. a. Last school year (2007-08), were you assigned a master or mentor teacher by your school or school district?

Yes

No → GO TO item 11 on page 11.

b. Was your master or mentor teacher's main job being a mentor during the 2007-08 school year?

Yes

No

c. Has your master or mentor teacher ever instructed students in the same subject area(s) as yours?

Yes

No

d. Has your master or mentor teacher ever instructed students in the same grade level(s) as yours?

Yes

No

e. How frequently did you work with your master or mentor teacher during the 2007-08 school year?

*\* Mark (X) only one box.*

At least once a week

Once or twice a month

A few times a year

Never

**f. How frequently did your master or mentor teacher observe your teaching during the 2007-08 school year?**

*\* Mark (X) only one box.*

- At least once a week
- Once or twice a month
- A few times a year
- Never

**9. Last school year (2007-08), how frequently did your assigned master or mentor teacher work with you in the following areas? To what extent did your work with your mentor in this area improve your teaching?**

	a. Last school year (2007-08), how frequently did your assigned master or mentor teacher work with you in the following areas? <i>*Mark (X) one box on each line. * If you mark "never" in the first column, leave the second column blank.</i>				b. To what extent did your work with your mentor in this area improve your teaching? <i>*Mark (X) one box on each line.</i>			
	Never	A few times a year	Once or twice a month	At least once a week	Not at all	To a small extent	To a moderate extent	To a great extent
1) Teaching your subject matter or grade level	<input type="checkbox"/> ↓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Classroom management and discipline	<input type="checkbox"/> ↓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Using or incorporating a variety of instruction methods	<input type="checkbox"/> ↓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Using technology in your classroom	<input type="checkbox"/> ↓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5) Assessing students and interpreting assessment data	<input type="checkbox"/> ↓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) Selecting and adapting curriculum, instructional materials, and/or writing lesson plans	<input type="checkbox"/> ↓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7) Interacting with parents	<input type="checkbox"/> ↓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8) Reflecting on your teaching practice	<input type="checkbox"/> ↓	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**10. Overall, to what extent did your assigned master or mentor teacher improve your teaching last school year (2007-08)?**

*\* Mark (X) only one box.*

- Not at all  
 To a small extent  
 To a moderate extent  
 To a great extent

**11. Did you enter teaching through an alternative certification program?**

(An alternative certification program is a program that was designed to expedite the transition of non-teachers to a teaching career, for example, a state, district, or university alternative certification program.)

- Yes  
 No → GO TO item 15 on page 12.

**12. Have you completed your alternative certification program?**

*\* Mark (X) only one box.*

- Yes, completed the program  
 No, currently enrolled in the program → GO TO item 14 below.  
 No, left the program before completing it

**13. How effective was your alternative certification program at developing the skills or tools you needed to become a teacher?**

*\* Mark (X) only one box.*

- Not at all effective
- Somewhat effective
- Effective
- Very effective

**14. For the alternative certification program in which you were/are enrolled --**

**a. What was/is the length of the entire program?**

*\* Include time spent training before entering the classroom as a teacher.*

*\* Include the time from when your program started through when you completed or expect to complete it.*

*\* Report BOTH years and months, e.g., 03 years and 00 months, 01 year and 10 months, etc.*

|\_|\_| Years AND |\_|\_| Months

**b. Did you have any training BEFORE entering the classroom as a teacher?**

Yes → GO TO item 16a on page 13.

No → GO TO item 16a on page 13.

**15. How effective was your teacher preparation program at developing the skills or tools you needed to become a teacher?**

*\* Mark (X) only one box.*

- Not at all effective
- Somewhat effective
- Effective
- Very effective

**III. INFORMATION ABOUT CHANGES FROM LAST SCHOOL YEAR TO THIS SCHOOL YEAR**

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**16. a. Are you currently teaching in the SAME SCHOOL as you were last year (2007-08)?**

- Yes → GO TO item 24 on page 16.
- No

**b. If no, are you currently teaching in the SAME STATE as you were last year (2007-08)?**

- Yes → GO TO item 17 below.
- No

**c. Are you currently teaching in a school OUTSIDE the United States?**

- Yes → In what country? \_\_\_\_\_ → GO TO item 18 below.
- No

**17. Please provide the following information about your current school.**

Name of School \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Name of school district (if applicable) \_\_\_\_\_

Name of county \_\_\_\_\_

**18. Which of the following grades are offered in your current school?**

*\*Mark (X) all that apply.*

- |  |   |
|--|---|
| <input type="checkbox"/> Prekindergarten |   |
| <input type="checkbox"/> Kindergarten    | <input type="checkbox"/> 7 <sup>th</sup>  |
| <input type="checkbox"/> 1 <sup>st</sup> | <input type="checkbox"/> 8 <sup>th</sup>  |
| <input type="checkbox"/> 2 <sup>nd</sup> | <input type="checkbox"/> 9 <sup>th</sup>  |
| <input type="checkbox"/> 3 <sup>rd</sup> | <input type="checkbox"/> 10 <sup>th</sup> |
| <input type="checkbox"/> 4 <sup>th</sup> | <input type="checkbox"/> 11 <sup>th</sup> |
| <input type="checkbox"/> 5 <sup>th</sup> | <input type="checkbox"/> 12 <sup>th</sup> |
| <input type="checkbox"/> 6 <sup>th</sup> | <input type="checkbox"/> Ungraded         |

**19. Which of the following best describes your move from last year's school to your current school?** (For this question, all charter and Bureau of Indian Education [BIE]-funded schools are considered public schools.)

*\*Mark (X) only one box.*

- Moved from one public school to another public school in the SAME SCHOOL DISTRICT → GO TO item 21a below.
- Moved from one public school district to ANOTHER PUBLIC SCHOOL DISTRICT → GO TO item 21a below.
- Moved from a PRIVATE school to a PUBLIC school → GO TO item 21a below.
- Moved from one PRIVATE school to another PRIVATE school
- Moved from a PUBLIC school to a PRIVATE school

**20. Is the private school in which you currently teach affiliated with the Roman Catholic Church, some other religious organization, or is it nonsectarian?**

*\*Mark (X) only one box.*

- Religious – Roman Catholic
- Religious – other than Roman Catholic
- Nonsectarian – not religiously affiliated

**21. a. Did you change schools because your contract was NOT renewed at last year's school?**

- Yes
- No → GO TO item 22 below.

**b. Which of the following best describes the reason why your contract was NOT renewed?**

*\*Mark (X) only one box.*

- I was laid off as part of a reduction in force
- I did not meet Highly Qualified Teacher (HQT) requirements  
(Generally, to be Highly Qualified, teachers must 1) have a bachelor's degree; 2) hold full state certification or licensure, including an "alternative certification"; and 3) demonstrate competency in the subject area(s) they teach. The HQT requirement is a provision under No Child Left Behind [NCLB].)
- I was not given a reason for why my contract was not renewed.
- My contract was not renewed for other reason(s)  
→ please specify \_\_\_\_\_

→ GO TO item 25 on page 17.

**22. Indicate the level of importance EACH of the following played in your decision to leave LAST YEAR'S SCHOOL.**

*\*Mark (X) one box on each line.*

*\* If any of the reasons for leaving last year's school do not apply to you, mark 1 for 'Not at all important.'*

(The following scale is used for the items below: 1) Not at all important, 2) Slightly important, 3) Somewhat important, 4) Very important, 5) Extremely important)

**I left last year's school –**

Personal Life Factors

- a. Because I changed residence or wanted to work in a school more convenient to my home.**
- b. Because my health or the health of a loved one required that I change schools.**

Assignment and Credential Factors

- c. Because I have not taken or could not pass the required test(s).**
- d. Because I was being involuntarily transferred and did not want the offered assignment.**
- e. Because I was dissatisfied with changes in my job description or responsibilities at last year's school.**
- f. Because I was dissatisfied with the grade level or subject area I taught at last year's school.**

Salary and Other Job Benefits

- g. Because my salary did not allow me to meet my financial obligations (e.g., rent, loans, credit card payments)**
- h. Because I needed better benefits than I received at last year's school.**
- i. Because I wanted a higher standard of living than my salary provided.**
- j. Because I was concerned about job security at last year's school.**

Classroom Factors

- k. Because I did not have enough autonomy over my classroom at last year's school.**
- l. Because I was dissatisfied with the large number of students I taught at last year's school.**
- m. Because I did not feel prepared to mainstream special needs (e.g., disabled) students in my regular classes at last year's school.**
- n. Because I felt that there were too many intrusions on my teaching time (i.e., time spent with students) at last year's school.**

School Factors

- o. Because I was dissatisfied with opportunities for professional development at last year's school.**

- p. Because I was dissatisfied with workplace conditions (e.g., facilities, classroom resources, school safety) at last year's school.
- q. Because student discipline problems were an issue at last year's school.
- r. Because I was dissatisfied with administrator(s) at last year's school
- s. Because I was dissatisfied with the lack of support I received from the administration at last year's school.
- t. Because I was dissatisfied with the lack of influence I had over school policies and practices at last year's school.

Student Performance Factors

- u. Because I was dissatisfied with how student assessments and school accountability measures impacted my teaching at last year's school.
- v. Because I was dissatisfied with having some of my compensation, benefits, or rewards tied to the performance of my students at last year's school.
- w. Because I was dissatisfied with the support I received for preparing my students for student assessments at last year's school.
- x. Because I was dissatisfied with the influence student assessments had on the curriculum at last year's school.
- y. Because I was dissatisfied with other aspects of accountability measures at last year's school not included above.

Other Factors

- z. Because of other factors not included previously in items a - y. → *please specify* \_\_\_\_\_

**23. From the items above, which do you consider the one most important reason in your decision to leave LAST YEAR'S SCHOOL?**

*\*Enter the letter from item 21 above.*

|\_\_| Most important reason in my decision to leave → GO TO item 25 on page 17.

**24. Has there been a change in the principal/school head in your school since the 2007-08 school year?**

- \_\_ Yes
- \_\_ No



#### **IV. YOUR CURRENT SCHOOL: CONDITIONS AND EXPERIENCES**

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**25. How would you rate your CURRENT teaching position relative to LAST YEAR'S teaching position in terms of each of the following aspects?**

*\*If you are teaching in the same school as you were last year, report on your current teaching conditions and assignment(s) relative to last year's teaching conditions and assignment(s).*

*\*Mark (X) one box on each line.*

(The following scale is used for the items below: 1) Better in last year's position, 2) Not better or worse, 3) Better in current position)

- a. Salary
- b. Benefits (e.g., health insurance, retirement plan)
- c. Opportunities for professional **ADVANCEMENT** or **PROMOTION**
- d. Opportunities for professional **DEVELOPMENT**
- e. Opportunities for learning from colleagues
  
- f. Social relationships with colleagues
- g. Recognition and support from administrators/managers
- h. Safety of environment
- i. Influence over workplace policies and practices
- j. Autonomy or control over your own work
  
- k. Professional prestige
- l. Procedures for performance evaluation
- m. Manageability of workload
- n. Ability to balance personal life and work
- o. Availability of resources and materials/equipment for doing your job
  
- p. General work conditions
- q. Job security
- r. Intellectual challenge
- s. Sense of personal accomplishment
- t. Opportunities to make a difference in the lives of others
- u. Teaching assignment (subject area or grade level)

**26. To what extent do you agree or disagree with the following statement:  
I am generally satisfied with being a teacher at this school.**

*\*Mark (X) only one box.*

- \_\_\_ Strongly agree
- \_\_\_ Somewhat agree
- \_\_\_ Somewhat disagree
- \_\_\_ Strongly disagree

**27. During the current school year, are you working with a master or mentor teacher that was assigned by your school or district?**

- Yes
- No → Go to item 29 on page 19.

**28. Overall, to what extent has the master or mentor program improved your teaching during the current school year?**

*\*Mark (X) only one box.*

- Not at all
- To a small extent
- To a moderate extent
- To a great extent

## V. GENERAL EMPLOYMENT INFORMATION

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*The following questions refer to your before-tax earnings from teaching and other employment.*

**29. DURING THE SUMMER OF 2008, did you have any earnings from –**

*\* Report amounts in whole dollars.*

**a. Teaching summer school in this or any other school?**

Yes → **How much?**      *\* Record amount then go to item 29b below.*

No                                    |\_\_|\_\_|\_\_,|\_\_|\_\_|.00

**b. Working in a NON-TEACHING job in this or any other school?**

Yes → **How much?**      *\* Record amount then go to item 29c below.*

No                                    |\_\_|\_\_|\_\_,|\_\_|\_\_|.00

**c. Working in any NON-SCHOOL job?**

Yes → **How much?**      *\* Record amount then go to item 30 below.*

No                                    |\_\_|\_\_|\_\_,|\_\_|\_\_|.00

**30. DURING THE CURRENT SCHOOL YEAR, what is your academic year base teaching salary?**

*\*Report amounts in whole dollars.*

\$ |\_\_|\_\_|\_\_,|\_\_|\_\_|.00

**31. DURING THE CURRENT SCHOOL YEAR, do you, or will you, earn any additional compensation from this school system for extracurricular or additional activities such as coaching, student activity sponsorship, or teaching evening classes?**

*\*Report amounts in whole dollars.*

Yes → **How much?**      *\* Record amount, then GO TO item 32 below.*

No                                    |\_\_|\_\_,|\_\_|\_\_|.00

**32. DURING THE CURRENT SCHOOL YEAR, have you earned income from any OTHER sources from this school system, such as a merit pay bonus (e.g., pay-for-performance bonus), state supplement, etc.?**

*\* Do not report any earnings already reported.*

*\* Report amounts in whole dollars.*

Yes → **How much?**      *\* Record amount, then GO TO item 33a below.*

No                                    |\_\_|\_\_,|\_\_|\_\_|.00

**33a. DURING THE CURRENT SCHOOL YEAR, do you, or will you, earn additional compensation from working in any job OUTSIDE this school system?**

*\* Report amounts in whole dollars.*

Yes → **How much?** *\* Record amount, then GO TO item 33b below.*

No → GO TO item 34 below.    |\_\_|\_\_,|\_\_|\_\_|.00

**b. Which of these best describes this job OUTSIDE this school system?**

*\* Mark (X) only one box.*

Teaching or tutoring

Non-teaching, but related to teaching field

Other → *please specify* \_\_\_\_\_

**34. Are you currently receiving a pension from a teacher retirement system?**

*\* Report amounts in whole dollars.*

Yes → **How much, BEFORE TAXES?** \$ |\_\_|\_\_|, |\_\_|\_\_|.00 Per year

No

## VI. BACKGROUND INFORMATION

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**35a. Which of the following best describes the majority of your work history prior to becoming a K-12 teacher?**

*\*Mark (X) only one box.*

- Never worked → GO TO item 36 below.
- Worked as a homemaker/parent → GO TO item 36 below.
- Part-time/temporary jobs while going to school and/or looking for work → GO TO item 36 below.
- Job(s) or career(s) in a field(s) related to teaching
- Job(s) or career(s) in a field(s) not related to teaching

**b. In your primary job or career prior to becoming a K-12 teacher, what kind of work did you do, that is, what was your occupation?**

*\*Please record your most recent job title from that prior primary job or career; for example, plumber, typist, or farmer.*

---

**c. What were your most important activities or duties at this job?**

*\*For example, typing, keeping account books, filing, selling cars, operating printing press, laying brick*

---

**d. How many years did you spend in your primary job or career prior to becoming a K-12 teacher?**

*\*Please round to the nearest year*

|\_|\_| Years

**36. What is your citizenship status?**

*\*Mark (X) only one box.*

- U.S. citizen or U.S. national
- Resident alien (excluding U.S. nationals)  
*(A resident alien is a permanent resident of the U.S. who does not have citizenship, but who 1) either currently has or in the last calendar year has had a green card or 2) has been in the U.S. for more than 31 days during the current year and for at least 183 days over a three-year period that includes the current year.)*
- Asylee, Refugee, or Temporary Protected Status (TPS) beneficiary  
*(Temporary Protected Status (TPS) is a temporary immigration status granted to eligible nationals of designated countries (or parts thereof) who are temporarily unable to return to their homeland because of ongoing armed conflict, environmental disasters, or other extraordinary and temporary conditions.)*
- In the country on a visa

**37. Do you own or rent your primary residence?**

*\*Mark (X) only one box.*

- Own
- Rent
- Other living arrangement → *please specify* \_\_\_\_\_

**38. Which category represents the total combined BEFORE-TAX income of ALL FAMILY MEMBERS in your household during 2008?**

*\*Include your own income.*

*\*Include money from jobs, net business or farm income, pensions, dividends, interest, rent, Social Security payments, and any other income received by family members in your household.*

*\*Mark (X) only one box.*

- Less than \$35,000
- \$35,000 – \$49,999
- \$50,000 – \$74,999
- \$75,000 – \$99,999
- \$100,000 – \$149,999
- \$150,000 or more

**39. a. What is your current marital status?**

*\*Mark (X) only one box.*

- Married
- Widowed
- Separated
- Divorced
- Never married
- Living with a partner in a marriage-like relationship

**b. Has your marital status changed since December 31, 2007?**

- Yes
- No → GO TO item 40 below.

**c. What was your marital status on December 31, 2007?**

*\*Mark (X) only one box.*

- Married
- Widowed
- Separated
- Divorced
- Never married
- Living with a partner in a marriage-like relationship

**40. How many people did you (and your spouse/partner) support between July 1, 2008 and June 30, 2009?**

*\*Please include yourself, spouse/partner, and those who received more than more than half of their support from you.*

*\* If none, please mark (X) the box.*

- a. Yourself [ 1 ]
- b. Your spouse/partner, including former spouses  
that you support  None or [ ]
- c. Children younger than 5 years of age  None or [ ]
- d. Children ages 5 through 17  None or [ ]
- e. Children/parents/others 18 years of age or older not  
already counted  None or [ ]

## VII. CONTACT INFORMATION

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- 41. The survey you have completed may involve follow-up at a later time in order to gain additional information on teachers' movements in the labor force. The following information would assist us in contacting you if you have moved or changed jobs.**

Please PRINT your name, your spouse's name (if applicable), your home address, your telephone number, and your work and home e-mail addresses.

a. First Name                      Middle Name                      Last Name  
-----

b. Spouse or partner's full name (if applicable)  
-----

c. Street address  
-----

d. City  
-----

e. State  
-----

f. ZIP Code + 4  
-----

g. Primary phone number  
Area code    Number  
----- - -----

Is this  home  
 work  
 cell

- h. In whose name is the telephone number listed?  
*\* Mark (X) only one box.*

\_\_\_ My name  
\_\_\_ Other – Specify name → \_\_\_  
-----

i. Alternate phone number  
Area code    Number  
----- - -----

Is this  home



- work
- cell

j. Home e-mail address  
 -----

k. Check here if you are the only person who receives e-mail at this address.  
 I am the only person who receives e-mail at this address.

l. Work e-mail address  
 -----

m. Check here if you are the only person who receives e-mail at this address.  
 I am the only person who receives e-mail at this address.

**42. What are the names and addresses of two other people who would know where to get in touch with you during the coming years?**

Please do not list more than one person who now lives with you. Please inform these individuals that you have provided their names and someone from the U.S. Census Bureau may contact them in the coming years if we are unable to locate you. Remember to record the relationship of these persons to you (for example, parent, friend, sister, cousin, etc.) in items a(2) and b(2).

**a. First person**

(1) First Name	Middle Name	Last Name
-----		

(2) Relationship to you  
 -----

(3) Street address  
 -----

(4) City  
 -----

(5) State  
 -----

(6) ZIP Code + 4  
 -----

(7) Primary phone number  
Area code    Number

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Is this  home  
 work  
 cell

(8) Alternate phone number  
Area code    Number

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Is this  home  
 work  
 cell

**42. Continued –**

**b. Second person**

**What is the name and address of another person who would know where to get in touch with you during the coming years?**

Remember to record the relationship of this person to you (for example, parent, friend, sister, cousin, etc.) in item (2) below.

(1) First Name                      Middle Name                      Last Name

\_\_\_\_\_

(2) Relationship to you

\_\_\_\_\_

(3) Street address

\_\_\_\_\_

(4) City

\_\_\_\_\_

(5) State

\_\_\_\_\_

(6) ZIP Code + 4

\_\_\_\_\_ - \_\_\_\_\_

(7) Primary phone number  
Area code    Number

\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Is this  home

work

cell

(8) Alternate phone number

Area code    Number

\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

Is this  home

work

cell

**43. Please indicate how much time it took you to complete this form, not counting interruptions.**

*\*Please record the time in minutes, e.g., 50 minutes, 65 minutes, etc.*

Minutes

Thank you very much for your participation in this survey. If you have any questions, please contact us, toll-free, at: 1-800-872-6868 or by e-mail at: [dsd.sass@census.gov](mailto:dsd.sass@census.gov).

To learn more about this survey and to access reports from earlier collections, see the Schools and Staffing Survey (SASS) website at:

<http://nces.ed.gov/surveys/sass>

Additional data collected by the National Center for Education Statistics (NCES) on a variety of topics in elementary, secondary, postsecondary, and international education are available from NCES' website at:

<http://nced.ed.gov>

For additional data collected by various Federal agencies, including the Department of Education, visit the Federal Statistics clearinghouse at:

<http://www.fedstats.gov>