

## **APPENDIX C**

### **PRINCIPAL SURVEY**

- 1. Principal Letter**
- 2. Principal Questionnaire**

## PRINCIPAL SURVEY COVER LETTER

Dear [PRINCIPAL NAME]:

Your school is participating in the national Evaluation of the Teacher Incentive Fund (TIF) conducted by Mathematica Policy Research for the U.S. Department of Education. This important study will produce valuable information on the impact of performance-based incentive programs on student achievement, the career paths of principals and teachers, and the ability of schools to retain high-quality staff.

As part of the study, school principals are being asked to complete a Web-based survey this spring and annually thereafter through spring 2015. Each survey will take about 30 minutes of your time. This first survey is designed to learn about the hiring practices of school administrators, understand how principals and teachers are evaluated and compensated for their performance, and assess principals' understanding of the TIF program. The survey also collects information on principals' demographic characteristics, educational background, and professional experiences.

While your participation is voluntary, the information collected from principals like you will be extremely important to the study's findings. We will mail you a check for \$20 in appreciation of your participation upon receipt of the completed questionnaire this year and each subsequent year.

**The information you provide in this survey will be kept strictly confidential and will not be shared with anyone outside the study team. District officials, principals, and school staff will not have access to the survey data. Responses will be presented only in aggregate form and will not identify any individual or school.**

Please use the information below to access the TIF principal survey.

Go to <https://www.xxxxxxx.org/>

At the login screen, enter the following:

**Login ID:** [username]

**Password:** [password]

If you have any questions, please contact Annette Luyegu, the deputy survey director, toll free at 866-xxx-xxxx or TIF@mathematica-mpr.com.

Thank you for your cooperation and participation in this important study.

Sincerely,

Sheila Heaviside  
Survey Director

OMB Control No.: XXXX-XXXX  
Expiration Date: XX/XX/20XX  
Mathematica Reference No.: 06715

# [PROGRAM NAME] SPRING 2012 PRINCIPAL SURVEY

This survey is part of the evaluation of the Teacher Incentive Fund (TIF), a federally funded initiative on performance pay for educators. The survey includes questions about your background, your school's hiring practices, classroom assignments, and knowledge and perceptions of the TIF program.

**We would like you to know that:**

1. This survey is voluntary, but your response is critical for producing valid and reliable data. 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 school now or in future and will not be shared with anyone else other than the researchers. Participation in the principal survey will not impose any risks to you as a respondent. If you have any questions about your rights as a research volunteer, you can contact Jennifer Stavrakos at Public/Private Ventures IRB, toll free 800-755-4778 x4410.
2. 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 school or individual. We will not provide information that identifies you or your school to anyone outside the study team, except as required by law. Additionally, no one in your school or district will see your responses.

Thank you very much for your help with this survey.

<p><b>Please return the completed form to:</b> Mathematica Policy Research, Inc. 707 Alexander Road Building 3, Suite 304 Princeton, NJ 08540 ATTN:</p>	<p><b>If you have questions, please contact:</b> Ms. Xxxx Phone: 866-xxx-xxxx (toll free) FAX: 202-863-1763 E-mail: xxxx@mathematica-mpr.com</p>
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This survey is authorized by law: The ARRA, Division A, Title VIII, Pub. L. 111–5 and Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act, 2010, Division D, Title III, Pub. L. 111–117.

<p>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 <b>xxxx-xxxx</b>. The time required to complete this information collection is estimated to average 30 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.</p>
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**A. YOUR PERSONAL AND PROFESSIONAL BACKGROUND**

**A1. What is the title of your current position at this school? Mark only one.**

- <sup>1</sup>  Principal
- <sup>2</sup>  Assistant or vice principal
- <sup>3</sup>  Other (Specify): \_\_\_\_\_

**A2. Including this school year, how many years have you served in an administrative position at THIS school? .....** |\_\_|\_\_|

**A3. Including this school year, how many years have you worked in THIS school district? If you work in a charter school, write NA. ....** |\_\_|\_\_|

**A4. How satisfied are you with each of the following aspects of your school this year?**

Mark one box in each row.	VERY		VERY	
	DIS S A T I S F I E D	DIS S A T I S F I E D	S A T I S F I E D	S A T I S F I E D
a. Opportunities to enhance my skills .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. Opportunities to earn extra pay .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c. Intellectual challenge.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d. Feedback on my performance .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e. Recognition of accomplishments .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f. Quality of interaction with colleagues.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g. Colleagues' efforts .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h. Colleagues' contribution to student learning.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
i. Morale in the school .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
j. Other (Specify): _____	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

**A5. What is the highest level of education you have completed? Mark only one.**

- <sup>1</sup>  Bachelor's degree
- <sup>2</sup>  Master's degree
- <sup>3</sup>  Doctoral degree (Ph. D., Ed. D.)
- <sup>4</sup>  Other (Specify): \_\_\_\_\_

**A6. What is your year of birth?** | 1 | 9 | | |

**A7. Are you of Hispanic or Latino origin?**

- <sup>1</sup>  Yes
- <sup>0</sup>  No

**A8. What is your race? Mark one or more.**

- <sup>1</sup>  White
- <sup>2</sup>  Black or African American
- <sup>3</sup>  Asian
- <sup>4</sup>  Native Hawaiian or other Pacific Islander
- <sup>5</sup>  American Indian or Alaska Native

**A9. Are you male or female?**

- <sup>1</sup>  Male
- <sup>2</sup>  Female

**B. HOW YOU FILLED TEACHING VACANCIES LAST YEAR**

**B1. Which of the following statements best describes your role in hiring teachers for this school?**

*Mark one box only.*

- I have complete autonomy over teacher hiring..... <sup>1</sup>
- I am part of a school-level team responsible for teacher hiring ..... <sup>2</sup>
- I receive a set of prescreened candidates from the district office as the pool from which I (and a team) can interview and hire teachers..... <sup>3</sup>
- School administrators have little or no input into the teachers who are hired at this school..... <sup>4</sup>
- Other (*Specify*): \_\_\_\_\_ ..... <sup>5</sup>

**B2. In filling teacher vacancies for the 2011-2012 school year, when did you FIRST begin interviewing potential teachers? Mark one box only.**

- |  |  |
|--|--|
| <sup>0</sup> <input type="checkbox"/> December 2010 or earlier | <sup>6</sup> <input type="checkbox"/> June 2011                        |
| <sup>1</sup> <input type="checkbox"/> January 2011             | <sup>7</sup> <input type="checkbox"/> July 2011                        |
| <sup>2</sup> <input type="checkbox"/> February 2011            | <sup>8</sup> <input type="checkbox"/> August 2011                      |
| <sup>3</sup> <input type="checkbox"/> March 2011               | <sup>9</sup> <input type="checkbox"/> September 2011 or later          |
| <sup>4</sup> <input type="checkbox"/> April 2011               | <sup>10</sup> <input type="checkbox"/> Don't know                      |
| <sup>5</sup> <input type="checkbox"/> May 2011                 | <sup>11</sup> <input type="checkbox"/> No vacancies to fill → Go to B5 |

**B3. During which period did you conduct the MOST interviews with potential hires?**

*Write the number 0 - 10 (from the list in B2 above) that corresponds to that period.*

**B4. Please provide the information requested below for the 2011-2012 school year.**

NUMBER

- a. Total number of classroom teacher vacancies ..... |\_\_|\_\_|
- b. Number of applications you reviewed for the position(s) ..... |\_\_|\_\_|
- c. Number of applicants you interviewed ..... |\_\_|\_\_|
- d. Number of offers you made ..... |\_\_|\_\_|
- e. Number of offers that were accepted ..... |\_\_|\_\_|

**B5. How frequently do you use the following factors about your school as incentives or benefits when recruiting or interviewing teachers for your school?**

<i>Mark one box in each row.</i>	NEVER	RARELY	SOMETIMES	OFTEN	ALWAYS
a. Salary .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b. Opportunities to earn performance-based pay.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
c. Opportunities for career advancement.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
d. Opportunities for professional development.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
e. The level of teacher involvement in school decision making .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
f. Collegiality of teaching staff .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
g. The school culture and/or educational philosophy .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
h. The school's reputation .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
i. The school's location or neighborhood .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
j. The level of student achievement at the school .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
k. <b>[Program Name]</b> .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
l. Other 1 ( <i>Specify</i> ):.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
m. Other 2 ( <i>Specify</i> ):.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

**B6. Of the factors that you indicated you used “always” in Question B5, please indicate, in order of importance, the THREE that you feel are the most compelling reasons for teachers to accept a position in your school.**

- a. Most important factor..... \_\_\_\_\_
- b. Second most important ..... \_\_\_\_\_
- c. Third most important ..... \_\_\_\_\_

**B7. Of the applicants who DID NOT ACCEPT your offer of a teaching position, do you think any of the factors listed in Question B5 contributed to that decision?**

- 1  Yes. *In the space below, use the list in Question B5 above to write those that apply, or write any other factor(s) not on the list.*
- a. Factor one ..... \_\_\_\_\_
- b. Factor two ..... \_\_\_\_\_
- c. Factor three ..... \_\_\_\_\_
- d. Other (Specify): ..... \_\_\_\_\_
- 0  No factors apply; personal circumstances unrelated to school or position
- 2  Don't know
- 3  Not applicable

**B8. How frequently do you use the following criteria when assigning teachers to grade levels or subject areas?**

<i>Mark one box in each row.</i>	NEVER	RARELY	SOMETIMES	OFTEN	ALWAYS
a. The teacher's experience in a grade level or subject area.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b. The teacher's seniority .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
c. The teacher's content knowledge .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
d. The teacher's ability to produce high test scores in grades/classes in which state or federal assessments are administered .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
e. The teacher's ability to work with certain student populations (e.g.,ESL, special needs).....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
f. To balance teacher experience and expertise in a grade level or subject .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
g. Other (Specify): .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

**B9. From the list of criteria above, please list the top three criteria you use when assigning teachers to tested grade levels or subject areas (grades/subject areas annually assessed by district and/or state achievement testing).**

- a. criterion #1 \_\_\_\_\_
- b. criterion #2 \_\_\_\_\_
- c. criterion #3 \_\_\_\_\_

### C. TEACHER EVALUATION AT YOUR SCHOOL

**Note:** For the following questions, please consider only instances of **formal observations** conducted in your classroom. **Formal observations** are standardized by using a rubric or checklist and are usually given at regular intervals. (**Informal** observations do not use a standardized rubric or checklist and are not conducted on any set schedule.)

**For the questions in this section, please think about all of the policies and programs in effect at your school, and not just [Program Name].**

**C1. Are formal classroom observations being conducted or planned to evaluate teacher performance in your school?**

- <sup>1</sup>  Yes  
<sup>0</sup>  No → Go to Question C6.

**C2. For each type of school staff listed below, mark Yes or No to indicate if someone in that position conducts formal classroom observations to evaluate teacher performance. If a listed position is not relevant to your school, mark 'not applicable'.**

<i>Mark one box in each row.</i>	YES	NO	NOT APPLICABLE
a. Principal.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>
b. Other administrator (e.g., assistant or vice principal, department head) .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>
c. Mentor, master, or lead teacher at your school ...	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>
d. Mentor, master, or lead teacher from a different school .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>
e. Content specialist.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>
f. Other ( <i>Specify</i> ): _____ .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>

**C3. How often are formal observations conducted for classroom teachers during the school year?**

A classroom teacher is typically observed \_\_\_\_\_ times during the school year.

**C4. Do teachers have the opportunity to review the instrument or rubric so that they can be informed about the criteria on which they are being assessed?**

- <sup>1</sup>  Yes  
<sup>0</sup>  No

**C5. Is each teacher shown his or her ratings after the classroom observation?**

- <sup>1</sup>  Yes  
<sup>0</sup>  No



**C6. Is student achievement used to evaluate teacher performance in your school?**

<sup>1</sup>  Yes

<sup>0</sup>  No → Go to Question C8.

**C7. What student-achievement indicators are used to evaluate teacher performance?**

<i>Mark Yes or No in each row.</i>	YES	NO
a. Student achievement <b>level</b> (e.g., average scores, proficiency rates, or Adequate Yearly Progress – AYP).....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Student achievement <b>growth</b> (value-added, average gains) at the <u>school level</u> .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Student achievement <b>growth</b> in <u>certain student groups</u> (e.g., grade level, team, subject, etc.) .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
d. Student achievement <b>growth</b> in <u>teachers individual classes</u> .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
e. Other ( <i>Specify</i> ): .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>

**C8. Are any of the additional factors listed below used to evaluate teachers' performance in your school?**

<i>Mark Yes or No in each row.</i>	YES	NO
a. Teacher attendance .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Teacher participation in school activities .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Principal's or other administrator's professional judgment.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
d. Reviews from other teachers .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
e. Student attendance .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
f. Parent or student input.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
g. Other 1 ( <i>Specify</i> ): .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
h. Other 2 ( <i>Specify</i> ): .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>

## D. TEACHER COMPENSATION IN YOUR SCHOOL

**NOTE:** For the questions in this section, please think about all of the policies and programs in effect at your school, and not just [Program Name].

**D1. Are teachers in your school eligible for additional pay (beyond their base salary)?**

<sup>1</sup>  Yes

<sup>0</sup>  No → Go to Question D4.

**D2. For which of the following factors are teachers at your school eligible to receive this additional pay?** For each Yes answer, indicate the additional dollar amount or percent of salary that any teacher at your school could receive if she/he earned the maximum amount possible.

	(A) ELIGIBLE FOR ADDITIONAL PAY?	(B) MAXIMUM AMOUNT	OR	(C) MAXIMUM % OF SALARY
a. Teaching in a hard-to-staff school (e.g., schools serving large proportions of economically disadvantaged or low-performing students).....	<sup>1</sup> <input type="checkbox"/> Yes → <sup>0</sup> <input type="checkbox"/> No	\$ _____	OR	_____ %
b. Teaching high-need subjects (e.g., math, science, or special education) .....	<sup>1</sup> <input type="checkbox"/> Yes → <sup>0</sup> <input type="checkbox"/> No	\$ _____	OR	_____ %
c. Attending professional development activities or enrolling in graduate-level courses .....	<sup>1</sup> <input type="checkbox"/> Yes → <sup>0</sup> <input type="checkbox"/> No	\$ _____	OR	_____ %
d. An automatic bonus for participating in [Program Name] .....	<sup>1</sup> <input type="checkbox"/> Yes → <sup>0</sup> <input type="checkbox"/> No	\$ _____	OR	_____ %
e. Job performance, as measured by student achievement growth and/or classroom observations .....	<sup>1</sup> <input type="checkbox"/> Yes → <sup>0</sup> <input type="checkbox"/> No	\$ _____	OR	_____ %
f. Assuming additional roles and responsibilities beyond those of classroom teacher .....	<sup>1</sup> <input type="checkbox"/> Yes → <sup>0</sup> <input type="checkbox"/> No	\$ _____	OR	_____ %
g. Other (Specify): _____	<sup>1</sup> <input type="checkbox"/> Yes → <sup>0</sup> <input type="checkbox"/> No	\$ _____	OR	_____ %

**D3. For which of the following roles or responsibilities are teachers at your school eligible to earn additional pay?**

*For each Yes answer, indicate the additional dollar amount or percent of salary that any teacher at your school could receive if she/he earned the maximum amount possible.*

	(A) ELIGIBLE FOR ADDITIONAL PAY?	(B) MAXIMUM AMOUNT	OR	(C) MAXIMUM % OF SALARY
a. Mentor teacher .....	1 <input type="checkbox"/> Yes → 0 <input type="checkbox"/> No	\$ _____	OR	_____ %
b. Master or lead teacher.....	1 <input type="checkbox"/> Yes → 0 <input type="checkbox"/> No	\$ _____	OR	_____ %
c. Department chair or head.....	1 <input type="checkbox"/> Yes → 0 <input type="checkbox"/> No	\$ _____	OR	_____ %
d. Lead curriculum specialist .....	1 <input type="checkbox"/> Yes → 0 <input type="checkbox"/> No	\$ _____	OR	_____ %
e. Serving on a school-wide committee or task force.....	1 <input type="checkbox"/> Yes → 0 <input type="checkbox"/> No	\$ _____	OR	_____ %
f. Serving on a leadership team in some capacity ( <i>Specify</i> ): .....	1 <input type="checkbox"/> Yes → 0 <input type="checkbox"/> No	\$ _____	OR	_____ %
g. Other ( <i>Specify</i> ): .....	1 <input type="checkbox"/> Yes → 0 <input type="checkbox"/> No	\$ _____	OR	_____ %

**D4. Are teachers in your school eligible for non-monetary benefits in recognition of their performance or added responsibilities?**

- 1  Yes
- 0  No → *Skip to Section E.*

**D5. Which of the following non-monetary benefits are available to teachers?**

<i>Mark Yes or No in each row.</i>	YES	NO
a. Release from classroom teaching for mentoring or other leadership activities.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Decision making authority on issues such as hiring staff or adopting curriculum.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Priority in teaching assignments (e.g., grade level or subject area).....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
d. Priority in student assignment.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
e. Other ( <i>Specify</i> ): _____.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>

**E. PRINCIPAL EVALUATION AND COMPENSATION AT YOUR SCHOOL**

NOTE: For the questions in this section, please think about all of the policies and programs in effect at your school, and not just [Program Name].

**E1. Is the performance of the principal in your school evaluated?**

- <sup>1</sup>  Yes  
<sup>0</sup>  No → *Skip to Section F.*

**E2. Are the following measures used to assess principal performance?**

<i>Mark one box in each row.</i>	YES	NO	DON'T KNOW
a. Student achievement <b>level</b> (e.g., average scores, proficiency rates, or Adequate Yearly Progress – AYP).....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>
b. Student achievement <b>growth</b> (e.g., value-added, average gains) at the <u>school level</u> .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>
c. Student achievement grown in certain student groups (e.g., grade level, team, subject, etc.).....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>
d. Teacher assessments.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>
e. Parent input.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>
f. Other 1 ( <i>Specify</i> ): _____.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>
g. Other 2 ( <i>Specify</i> ): _____.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	9 <input type="checkbox"/>

**E3. Is the principal at your school eligible for additional pay (beyond his or her base salary)?**

- <sup>1</sup>  Yes  
<sup>0</sup>  No → *Skip to Section F.*

**E4. For which of the following factors are you eligible to receive additional pay?** For each Yes answer, indicate (A) the maximum dollar amount possible that you could earn, and (B) the amount you expect to earn.

	ELIGIBLE?		A. MAXIMUM AMOUNT POSSIBLE	B. AMOUNT EXPECTED
	YES	NO		
a. Working in a hard-to-staff school (e.g., schools serving large proportions of economically-disadvantaged or low-performing students).....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	\$ _____	\$ _____
b. Additional roles or responsibilities in the school or district.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	\$ _____	\$ _____
c. Attending professional development activities or enrolling in graduate-level courses .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	\$ _____	\$ _____
d. An automatic bonus for participating in <b>[Program Name]</b> .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	\$ _____	\$ _____
e. Job performance, as measured by student achievement growth and/or formal observations ....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	\$ _____	\$ _____
f. Job performance, measured by something other than student achievement or direct observation (Specify): _____ .....	1 <input type="checkbox"/>	0 <input type="checkbox"/>	\$ _____	\$ _____

**F. THE [Program Name]**

**F1. Were teachers in your school given the opportunity to vote on your school’s participation in [Program Name]?**

- <sup>1</sup>  Yes
- <sup>0</sup>  No → Skip to Question F5

**F2. When was the vote held? Mark only one.**

- <sup>1</sup>  December 2010 or earlier
- <sup>2</sup>  January 2011
- <sup>3</sup>  February 2011
- <sup>4</sup>  March 2011
- <sup>5</sup>  April 2011
- <sup>6</sup>  May 2011
- <sup>7</sup>  June 2011
- <sup>8</sup>  July 2011
- <sup>9</sup>  August 2011
- <sup>10</sup>  September 2011 or later

**F3. Approximately what percentage of the teachers in your school voted in favor of your school participating in [Program Name]? Your best estimate is fine.**

\_\_\_\_\_ PERCENT

**F4. Approximately what percentage of the teachers who participated in that vote are still working in your school? Your best estimate is fine.**

\_\_\_\_\_ PERCENT

**F5. Has [Program Name] affected your choice of where to work as a school administrator?**

<sub>1</sub> Yes → Go to Question F6

<sub>0</sub> No → Go to Question F7

**F6. How has [Program Name] affected your choice of where to work as a school administrator?**  
Mark only one.

<sub>1</sub> I stayed at my school because of [Program Name]

<sub>2</sub> I came to my school to get into [Program Name]

**F7. Tell us about the professional development activities in which teachers at your school participated between July 1, 2011 and December 31, 2011.** These activities include courses they may have taken for recertification or advanced certification, workshops sponsored by your school or district, conferences, or any other training that is relevant to their teaching at your school.

**For each topic listed, indicate the following:**

**A: Was the topic the focus of professional development (PD) in which teachers participated?**

**B: If yes, approximately what percentage of teachers at your school received PD in the topic?**

**C: In general, to what extent do you feel the PD was beneficial to the participants?**

In each row, mark one box in Column A. If Yes, complete columns B and C.	A. FOCUS OF PD?		B. PERCENT OF TEACHERS	C. PERCEIVED BENEFIT OF THE PD			
	YES	NO		NOT AT ALL	SLIGHTLY	SOME-WHAT	HIGHLY
a. Understanding components of [Program Name] .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>0</sub>	_ _	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
b. Understanding performance measure used as part of [Program Name] .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>0</sub>	_ _	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
c. Direct feedback based upon individual performance ratings as measured by [Program Name] ..	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>0</sub>	_ _	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
d. Differentiated instructional strategies based on student assessments .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>0</sub>	_ _	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
e. Instructional techniques and strategies .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>0</sub>	_ _	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>
f. Aligning curricula to state or district standards .....	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>0</sub>	_ _	<input type="checkbox"/> <sub>1</sub>	<input type="checkbox"/> <sub>2</sub>	<input type="checkbox"/> <sub>3</sub>	<input type="checkbox"/> <sub>4</sub>

**F8. Please indicate the extent to which you agree or disagree with each statement about [Program Name] in your school.**

<i>Mark one box in each row.</i>	STRONGLY DISAGREE	DISAGREE	AGREE	STRONGLY AGREE
a. <b>[Program Name]</b> has been clearly communicated to me.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. This school has less chance of earning a bonus because of the characteristics of our student population.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c. The evaluation system omits important aspects of school administration that should be considered ....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d. <b>[Program Name]</b> contributes to greater collegiality and professionalism among the staff in this school.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e. Teachers at this school are more comfortable with frequent formal observations of their teaching because of <b>[Program Name]</b> .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f. Parents and the school community believe <b>[Program Name]</b> is important.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g. <b>[Program Name]</b> is likely to continue for the foreseeable future .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h. I played an important role in implementing <b>[Program Name]</b> at my school .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

**F9. If you have any additional thoughts you would like to share about [Program Name], please use the space below.**

## G. CONTACT INFORMATION

Please provide your contact information below. We will use it to reach you in case we need to clarify any of your responses. We will also use the address to mail your check for completing the questionnaire.

Providing this information is voluntary.

<p>Name: _____</p> <p>Street address: _____</p> <p>City: _____ State: _____ Zip Code: _____</p> <p>Home telephone: _____</p> <p>Cell phone: _____</p> <p>Work email: _____</p> <p>Home email: _____</p> <p>Best time to reach you by phone (day and time): _____</p>
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THANK YOU VERY MUCH FOR COMPLETING THIS QUESTIONNAIRE.