Attachment C:   
  
Teacher Follow-up Survey (TFS) Questionnaires

**Teacher Follow-Up Surveys**

|  |  |
| --- | --- |
| 2012-13 TFS-3 | Current Teacher Questionnaire |
| 2012-13 TFS-2 | Former Teacher Questionnaire |

**2012-13 TFS-3**

**Current Teacher Questionnaire**

OMB No. xxxx-xxxx: Approval Expires 09/30/20xx

Conducted by:

U.S. DEPARTMENT OF EDUCATION U.S. DEPARTMENT OF COMMERCE

National Center for Education Statistics Economics and Statistics Administration

U.S. CENSUS BUREAU

**TEACHER FOLLOW-UP SURVEY**

**QUESTIONNAIRE FOR CURRENT TEACHERS**

**2012-13 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 the Education Sciences Reform Act of 2002, 20 U.S. Code §9541(b) and §9543. The results will only be produced as statistical summaries.

**THIS SURVEY HAS BEEN ENDORSED BY:**

American Association of School Administrators

American Federation of Teachers

American Montessori Society

Association of Christian Schools International

Association of Christian Teachers and Schools

Association of Supervision and Curriculum Development

Association of Waldorf Schools of North America

Christian Schools International

Council for American Private Education

Council of Chief State School Officers

Evangelical Lutheran Church in America

Friends Council on Education

General Conference of Seventh-Day Adventists

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 Christian School Association

National Coalition of Girls’ Schools

National Education Association

National Council for Private School Accreditation

National Independent Private Schools Association

Oral Roberts University Educational Fellowship

Solomon Schechter Day Schools

Southern Baptist Association of Christian Schools

The Association of Boarding Schools

Torah Umesorah – National Society for Hebrew Day Schools

Toussaint Institute

U.S. Conference of Catholic Bishops

Wisconsin Evangelical Lutheran Synod **Dear Teacher:**

You have been selected to be part of the Teacher Follow-up Survey because you completed the 2011-12 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 current teachers’ main assignment field, 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. This survey is authorized by the Education Sciences Reform Act of 2002, 20 U.S. Code §9541(b) and §9543.

**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. 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 may only be used 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 of 2002 (ESRA 2002), 20 U.S. Code, § 9573].

**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/PCSPU, Building 60

1201 E. 10th Street

Jeffersonville, IN 47132-0001

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

Sincerely,

Jack Buckley

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 it displays a valid OMB control number. The valid OMB control number for this voluntary information collection is xxxx-xxxx. The time required to complete this information collection is estimated to average 22 minutes per response, including the time 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 or suggestions for improving this collection, please write to: U.S. Department of Education, Washington, DC 20202-4537. If you have comments or concerns about the contents or the status of your individual submission of this questionnaire, e-mail: [dsd.education.surveys@census.gov](mailto:dsd.education.surveys@census.gov), or write directly to: Schools and Staffing Survey, National Center for Education Statistics, 1990 K Street, N.W., #9026, Washington, DC 20006.

**INSTRUCTIONS**

The data you enter on this form will be captured through the use of imaging technology. Please print all information clearly in ordinary characters, using a **blue or black ball point** **pen**.

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

*(To be inserted)*

**Incorrect** marking example –

*(To be inserted)*

1. If you are the teacher named on the cover page label, please complete the questionnaire.
2. Please do not write any comments near the answer spaces.
3. If you are unsure about how to answer a question, please give the best answer you can rather than leaving it blank.
4. If you have any questions, please call us, toll-free, at 1-866-208-7437 or by e-mail at [dsd.education.surveys@census.gov](mailto:dsd.education.surveys@census.gov). Someone will be available to take your call or answer your e-mail Monday through Friday, between 8:30 a.m. and 5:00 p.m. (Eastern Time). At any other time, please leave a message and someone will return your call as soon as possible.

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

Teacher name

First name

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Middle name

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Last name Suffix

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Street address

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

City

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

State ZIP Code + 4

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

**I. CERTIFICATION AND ASSIGNMENTS AT YOUR CURRENT SCHOOL**

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

**(Regularly scheduled classes are those taught at least once per week for a full term.)**

*\*If you teach a particular specialty either within or outside of a regular classroom (e.g., you are a special education teacher, an English as a Second Language teacher, or a reading specialist teaching reading), please answer “yes.”*

*\*If you work in some other capacity at the school (e.g., principal, library media specialist/librarian or school counselor) and occasionally teach a single lesson or unit of instruction, please answer “no.”*

\_\_ 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 🡪 *GO TO item 4 on page 6.*

\_\_ Teaching part-time

1. **a. Do you have another school position, other than your main position indicated in question 1b?**

\_\_ Yes

\_\_ No 🡪 GO TO item 4 below.

**b. Which of the following best describes your OTHER assignment at your current school?**

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

\_\_ Regular teacher

\_\_ 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)

\_\_ Other – *Please specify 🡪*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

*\*Record one of the teaching assignment and subject matter codes from Table 1 on page 7.*

Code Main assignment

|  |  |  |
| --- | --- | --- |
|  |  |  |

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Table 1. Teaching Assignment Codes for question 4**

**General Education**

**Elementary Education Special Education**

101 Early childhood or pre-K, general 110 Special education, any

102 Elementary grades, general

**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

**Natural Sciences**

210 Science, general

211 Biology or life sciences

212 Chemistry

213 Earth sciences

214 Engineering

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

**Career or Technical Education**

241 Agriculture and natural resources

242 Business management

243 Business support

244 Marketing and distribution

245 Healthcare 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 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**

1. Other

**5. Which of the following best describes the teaching certificate you currently hold that certifies you to teach in THIS state?**

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

\_\_ Regular or standard state certificate or advanced professional certificate

\_\_ Certificate issued after satisfying all requirements except the completion of a probationary period

\_\_ Certificate that requires some additional coursework, student teaching, or passage of a test before regular certification can be obtained

\_\_ Certificate issued to persons who must complete a certification program in order to continue teaching

\_\_ I do not hold any of the above certifications in THIS state

**6. Do you currently teach students in any of these grades at THIS school?**

*\* Please mark (X) Yes or No for each grade level.*

|  |  |
| --- | --- |
| Prekindergarten | \_\_ Yes  \_\_ No |
| Kindergarten | \_\_ Yes  \_\_ No |
| 1st | \_\_ Yes  \_\_ No |
| 2nd | \_\_ Yes  \_\_ No |
| 3rd | \_\_ Yes  \_\_ No |
| 4th | \_\_ Yes  \_\_ No |
| 5th | \_\_ Yes  \_\_ No |
| 6th | \_\_ Yes  \_\_ No |
| 7th | \_\_ Yes  \_\_ No |
| 8th | \_\_ Yes  \_\_ No |
| 9th | \_\_ Yes  \_\_ No |
| 10th | \_\_ Yes  \_\_ No |
| 11th | \_\_ Yes  \_\_ No |
| 12th | \_\_ Yes  \_\_ No |
| Ungraded | \_\_ Yes  \_\_ No |

**7. 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*).

**8.** **Of all the students you teach at your current school, what percent have an Individualized Education Plan (IEP) because they have disabilities or are special education students?**

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

\_\_ None

\_\_ 1-24 %

\_\_ 25-49 %

\_\_ 50-99 %

\_\_ 100 %

**9. Of all the students you teach at your current school, what percent are of limited-English proficiency (also known as English Language Learners)?**

(Students of limited-English proficiency, or English Language Learners, are those whose native or dominant language is other than English, and who have sufficient difficulty speaking, reading, writing, or understanding the English language as to deny them the opportunity to learn successfully in an English-speaking-only classroom.)

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

\_\_ None

\_\_ 1-24 %

\_\_ 25-49 %

\_\_ 50-99 %

\_\_ 100 %

**II. YOUR CURRENT SCHOOL: CONDITIONS AND EXPERIENCES**

**10. To what extent do you agree or disagree with each of the following statements about your current school?**

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

(The following scale is used for the items below: 1) Strongly agree, 2) Somewhat agree, 3) Somewhat disagree, 4) Strongly disagree)

1. **The school administration’s behavior toward the staff is supportive and encouraging.**
2. **I am satisfied with my teaching salary.**
3. **The level of student misbehavior in this school (such as noise, horseplay or fighting in the halls, cafeteria or student lounge) interferes with my teaching.**
4. **I receive a great deal of support from parents for the work I do.**
5. **Necessary materials such as textbooks, supplies, and copy machines are available as needed by the staff.**
6. **Routine duties and paperwork interfere with my job of teaching.**
7. **My principal or school head enforces school rules for student conduct and backs me up when I need it.**
8. **Rules for student behavior are consistently enforced by teachers in this school, even for students who are not in their classes.**
9. **Most of my colleagues share my beliefs and values about what the central mission of the school should be.**
10. **The principal or school head knows what kind of school he/she wants and has communicated it to the staff.**
11. **There is a great deal of cooperative effort among the staff members.**
12. **In this school, staff members are recognized for a job well done.**
13. **I worry about the security of my job because of the performance of my students on state and/or local tests.**
14. **State, district, or local content standards have had a positive influence on my satisfaction with teaching.**
15. **I am given the support I need to teach students with special needs.**
16. **The amount of student tardiness and class cutting in this school interferes with my teaching.**
17. **I am generally satisfied with being a teacher at this school.**
18. **I make a conscious effort to coordinate the content of my courses with that of other teachers.**

**11. To what extent is each of the following a problem at your current school?**

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

(The following scale is used for the items below: 1) Serious problem, 2) Moderate problem, 3) Minor problem, 4) Not a problem)

1. **Student tardiness**
2. **Student absenteeism**
3. **Student class cutting**
4. **Teacher absenteeism**
5. **Students dropping out**
6. **Student apathy**
7. **Lack of parental involvement**
8. **Poverty**
9. **Students come to school unprepared to learn**
10. **Poor student health**

**12. To what extent do you agree or disagree with each of the following statements?**

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

(The following scale is used for the items below: 1) Strongly agree, 2) Somewhat agree, 3) Somewhat disagree, 4) Strongly disagree)

1. **The stress and disappointments involved in teaching at this school aren’t really worth it.**
2. **The teachers at this school like being here; I would describe us as a satisfied group.**
3. **I like the way things are run at this school.**
4. **If I could get a higher paying job, I’d leave teaching as soon as possible.**
5. **I think about transferring to another school.**
6. **I don’t seem to have as much enthusiasm now as I did when I began teaching.**
7. **I think about staying home from school because I’m just too tired to go.**

**13. How many hours a week are you paid to deliver INSTRUCTION to a class of students at your current school?**

*(Example: If your base contract requires you to work 40 hours a week, with 30 of those hours for delivering instruction and 10 hours for planning, monitoring students outside of class time, etc., you would report 30 hours.)*

**\****"PULL-OUT" or "PUSH-IN" TEACHERS: Please include the number of hours you instruct individual students or small groups of students.*

*\*Report total weekly hours to the nearest whole hour.*

If you do not know what is stated in your base contract, please use the following worksheet to calculate your paid instructional hours.

List the number of classes by length of instructional period in a typical week:

\_\_ \_\_ number of classes x \_\_ \_\_ \_\_ instructional minutes = \_\_ \_\_ \_\_ \_\_ minutes

\_\_ \_\_ number of classes x \_\_ \_\_ \_\_ instructional minutes = \_\_ \_\_ \_\_ \_\_ minutes

\_\_ \_\_ number of classes x \_\_ \_\_ \_\_ instructional minutes = \_\_ \_\_ \_\_ \_\_ minutes

\_\_ \_\_ number of classes x \_\_ \_\_ \_\_ instructional minutes = \_\_ \_\_ \_\_ \_\_ minutes

\_\_ \_\_ number of classes x \_\_ \_\_ \_\_ instructional minutes = \_\_ \_\_ \_\_ \_\_ minutes

Sum of minutes of each entry above \_\_ \_\_ \_\_ \_\_ all classes

Convert to hours: ÷ 60

**Total WEEKLY hours spent delivering instruction** |\_\_|\_\_|\_\_|

**14.** Thinking about a TYPICAL FULL WEEK at your current school, complete items a-d below about the hours you spend on ALL teaching and other school-related activities.

*\*****TYPICAL FULL WEEK*** *refers to a week during the regular school year, NOT during the summer. Include hours spent during the school day, before and after school, and weekends.*

*\*****BASE CONTRACT HOURS****, or the equivalent, include the number of hours you are required to work to receive your base pay. It does NOT include stipends or extra pay for extra duty.*

*\*****OTHER PAID HOURS*** *include hours for which you are paid BEYOND your base pay (e.g., hours for which you receive stipends or extra pay).*

*\*****UNPAID HOURS*** *include hours spent on teaching and other school-related activities for which you are NOT paid by your base contract or by stipends or extra pay.*

*\*****TOTAL HOURS*** *includes the sum of base contract hours, other paid hours, and unpaid hours you spend on ALL teaching and other school-related activities during a typical FULL WEEK.*

Hours Spent in a

TYPICAL FULL WEEK

a. Base Contract Hours |\_\_|\_\_|\_\_|

b. Other Paid Hours |\_\_|\_\_|\_\_|

c. Unpaid Hours |\_\_|\_\_|\_\_|

d. **TOTAL** (a+b+c) |\_\_|\_\_|\_\_|

**15. During this school year, do you or will you –**

**a. Coach a sport?**

\_\_ Yes

\_\_ No

**b. Sponsor any student groups, clubs, or organizations?**

\_\_ Yes

\_\_ No

**c. Serve as a department lead or chair?**

\_\_ Yes

\_\_ No

**d. Serve as a lead curriculum specialist?**

\_\_ Yes

\_\_ No

**e. Serve on a school-wide or district-wide committee or task force?**

\_\_ Yes

\_\_ No

1. **Serve as a formal mentor or mentor coordinator in your school or district?**

\_\_ Yes

\_\_ No

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

**16. a. Are you currently teaching in the SAME SCHOOL as you were last year (2011-12)?**

\_\_ Yes 🡪 *GO TO item 25 on page 19.*

\_\_ No

**b. Are you currently teaching in the SAME STATE as you were last year (2011-12)?**

\_\_ 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 on page 16.*

\_\_ No

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

Name of School

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Street

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

City

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

State ZIP Code + 4

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

Name of school district (if applicable)

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Name of county

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

**18. Does your current school offer the following grades?**

*\* Please mark (X) Yes or No for each grade level.*

|  |  |
| --- | --- |
| Prekindergarten | \_\_ Yes  \_\_ No |
| Kindergarten | \_\_ Yes  \_\_ No |
| 1st | \_\_ Yes  \_\_ No |
| 2nd | \_\_ Yes  \_\_ No |
| 3rd | \_\_ Yes  \_\_ No |
| 4th | \_\_ Yes  \_\_ No |
| 5th | \_\_ Yes  \_\_ No |
| 6th | \_\_ Yes  \_\_ No |
| 7th | \_\_ Yes  \_\_ No |
| 8th | \_\_ Yes  \_\_ No |
| 9th | \_\_ Yes  \_\_ No |
| 10th | \_\_ Yes  \_\_ No |
| 11th | \_\_ Yes  \_\_ No |
| 12th | \_\_ Yes  \_\_ No |
| Ungraded | \_\_ Yes  \_\_ No |

**19. Which of the following best describes your move from last year’s school to your current school?**

(For this question, all charter and BIE/tribal 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 21 below.*

\_\_ Moved from one PUBLIC school district to ANOTHER PUBLIC SCHOOL DISTRICT 🡪 *GO TO item 21 below.*

\_\_ Moved from a PRIVATE school to a PUBLIC school 🡪 *GO TO item 21 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. Did you change schools involuntarily (e.g., contract not renewed, laid off, school closed or merged)?**

\_\_ Yes

\_\_ No 🡪 *GO TO item 23 on page 18*

**22. Which of the following best describes the reason why you changed schools involuntarily?**

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

\_\_ Budget cuts or budget shortfalls

\_\_ Reduced pupil enrollment

\_\_ School and/or district merger or school closed

\_\_ Transfer required by school or district

\_\_ 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 have not taken or could not pass the test(s) required by my school or district

\_\_ My contract was not renewed for other reason(s) – *Please specify 🡪* \_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**GO TO item 25 on page 19**

**23. 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.*

(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

1. **Because I wanted to take a job more conveniently located OR because I moved.**
2. **Because of other personal life reasons (e.g., health, pregnancy/childcare, caring for family).**
3. **Because I wanted to receive retirement benefits from last year’s school system.**

Salary and Other Job Benefits

1. **Because I wanted or needed a higher salary.**
2. **Because I needed better benefits than I received at last year’s school.**
3. **Because I was concerned about my job security at last year’s school.**

Assignment and Classroom Factors

1. **Because I was dissatisfied with my job description or assignment (e.g., responsibilities, grade level, or subject area).**
2. **Because I did not have enough autonomy over my classroom at last year’s school.**
3. **Because I was dissatisfied with the large number of students I taught at last year’s school.**
4. **Because I felt that there were too many intrusions on my teaching time at last year’s school.**

School Factors

1. **Because I wanted the opportunity to teach at my current school.**
2. **Because I was dissatisfied with workplace conditions (e.g., facilities, classroom resources, school safety) at last year’s school.**
3. **Because student discipline problems were an issue at last year’s school.**
4. **Because I was dissatisfied with the administration at last year's school.**
5. **Because I was dissatisfied with the lack of influence I had over school policies and practices at last year’s school.**
6. **Because there were not enough opportunities for leadership roles or professional advancement at last year’s school.**

Student Performance Factors

1. **Because I was dissatisfied with how student assessments/school accountability measures impacted my teaching or curriculum at last year’s school.**
2. **Because I was dissatisfied with how some of my compensation, benefits, or rewards were tied to the performance of my students at last year’s school.**
3. **Because I was dissatisfied with the support I received for preparing my students for student assessments at last year’s school.**

Other Factors

1. **Because of other factors not included in previous items a-s. –** *Please specify 🡪 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**24. From the items listed in item 23, which do you consider the most important reason in your decision to leave LAST YEAR’S SCHOOL?**

*\*Enter the letter from item 23 on pages 18 and 19.*

|\_\_| Most important reason in my decision to leave

**25. Indicate how effectively your principal or school head performed each of the following at LAST YEAR’S SCHOOL.**

***\*****If you are teaching in the same school as you were last year, then report on how effective your principal or school head was last year.*

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

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

1. **Communicated respect for, and value of, teachers**
2. **Encouraged teachers to change teaching methods if students were not doing well**
3. **Worked with staff to meet curriculum standards**
4. **Encouraged professional collaboration among teachers**
5. **Worked with teaching staff to solve school or department problems**
6. **Encouraged the teaching staff to use student assessment results in planning curriculum and instruction**
7. **Worked to develop broad agreement among the teaching staff about the school’s mission**
8. **Facilitated and encouraged professional development activities of teachers**

**26. LAST SCHOOL YEAR, did you teach in a public school?**

\_\_ Yes

\_\_ No 🡪 *GO TO item 29 below.*

**27. LAST SCHOOL YEAR, did any of your students participate in a REQUIRED state or district assessment program in a subject that you taught?**

\_\_Yes

\_\_ No 🡪 *GO TO item 29 below.*

**28. To what extent do you agree or disagree with each of the following statements about the state or district assessment program at LAST YEAR’S SCHOOL?**

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

(The following scale is used for the items below: 1) Strongly agree, 2) Somewhat agree, 3) Somewhat disagree, 4) Strongly disagree)

1. **I did not receive adequate support to prepare my students for the assessments.**
2. **I believe that my students were capable of performing well on the assessments.**
3. **The assessment program influenced the curriculum I taught.**
4. **My students’ knowledge and abilities were reflected accurately through their performance on assessments.**
5. **Overall, I was satisfied with the assessment program.**

**29. Were you formally evaluated for your work as a teacher last school year (2011-12)?**

\_\_ Yes

\_\_ No 🡪 *GO TO item 33 on page 21.*

**30. To what extent do you agree or disagree with each of the following statements about the formal evaluation of your work as a teacher last school year (2011-12)?**

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

(The following scale is used for the items below: 1) Strongly agree, 2) Somewhat agree, 3) Somewhat disagree, 4) Strongly disagree)

1. **My work as a teacher was assessed fairly in the formal evaluation.**
2. **I received feedback from the formal evaluation that was helpful in the development of my work as a teacher.**
3. **I was satisfied with the formal evaluation process.**

**31. Which of the following best describes the evaluation you received for your work as a teacher last school year (2011-12)?**

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

\_\_ Excellent / Outstanding / Highly effective

\_\_ Satisfactory / Effective

\_\_ Unsatisfactory / Not that effective

**32. Last year, how effective do you think you were as a teacher?**

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

\_\_ Excellent / Outstanding / Highly effective

\_\_ Satisfactory / Effective

\_\_ Unsatisfactory / Not that effective

**33. 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)

1. **Salary**
2. **Benefits (e.g., health insurance, retirement plan)**
3. **Opportunities for professional ADVANCEMENT or PROMOTION**
4. **Opportunities for professional DEVELOPMENT**
5. **Opportunities for learning from colleagues**
6. **Social relationships with colleagues**
7. **Recognition and support from administrators/managers**
8. **Safety of environment**
9. **Influence over workplace policies and practices**
10. **Autonomy or control over your own work**
11. **Professional prestige**
12. **Procedures for performance evaluation**
13. **Manageability of workload**
14. **Ability to balance personal life and work**
15. **Availability of resources and materials/equipment for doing your job**
16. **General work conditions**
17. **Job security**
18. **Intellectual challenge**
19. **Sense of personal accomplishment**
20. **Opportunities to make a difference in the lives of others**

**IV. EDUCATION ACTIVITIES AND FUTURE PLANS**

**34. a. Have you enrolled in college or university courses since the end of last school year?**

\_\_ Yes

\_\_ No 🡪 *GO TO item 35 on page 23.*

**b. Which of the following best describes your enrollment in these courses?**

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

\_\_ Individual courses (not part of a program leading to a degree or certificate)

\_\_ Vocational certificate program

\_\_ Associate degree granting program

\_\_ Bachelor’s degree granting program

\_\_ Master’s degree granting program

\_\_ Education specialist or professional diploma program (at least one year beyond Master’s level)

\_\_ Certificate of Advanced Graduate Studies program

\_\_ Doctorate or professional degree granting program (Ph.D., Ed.D., M.D., J.D., D.D.S.)

**c. Which of the following best describes the reason you enrolled in these courses?**

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

\_\_ To obtain or for use in a K-12 TEACHING POSITION

\_\_ To obtain or for use in a position in the FIELD OF EDUCATION but NOT AS A K-12 TEACHER 🡪 *GO TO item 35 on page 23.*

\_\_ To obtain or for use in a position OUTSIDE THE FIELD OF EDUCATION 🡪 *GO TO item 35 on page 23.*

\_\_ For reasons unrelated to obtaining or using in a job (e.g., personal fulfillment) 🡪 *GO TO item 35 on page 23.*

**d. Were these courses needed to obtain, renew, or maintain teaching certification?**

\_\_ Yes

\_\_ No

**35. How long do you plan to remain in the position of a pre-K-12 teacher?**

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

\_\_ As long as I am able

\_\_ Until I am eligible for retirement benefits from this job

\_\_ Until I am eligible for retirement benefits from a previous job

\_\_ Until I am eligible for Social Security benefits

\_\_ Until a specific life event occurs (e.g., parenthood, marriage)

\_\_ Until a more desirable job opportunity comes along

\_\_ Definitely plan to leave as soon as I can

\_\_ Undecided at this time

**36. In the last 12 months, have you applied for a job in an attempt to leave the position of a pre-K-12 teacher?**

*\*Answer “no” if you have only applied for summer jobs or other positions to supplement your income from teaching.*

*\*Answer “yes” if you have applied for non-teaching positions in the field of education (e.g., administrator) or a position outside the field of education.*

\_\_ Yes

\_\_ No

**V. GENERAL EMPLOYMENT AND BACKGROUND INFORMATION**

The following questions refer to your BEFORE-TAX earnings from teaching and other employment.

**37. DURING THE SUMMER OF 2012, did you have any earnings from –**

*\*Record amounts in whole dollars.*

1. **Teaching summer school in your current or any other school?**

\_\_ Yes 🡪 **How much?**

*\*Record amount then GO TO item 37b below*

**$ |\_\_|\_\_| , |\_\_|\_\_|\_\_|** . 00 Per year

\_\_ No

1. **Working in a non-teaching job in your current or any other school?**

\_\_ Yes 🡪 **How much?**

*\*Record amount then GO TO item 37c below*

**$ |\_\_|\_\_| , |\_\_|\_\_|\_\_|** . 00 Per year

\_\_ No

1. **Working in any NONSCHOOL job?**

\_\_ Yes 🡪 **How much?**

*\*Record amount then GO TO item 38 below*

**$ |\_\_|\_\_|\_\_| , |\_\_|\_\_|\_\_|** . 00 Per year

\_\_ No

**38. DURING THE CURRENT SCHOOL YEAR, what is your base teaching salary for the entire school year?**

*\*Record amount in whole dollars.*

**$ |\_\_|\_\_|\_\_| , |\_\_|\_\_|\_\_|** . 00 for the entire school year

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

*\*Record amount in whole dollars.*

\_\_ Yes 🡪 **How much?**

*\*Record amount then GO TO item 40 on page 25*

**$|\_\_|\_\_| , |\_\_|\_\_|\_\_|** . 00 Per year

\_\_ No

**40. DURING THE CURRENT SCHOOL YEAR, do you, or will you, earn any additional compensation from this school system based on your students’ performance (e.g., through a merit pay or pay-for-performance agreement)?**

*\*Record amount in whole dollars.*

\_\_ Yes🡪 **How much?**

\_\_ No \**Record amount then GO TO item 41 below.*

**$**|\_\_|\_\_| **, |\_\_|\_\_|\_\_|** .00 Per year

**41. DURING THE CURRENT SCHOOL YEAR, have you earned income from any OTHER sources from your current school system, such as a state supplement, etc.?**

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

*\*Record amount in whole dollars.*

\_\_ Yes 🡪 **How much?**

\_\_ No *\*Record amount then GO TO item 42 below*

**$ |\_\_|\_\_| , |\_\_|\_\_|\_\_|** . 00Per year

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

*\*Record amount in whole dollars.*

\_\_ Yes 🡪 **How much?**

**\****Record amount, then GO TO item 42b below.*

**$ |\_\_|\_\_| , |\_\_|\_\_|\_\_|** . 00Per year

\_\_ No 🡪 *GO TO item 47 below.*

1. **Which of these best describes this job OUTSIDE your current school system?**

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

\_\_ Teaching or tutoring

\_\_ Non-teaching, but related to teaching field

\_\_ Other

**43. During the current school year do you, or will you, receive a retirement pension check paid from a teacher retirement system?**

*\*Record amount in whole dollars.*

\_\_ Yes 🡪 **How much?**

\_\_ No **\*** *Record amount then GO TO item 44 on page 26.*

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

**44. Which category represents the total combined BEFORE-TAX income of ALL FAMILY MEMBERS in your household during 2012?**

*\*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

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

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

\_\_ Own

\_\_ Rent

\_\_ Other living arrangement – *Please specify🡪* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**46. 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

**47. Including yourself, how many family members were living in your household or were financially dependent on you (or your spouse) during 2012?**

|\_\_|\_\_| Family members

**48. How many family members counted in the previous item were 4 years of age or younger?**

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

⁪ None **or |**\_\_|\_\_| Family members 4 years of age or younger

**VI. CONTACT INFORMATION**

**49. Please provide the following information in case we have questions about the responses you provided on this questionnaire.**

a. First name

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Middle name

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Last name Suffix

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

1. Home phone number

Area code Number

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

1. Work phone number

Area code Number

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

1. Cell phone number

Area code Number

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

1. Home e-mail address

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

1. Work e-mail address

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

**50. 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

***Please place your completed questionnaire in the enclosed***

***pre-addressed, postage-paid envelope or mail it to:***

**U.S. Census Bureau**

**ATTN: DCB/PCSPU Building 60**

**1201 E. 10th Street**

**Jeffersonville, IN 47132-0001**

***Thank you very much for your participation in this survey.***

***If you have ANY questions, please contact us,***

***toll-free, at: 1-866-208-7437 or by e-mail at:***

[***dsd.education.surveys@census.gov***](mailto:dsd.education.surveys@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://www.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 the NCES website at:**  http://www.nces.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> |

**2012-13 TFS-2**

**Former Teacher Questionnaire**

OMB No. xxxx-xxxx: Approval Expires xx/xx/20xx

Conducted by:

U.S. DEPARTMENT OF EDUCATION U.S. DEPARTMENT OF COMMERCE

National Center for Education Statistics Economics and Statistics Administration

U.S. CENSUS BUREAU

**TEACHER FOLLOW-UP SURVEY**

**QUESTIONNAIRE FOR FORMER TEACHERS**

**2012-13 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 the Education Sciences Reform Act of 2002, 20 U.S. Code §9541(b) and §9543. The results will only be produced as statistical summaries.

**THIS SURVEY HAS BEEN ENDORSED BY:**

American Association of School Administrators

American Federation of Teachers

American Montessori Society

Association of Christian Schools International

Association of Christian Teachers and Schools

Association of Supervision and Curriculum Development

Association of Waldorf Schools of North America

Christian Schools International

Council for American Private Education

Council of Chief State School Officers

Evangelical Lutheran Church in America

Friends Council on Education

General Conference of Seventh-Day Adventists

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 Christian School Association

National Coalition of Girls’ Schools

National Education Association

National Council for Private School Accreditation

National Independent Private Schools Association

Oral Roberts University Educational Fellowship

Solomon Schechter Day Schools

Southern Baptist Association of Christian Schools

The Association of Boarding Schools

Torah Umesorah – National Society for Hebrew Day Schools

Toussaint Institute

U.S. Conference of Catholic Bishops

Wisconsin Evangelical Lutheran Synod

**Dear Teacher:**

You have been selected to be part of the Teacher Follow-up Survey because you completed the 2011-12 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 current teachers’ main assignment field, 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. This survey is authorized by the Education Sciences Reform Act of 2002, 20 U.S. Code §9541(b) and §9543.

**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. 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 may only be used 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 of 2002 (ESRA 2002), 20 U.S. Code, § 9573].

**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/PCSPU, Building 60

1201 E. 10th Street

Jeffersonville, IN 47132-0001

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

Sincerely,

Jack Buckley

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 it displays a valid OMB control number. The valid OMB control number for this voluntary information collection is xxxx-xxxx. The time required to complete this information collection is estimated to average 19 minutes per response, including the time 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 or suggestions for improving this collection, please write to: U.S. Department of Education, Washington, DC 20202-4537. If you have comments or concerns about the contents or the status of your individual submission of this questionnaire, e-mail: [dsd.education.surveys@census.gov](mailto:dsd.education.surveys@census.gov), or write directly to: Schools and Staffing Survey, National Center for Education Statistics, 1990 K Street, N.W., #9026, Washington, DC 20006.

**INSTRUCTIONS**

The data you enter on this form will be captured through the use of imaging technology. 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.)*

*(To be inserted)*

**Incorrect** marking example –

*(To be inserted)*

1. If you are the teacher named on the cover page label, please complete the questionnaire.
2. Please do not write any comments near the answer spaces.
3. If you are unsure about how to answer a question, please give the best answer you can rather than leaving it blank.
4. If you have any questions, please call us, toll-free, at 1-866-208-7437 or by e-mail at [dsd.education.surveys@census.gov](mailto:dsd.education.surveys@census.gov). Someone will be available to take your call or answer your e-mail Monday through Friday, between 8:30 a.m. and 5:00 p.m. (Eastern Time). At any other time, please leave a message and someone will return your call as soon as possible.

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

Teacher name

First name

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Middle name

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Last name Suffix

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Street address

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

City

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

State ZIP Code + 4

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

**I. EMPLOYMENT STATUS**

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

**(Regularly scheduled classes are those taught at least once per week for a full term.)**

*\* If you teach a particular specialty either within or outside of a regular classroom (e.g., you are a special education teacher, an English as a Second Language teacher, or a reading specialist teaching reading),please answer “yes.”*

\* *If you work in some other capacity at the school (e.g., principal, library media specialist/librarian or school counselor) and occasionally teach a single lesson or unit of instruction, please answer “no.”*

\_\_ Yes 🡪 *GO TO item 1c below*.

\_\_ No

**b. Are you currently on: maternity or paternity leave, disability leave, or sabbatical from teaching?**

\_\_ Yes🡪 *GO TO item 3 on page 6*.

\_\_ No 🡪 *GO TO item 3 on page 6*

**c. 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.*

1 \_\_ Regular teacher (full-time or part-time)

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

3 \_\_ 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)

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

5 \_\_ Library media specialist or librarian

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

7 \_\_ Support staff (e.g., secretary)

8 \_\_ Short-term substitute

9 \_\_ Student teacher

10 \_\_ Teacher aide

**d. Which box did you mark in item 1c above?**

\_\_ Box 1, 2, 3, 4, 5, 6, or 7 🡪 *Please STOP now and return this questionnaire to the Census Bureau. You will be sent another form for teachers who are still teaching.*

\_\_ Box 8, 9, or 10 🡪 *GO TO item 2 on page 6.*

**2. Last school year you reported teaching regularly scheduled classes. This school year you reported a transition to a teacher aide, student teacher, or short-term substitute teacher. In 20 words or less, please explain the reason for the change.**

|  |
| --- |
| **NOTE:** For this survey, teacher aides, student teachers, and short-term substitute teachers are not considered current regular classroom teachers. Please complete this Former Teacher Questionnaire as best you can based on your experience of changing from a classroom teacher to a teacher aide, short-term substitute teacher, or student teacher.  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**3. What is your current MAIN occupational status?**

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

\_\_ Working for a school or school district in a position in the field of K-12 education, but not as a regular K-12 classroom teacher 🡪 *GO TO item 6 on page 7.*

\_\_ Working in the field of K-12 education but not in a school/district 🡪 *GO TO item 5a.*

\_\_ Working in the field of pre-K or postsecondary education 🡪 *GO TO item 5a.*

\_\_ Working outside the field of education, including military service 🡪 *GO TO item 5a.*

\_\_ Student at a college or university

\_\_ Caring for family members

\_\_ Retired

\_\_ Disabled

\_\_ Unemployed 🡪 *GO TO item 11 on page 8.*

\_\_ Other – *Please specify* 🡪

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**4. Are you currently working in a job?**

\_\_ Yes

\_\_ No 🡪 *GO TO item 11 on page 8*.

**5. a. What kind of work do you do, that is, what is your occupation?**

\* *Please record your job title; for example, electrical engineer, stock clerk, typist.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**b. What are your most important activities or duties at this job?**

\* *For example, typing, keeping account books, filing, selling cars, operating printing press, finishing concrete.*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**c. How would you classify yourself in this job?**

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

\_\_ An employee of a PRIVATE company, non-profit, business, or individual for wages, salary, or commission

\_\_ A FEDERAL government employee

\_\_ A STATE government employee

\_\_ A LOCAL government employee

\_\_ SELF-EMPLOYED in your own business, professional practice, or farm

\_\_ Working WITHOUT PAY in a family business or farm

\_\_ Working WITHOUT PAY in a volunteer job

**GO TO item 7**

**6. Is your current main occupation a –**

*\* If you have more than one position, mark (X) the position for which you spend the most time.*

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

\_\_ Principal/school head

\_\_ Assistant principal

\_\_ School district administrator

\_\_ Librarian/Library technician

\_\_ Instructional coordinator

\_\_ Academic coach/specialist

\_\_ Teacher assistant/aide

\_\_ Counselor or school psychologist

\_\_ Short-term substitute

\_\_ Other occupation – *Please specify 🡪 \_\_\_\_\_*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**7. Are you employed full-time or part-time?**

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

\_\_ Employed full-time

\_\_ Employed part-time

**8. What are your estimated annual before-tax earnings at this job?**

*\* If you are in the military service, report military earnings here.*

*\* Include earnings from commissions, merit pay bonuses, and other bonuses from this job.*

*\* If this is a volunteer position with no annual earnings please record 0.*

*\* Report earnings in whole dollars.*

$ |\_\_|\_\_|\_\_| , |\_\_|\_\_|\_\_| . 00 Per year

**9. How long do you plan to remain in your current position?**

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

\_\_ As long as I am able

\_\_ Until I am eligible for retirement benefits from this job

\_\_ Until I am eligible for retirement benefits from a previous job

\_\_ Until I am eligible for social security benefits

\_\_ Until a specific life event occurs (e.g., parenthood, marriage)

\_\_ Until a more desirable job opportunity comes along

\_\_ Definitely plan to leave as soon as I can

\_\_ Undecided at this time

**10. Do you have any other earned income, such as from a second job?**

*\* Do not include money from dividends, interest, rent, Social Security payments, and other non-earned income sources.*

*\* Do not include earnings from spouses, partners, or other family members.*

*\* Record earnings in whole dollars.*

**\*** *Record amount then GO TO item 11 below.*

\_\_ Yes 🡪 **How much?** $ |\_\_|\_\_|\_\_| , |\_\_|\_\_|\_\_| . 00 Per year

\_\_ No

**11. Are you currently receiving a retirement pension check paid from a teacher retirement system?**

*\*Report amount in whole dollars.*

**\*** *Record amount then GO TO item 12a below.*

\_\_ Yes 🡪 **How much?** $ |\_\_|\_\_| , |\_\_|\_\_|\_\_| . 00 Per year

\_\_ No

**12. a. Did you receive an incentive to retire from the position of a K-12 teacher at last year’s school?**

(An incentive is a monetary bonus or reward used to encourage teachers to retire.)

\_\_ Yes

\_\_ No 🡪 *GO TO item 13 on page 9.*

**b. Would you have remained in teaching if you had not received an incentive to retire?**

\_\_ Yes

\_\_ No

**II. INFORMATION ON LEAVING THE TEACHING PROFESSION**

**13. Did you leave your K-12 teaching position involuntarily (e.g., contract not renewed, laid off, school closed or merged)?**

**\_\_** Yes

**\_\_** No 🡪 *GO TO item 15 on page 10.*

**14. Which of the following best describes why you involuntarily left your K-12 teaching position ?**

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

**\_\_** Budget cuts or budget shortfalls

**\_\_** Reduced pupil enrollment

**\_\_** School and/or district merger or school closed

**\_\_** 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 have not taken or could not pass the test(s) required by my school or district

**\_\_** My contract was not renewed for other reason(s) – *Please specify 🡪*  \_\_\_\_\_\_\_\_\_\_\_\_\_

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**GO TO item 18 on page 12.**

**15. Indicate the level of importance EACH of the following played in your decision to leave the position of a K-12 teacher.**

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

(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 the position of a K-12 teacher –**

Personal Life Factors

1. **Because I wanted to take a job more conveniently located OR because I moved.**
2. **Because of other personal life reasons (e.g., health, pregnancy/childcare, caring for family).**
3. **Because I decided to retire or receive retirement benefits from last year’s school system.**

Salary and Other Job Benefits

1. **Because I wanted or needed a higher salary.**
2. **Because I needed better benefits than I received at last year's school.**
3. **Because I was concerned about my job security at last year's school.**

Career Factors

1. **Because I decided to pursue a position other than that of a K-12 teacher.**
2. **Because I decided to take courses to improve career opportunities WITHIN the field of education.**
3. **Because I decided to take courses to improve career opportunities OUTSIDE the field of education.**
4. **Because I was dissatisfied with teaching as a career.**
5. **Because there were not enough opportunities for leadership roles or professional advancement at last year’s school.**

Assignment and Classroom Factors

1. **Because I was dissatisfied with my job description or assignment (e.g., responsibilities, grade level, or subject area).**
2. **Because I did not have enough autonomy over my classroom at last year's school.**
3. **Because I was dissatisfied with the large number of students I taught at last year's school.**
4. **Because I felt that there were too many intrusions on my teaching time at last year's school.**

**I left the position of a K-12 teacher –**

School Factors

1. **Because I was dissatisfied with workplace conditions (e.g., facilities, classroom resources, school safety) at last year's school.**
2. **Because student discipline problems were an issue at last year's school.**
3. **Because I was dissatisfied with the administration at last year's school.**
4. **Because I was dissatisfied with the lack of influence I had over school policies and practices at last year's school.**

Student Performance Factors

1. **Because I was dissatisfied with how student assessments and school accountability measures impacted my teaching or curriculum at last year’s school.**
2. **Because I was dissatisfied with how some of my compensation, benefits, or rewards were tied to the performance of my students at last year's school.**
3. **Because I was dissatisfied with the support I received for preparing my students for student assessments at last year’s school.**

Other Factors

1. **Because of other factors not included in the previous items a-v** – *Please specify 🡪***\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**16. From the items above, which do you consider the one most important reason in your decision to leave the position of a K-12 teacher?**

*\* Enter the letter from item 15 above.*

|\_\_| Most important

**III. YOUR IMPRESSIONS OF TEACHING AND OF YOUR CURRENT JOB**

**17. Indicate how effectively your principal or school head performed each of the following at LAST YEAR’S SCHOOL.**

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

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

1. **Communicated respect for and value of teachers**
2. **Encouraged teachers to change teaching methods if students were not doing well**
3. **Worked with staff to meet curriculum standards**
4. **Encouraged professional collaboration among teachers**
5. **Worked with teaching staff to solve school or department problems**
6. **Encouraged the teaching staff to use student assessment results in planning curriculum and instruction**
7. **Worked to develop broad agreement among the teaching staff about the school’s mission**
8. **Facilitated and encouraged professional development activities of teachers**

**18. LAST SCHOOL YEAR, did you teach in a public school?**

\_\_ Yes 🡪 *GO TO item 20 below.*

\_\_ No 🡪 *GO TO item 22 on page 13.*

**19. LAST SCHOOL YEAR, did any of your students participate in a REQUIRED state or district assessment in a subject that you taught?**

\_\_Yes

\_\_ No 🡪 *GO TO item 22 on page 13.*

**20. To what extent do you agree or disagree with each of the following statements about the state or district assessment program at LAST YEAR’S SCHOOL?**

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

(The following scale is used for the items below: 1) Strongly agree, 2) Somewhat agree, 3) Somewhat disagree, 4) Strongly disagree)

1. **I did not receive adequate support in preparing my students for the assessments.**
2. **I believe my students were capable of performing well on the assessments.**
3. **The assessment program influenced the curriculum I taught.**
4. **My students’ knowledge and abilities were reflected accurately through their performance on assessments.**
5. **Overall, I was satisfied with the assessment program.**

**21. Were you formally evaluated for your work as a teacher last school year (2011-12)?**

\_\_ Yes

\_\_ No 🡪 *GO TO item 24 below.*

**22. To what extent do you agree or disagree with each of the following statements about the formal evaluation of your work as a teacher last school year (2011-12)?**

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

(The following scale is used for the items below: 1) Strongly agree, 2) Somewhat agree, 3) Somewhat disagree, 4) Strongly disagree)

1. **My work as a teacher was assessed fairly in the formal evaluation.**
2. **I received feedback from the formal evaluation that was helpful in the development of my work as a teacher.**
3. **I was satisfied with the formal evaluation process.**

**23. Which of the following best describes the evaluation you received for your work as a teacher last school year (2011-12)?**

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

\_\_ Excellent / Outstanding / Highly effective

\_\_ Satisfactory / Effective

\_\_ Unsatisfactory / Not that effective

**24. Last year, how effective do you think you were as a teacher?**

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

\_\_ Excellent / Outstanding / Highly effective

\_\_ Satisfactory / Effective

\_\_ Unsatisfactory / Not that effective

**25. What is your MAIN occupational status?**

*\*Your response should correspond to item 3 on page 6.*

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

\_\_ Working for a school or school district in a position in the field of K-12 education, but not as a regular K-12 classroom teacher

\_\_ Working in the field of K-12 education but not in a school/district

\_\_ Working in the field of pre-K or postsecondary education

\_\_ Working outside the field of education, including military service

\_\_ Other than the above 🡪 *GO TO item 28 on page 15.*

**26. How would you rate your current position relative to teaching in terms of each of the following aspects?**

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

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

1. **Salary**
2. **Benefits (e.g., health insurance, retirement plan)**
3. **Opportunities for professional ADVANCEMENT or PROMOTION**
4. **Opportunities for professional DEVELOPMENT**
5. **Opportunities for learning from colleagues**
6. **Social relationships with colleagues**
7. **Recognition and support from administrators/managers**
8. **Safety of environment**
9. **Influence over workplace policies and practices**
10. **Autonomy or control over your own work**
11. **Professional prestige**
12. **Procedures for performance evaluation**
13. **Manageability of workload**
14. **Ability to balance personal life and work**
15. **Availability of resources and materials/equipment for doing your job**
16. **General work conditions**
17. **Job security**
18. **Intellectual challenge**
19. **Sense of personal accomplishment**
20. **Opportunities to make a difference in the lives of others**

**27. Thinking about all the factors that influence your job satisfaction, overall, how satisfied are you with your current position compared to the position of a K-12 teacher?**

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

\_\_ More satisfied in teaching

\_\_ More satisfied in current position

\_\_ No difference

**IV. EDUCATION ACTIVITIES AND FUTURE PLANS**

**28. a. Have you enrolled in college or university courses since the end of last school year?**

\_\_ Yes

\_\_ No 🡪 *GO TO item 29 below.*

**b. Which of the following best describes your enrollment in these courses?**

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

\_\_ Individual courses (not part of a program leading to a degree or certificate)

\_\_ Vocational certificate program

\_\_ Associate degree granting program

\_\_ Bachelor’s degree granting program

\_\_ Master’s degree granting program

\_\_ Education specialist or professional diploma program (at least one year beyond Master’s level)

\_\_ Certificate of Advanced Graduate Studies program

\_\_ Doctorate or professional degree granting program (Ph.D., Ed.D., M.D., J.D., D.D.S.)

**c. Which of the following best describes the reason you enrolled in these courses?**

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

\_\_ To obtain or for use in a K-12 TEACHING POSITION

\_\_ To obtain or for use in a position in the FIELD OF EDUCATION but NOT AS A K-12 TEACHER 🡪 *GO TO item 29 below.*

\_\_ To obtain or for use in a position OUTSIDE THE FIELD OF EDUCATION 🡪 *GO TO item 29 below.*

\_\_ For reasons unrelated to obtaining or using in a job (e.g., personal fulfillment) 🡪 *GO TO item 29 below.*

**d. Were these courses needed to obtain, renew, or maintain teaching certification?**

\_\_ Yes

\_\_ No

**29. Would you consider returning to the position of a K-12 teacher?**

\_\_ Yes

\_\_ No 🡪 *GO TO item 34 on page 17.*

**30. How soon might you return to the position of a K-12 teacher?**

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

\_\_ Later this school year (2012-13)

\_\_ Next school year (2013-14)

\_\_ After the 2013-14 school year, but before the 2017-18 school year

\_\_ During the 2017-18 school year or later

\_\_ Undecided

**31. At what level would you most like to teach?**

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

\_\_ Elementary (including kindergarten)

\_\_ Junior high/Middle school

\_\_ Senior high

**32. Indicate how important each factor would be in influencing your decision to return to the position of a K-12 teacher.**

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

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

1. **Ability to maintain your teacher retirement benefits**
2. **State certification reciprocity (a state’s acceptance of teacher certifications from other states)**
3. **An easier and less costly way to renew/earn certification**
4. **Smaller class sizes or smaller student load**
5. **Availability of full-time teaching positions**
6. **Availability of part-time teaching positions**
7. **Forgiveness of your student loans**
8. **Housing incentives (e.g., subsidies, rent assistance, low interest loans, relocation assistance)**
9. **An increase in salary**
10. **Availability of suitable childcare options**

**33. Would any factors other than the ones listed above influence your decision to return to the position of a K–12 teacher?**

\_\_ Yes 🡪 If "Yes," **What factors** *(please list up to two factors)?*

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_ No

**V. BACKGROUND INFORMATION**

**34. Which category represents the total combined BEFORE-TAX income of ALL FAMILY MEMBERS in your household during 2012?**

*\* 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

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

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

\_\_ Own

\_\_ Rent

\_\_ Other living arrangement – *Please specify 🡪 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

**36. 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

**37. Including yourself, how many family members were living in your household or were financially dependent on you (or your spouse) during 2012?**

**|\_\_|\_\_|** Family members

**38. How many family members counted in the previous item were 4 years of age or younger?**

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

⁪ None **or |**\_\_|\_\_| Family members 4 years of age or younger

**VI. CONTACT INFORMATION**

**39. Please provide the following information in case we have questions about the responses you provided on this questionnaire.**

a. First name

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Middle name

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

Last name Suffix

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

1. Home phone number

Area code Number

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

1. Work phone number

Area code Number

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

1. Cell phone number

Area code Number

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

1. Home e-mail address

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

1. Work e-mail address

\_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_ \_\_

**40. 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

***Please place your completed questionnaire in the enclosed***

***pre-addressed, postage-paid envelope or mail it to:***

**U.S. Census Bureau**

**ATTN: DCB/PCSPU Building 60**

**1201 E. 10th Street**

**Jeffersonville, IN 47132-0001**

***Thank you very much for your participation in this survey.***

***If you have ANY questions, please contact us,***

***toll-free, at: 1-866-208-7437 or by e-mail at:***

[***dsd.education.surveys@census.gov***](mailto:dsd.education.surveys@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://www.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 the NCES website at:**  http://www.nces.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> |