

Attachment H

Math and Science Partnership Program

Annual Survey for K-12 Institute Participants

**Sponsored by the
National Science Foundation**

**Conducted by
Westat
1650 Research Boulevard
Rockville, Maryland 20850**

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Paperwork Reduction Act Notice. The Paperwork Reduction Act of 1995 says we must tell you why we are collecting this information, how we will use it and whether you have to give it to us. The reasons and purpose of this survey are described in the introduction and instructions for this survey and your response is voluntary. Failure to provide full and complete information, however, may reduce the possibility of NSF continuing support for the award or project subject to this monitoring survey. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The OMB control number for this survey is 3145-0199. The estimated average burden associated with this collection of information is 1.33 hours per respondent, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing the burden should be sent to Suzanne Plimpton, Reports Clearance Officer for OMB 3145-0199, NSF/DAAS, 4201 Wilson Boulevard, Arlington, VA 22230.

Annual Survey of K-12 Institute Participants

The National Science Foundation (NSF) is collecting annual information about each of its Math and Science Partnership (MSP) projects. The purpose is to assess the overall implementation of the MSP program and to monitor the progress of individual MSP grants.

This survey is designed to obtain information from **each K-12 teacher and administrator** who has enrolled in one or more MSP Institute courses or workshops. The Principal Investigator (PI) of one of the MSP Institutes has identified you as being an appropriate respondent. If you have any questions about the MSP Management Information System, please contact:

Holly Bozeman
1-800-937-8281, ext. 2619
MSPMIS@westat.com

We estimate that it will take approximately 80 minutes of your time to complete this survey. Thank you in advance for completing this survey.

INSTRUCTIONS FOR COMPLETING THE SURVEY

Feed-back from K-12 teachers and administrators participating in the MSP program is crucial for understanding the strengths and weaknesses of the MSP program. We have constructed this survey to give you the flexibility to respond in general and in detail relative to your level of involvement.

Neither NSF nor the Federal Government will maintain names or contact information associated with this survey. However, this information is held by the awardee institution. Your responses to the questions, however, will not be shared with the PI except in summary form.

Please answer the following questions with the most appropriate response. You may cut and paste text into this system.

It is recommended that you review the Primer (which can be accessed electronically by clicking on "Help" in the menu on the top of the page) before beginning the survey. The Primer provides general instructions and navigation information.

As you are completing the survey, please click the Save & Continue button after you respond to each item/set of items. Once an item or item set is saved, you may use the **Question Guide** to return to an item and revise your response. If you exit the system without saving, you will lose any unsaved data.

When you are ready to submit your data to NSF, please click the Submit button at the end of the form. You will no longer have access to this survey after a Final Submit has been made.

Professional Status	Professional Community Building
Continued Professional Development	Dissemination of Institute Information
[INSERT PROJECT NAME] Participation	

Professional Status

This section obtains information on your professional status during the **[INSERT SCHOOL YEAR]** school year.

1. Please review and update the following item. If there are no changes, click on save and continue:

What was the name of the K–12 school at which you were working during the **[INSERT SCHOOL YEAR] school year?**

First school (district) name: (Pre-filled)¹

Second school (district) name: (Pre-filled)²

2. Please review and update the following item. If there are no changes, click on save and continue:

What was the designation of your K–12 school during the **[INSERT SCHOOL YEAR] school year:** (Check *one* response)³

- Elementary school
- Middle school/junior high school
- K–8 school
- K-12 school
- High school
- Ungraded school
- Other (specify): _____

¹ Response is pre-filled (Q4 from Initial). Respondent can alter text.

² Response is pre-filled (Q4 from Initial). Respondent can alter text.

³ Response is pre-filled (Q5 from Initial).

3. Please review and update the following item. If there are no changes, click on save and continue:

Which of the following best reflects your primary position during the **[INSERT SCHOOL YEAR]** school year? (Check *one* response.)⁴

- Elementary school teacher
- Middle school/junior high school teacher
- High school teacher
- Curriculum specialist
- School-wide subject-specific specialist⁵
- District-wide subject-specific specialist⁶
- Department head
- Principal
- Vice Principal or Assistant Principal
- Other (specify): _____

⁴ Response is pre-filed (Q6 from Initial).

⁵ Respondent will be asked to indicate if mathematics or science specialist.

⁶ Respondent will be asked to indicate if mathematics or science specialist.

4. Did you have any instructional responsibilities with K-12 students at your school during the **[INSERT SCHOOL YEAR]** school year?

- Yes
- No⁷

5. What grades did you teach or provide other services for a mathematics or science subject during the **[INSERT SCHOOL YEAR]** school year? (Check *all* that apply)

- Pre-kindergarten
- Kindergarten
- 1st grade
- 2nd grade
- 3rd grade
- 4th grade
- 5th grade
- 6th grade
- 7th grade
- 8th grade
- 9th grade
- 10th grade
- 11th grade
- 12th grade
- Ungraded

⁷ If checked, skip to Q7, otherwise continue with Q5.

6. What subject(s) did you teach or provide other services for during the [INSERT SCHOOL YEAR] school year? (Check all that apply)

NOTE – Please refer to the glossary for the definitions of the high school level 1 – 5 Mathematics courses.

Mathematics

- Elementary school mathematics
- Middle school Mathematics
 - Includes Algebra 1 content*
 - Includes Geometry content*
 - Includes Algebra 2 content*
- High school Level 1 Mathematics
- High school Level 2 Mathematics
- High school Level 3 Mathematics
- High school Level 4 Mathematics
- High school Level 5 Mathematics
- AP Calculus (AB)
- AP Calculus (BC)
- AP Statistics
- Other (specify): _____

Science

- Elementary school science
- Middle school science
- Non-AP Biology
- Non-AP Chemistry
- Non-AP Physics
- Earth Science Integrated Science
- AP Biology
- AP Chemistry
- AP Physics
- Other (specify): _____

Computer Science

- Non-AP computer science
- AP computer science

* These items are selected only after “Middle school mathematics” is selected.

7. Please review and update the following item. If there are no changes, click on save and continue:

What degrees have you earned? (Check *all* cells that apply)⁸

NOTE—Degree options do not include certifications, certificates, endorsements, or licensures. If you have earned a degree that was a combination of several different degree fields, check all of the cells that apply (e.g., Master’s degree in mathematics and education.)

Type of degree	Degree field ⁹			
	Mathematics	Science	Education	Other
Bachelor’s degree				
Master’s degree				
Ph.D.				
Ed.D.				
Professional degree (e.g., M.D., LPN)				
Specialist degree				
Other (specify): _____				

8. Are you currently working on a degree? (Check *one* response)

- Yes (Continue with Question 8b.)
- No (Go to Question 9.)

⁸ Response is pre-filled (Q13 from Initial).

⁹ NOTE: Additional information will be requested for all degree fields checked, e.g., “Please use this list to specify the discipline of the [TYPE OF DEGREE] you earned in [DEGREE FIELD]”

8a. What degrees are you currently working on? (Check *all* cells that apply)

NOTE—Degree options do not include certifications, certificates, endorsements, or licensures. If you have earned a degree that was a combination of several different degree fields, check all of the cells that apply (e.g., Master’s degree in mathematics and education.)

Type of degree	Degree field ¹⁰			
	Mathematics	Science	Education	Other
Bachelor’s degree				
Master’s degree				
Ph.D.				
Ed.D.				
Professional degree (e.g., M.D., LPN)				
Specialist degree				
Other (specify): _____				

¹⁰ NOTE: Additional information will be requested for all degree fields checked, e.g., “Please use this list to specify the discipline of the [TYPE OF DEGREE] you are working on in [DEGREE FIELD]”

9. Please review and update the following item. If there are no changes, click on save and continue:

Which of the following state teaching certifications do you currently hold? (Check *all* that apply.)¹¹

- Elementary school: General
- Elementary school: Mathematics
- Elementary school: Science

- Middle school: General
- Middle school: Mathematics
- Middle school: Science

- High school: Mathematics
- High school: Science–General
- High school: Biology
- High school: Chemistry
- High school: Physics
- High school: Earth Science

- Special Education
- ESL/Bilingual

- Other subject area within state *endorsements* (specify): _____

10. Please review and update the following item. If there are no changes, click on save and continue:

Which of the following other certifications have you successfully completed? (Check *all* that apply)¹²

- National Board Certification©
- Praxis¹³ II™
- Praxis III™
- Other (specify): _____
- None of the above

¹¹ Response is pre-filled (Q15 from Initial).

¹² Response is pre-filled (Q16 from Initial).

¹³ The Praxis was formerly called the National Teachers Exam (NTE).

11. Which of the following leadership roles did you hold during the [INSERT SCHOOL YEAR] school year? (Check *all* that apply)

- Served on curriculum committee
- Served on textbook adoption committee
- Served on other school-wide or district-wide committee or task force

If yes, please describe: _____

- Involved in peer coaching activities
- Served as Lesson Study leader/participant
- Served as officer in a local professional organization for science and/or mathematics
- Served as committee chair/officer/representative for a national professional organization (e.g., NSTA, NCTM)
- Served on business/industry mathematics or science task force in local area
- Served as mathematics/science supervisor
- Served as a department chair or mathematics/science leader for my grade or building
- Mentored novice teachers
- Supervised an undergraduate or graduate student on practicum
- Formed action research community in my school and/or district
- Organized a learning community for teachers in my school and/or district
- Offered an in-service workshop for other teachers
- Offered a professional development workshop in math or science
- Made a presentation to my school, administrators, school board, or other organization about my school's efforts to improve student achievement in math or science
- Other (specify): _____
- None of the above

Professional Community Building

This section obtains information about the growth and development of a professional community among teacher leaders and other **[INSERT STEM]** and education professionals.

1. Using the table below, indicate how often you are in contact with the following mathematics, science, and/or education professionals as a result of your participation in the **[INSERT PROJECT NAME]** during the **[INSERT SCHOOL YEAR]** academic school year:

STEM and Education Professionals	How often were you in contact with the following professionals during the [INSERT SCHOOL YEAR] academic school year? ¹⁴
a) Other Institute teacher leaders	<input type="checkbox"/> Daily <input type="checkbox"/> Once or twice a week <input type="checkbox"/> Once or twice a month <input type="checkbox"/> Once or twice a year <input type="checkbox"/> Never
b) University, college, or community college science, technology, engineering, and/or mathematics faculty	<input type="checkbox"/> Daily <input type="checkbox"/> Once or twice a week <input type="checkbox"/> Once or twice a month <input type="checkbox"/> Once or twice a year <input type="checkbox"/> Never
c) University, college, and/or community college education faculty	<input type="checkbox"/> Daily <input type="checkbox"/> Once or twice a week <input type="checkbox"/> Once or twice a month <input type="checkbox"/> Once or twice a year <input type="checkbox"/> Never
d) Post-docs, graduate students, and/or undergraduates	<input type="checkbox"/> Daily <input type="checkbox"/> Once or twice a week <input type="checkbox"/> Once or twice a month <input type="checkbox"/> Once or twice a year <input type="checkbox"/> Never
e) Non-academic mathematician/scientist	<input type="checkbox"/> Daily <input type="checkbox"/> Once or twice a week <input type="checkbox"/> Once or twice a month <input type="checkbox"/> Once or twice a year <input type="checkbox"/> Never
f) Other (specify): _____	<input type="checkbox"/> Daily <input type="checkbox"/> Once or twice a week <input type="checkbox"/> Once or twice a month <input type="checkbox"/> Once or twice a year <input type="checkbox"/> Never

¹⁴ For each type of professional the respondent was in contact with daily, once or twice a week, once or twice a month, or once or twice a year, he/she will be asked to complete two additional items about their interaction.

Complete the following items for each science, technology, engineering, mathematics and/or education professional that you were in contact with daily, once or twice a week, or once or twice a month during the **[INSERT SCHOOL YEAR]** academic school year:

1. What was the most frequent means of communication with this professional? (Check *one* response)

- In person
- Email
- Phone
- Other (specify): _____

2. What was the purpose of your communication with this professional? (Check *all* that apply)

- To discuss successes and/or struggles of implementing knowledge learned at the **[INSERT PROJECT NAME]** Institute
- To develop more challenging curriculum/lesson plans
- To plan for future activities (e.g. professional development, conferences, seminars, etc.)
- To attend colloquia/workshops/seminars together
- To attend professional development activities together
- To analyze the results of state assessments
- To participate in a learning community/study group
- To participate in **[INSERT PROJECT NAME]** research project
- To discuss course work
- Other (specify): _____

Continued Professional Development

This section obtains information about the type of **[INSERT PROJECT NAME]** supported professional development activities you have completed during the **[INSERT SCHOOL YEAR]** academic school year.

- Using the table below, identify the **[INSERT PROJECT NAME]**-related professional development activities you completed during the **[INSERT SCHOOL YEAR]** academic school year.

Professional Development Activities	Did you receive or take part in this activity during the [INSERT SCHOOL YEAR] academic school year? ¹⁵
a) Completed a formal course(s) in mathematics, science, teacher education, educational assessment, and/or educational leadership during the [INSERT SCHOOL YEAR] academic school year.	Yes/No (If yes, see page 14)
b) Received ongoing support, assistance, or mentoring from one or more [INSERT PROJECT NAME] faculty members (e.g., a faculty member on-call to receive content related questions, worked with Master Teachers on lesson plan development for diverse student populations, discussed content/instructional issues in my classroom, etc)	Yes/No (If yes, see page 16)
c) Participated in an externship/internship program (e.g., teachers spend a year or less with a [INSERT PROJECT NAME] business or industry partner related to their field)	Yes/No (If yes, see page 18)
d) Attended conferences, workshops, seminars and/or colloquia, gave a talk at a meeting, or authored a publication.	Yes/No (If yes, see page 19)
e) Other (<i>specify</i>): _____	Yes/No (If yes, see page 21)
f) Other (<i>specify</i>): _____	Yes/No (If yes, see page 21)
g) Other (<i>specify</i>): _____	Yes/No (If yes, see page 21)
h) Other (<i>specify</i>): _____	Yes/No (If yes, see page 21)
i) Other (<i>specify</i>): _____	Yes/No (If yes, see page 21)

¹⁵ NOTE: Additional information will be requested for all activities for which the response was “Yes.”

If response is “Yes” to activity a) *Completed a formal course(s) in mathematics, science, teacher education, educational assessment, and/or educational leadership during the [INSERT SCHOOL YEAR] academic school year* , then complete the following item set:

1. How many courses did you take during the [INSERT SCHOOL YEAR] academic school year?

2. Did you receive academic credit for the course(s) you took during the [INSERT SCHOOL YEAR] academic school year?

- Yes, I received credits for *all* courses taken
- Yes, I received credit for some but not all courses taken
- No, I did not receive credit for the courses I took

3. What was the focus of the course(s)? (Check *all* that apply)

- Mathematics, science, and/or teacher education pedagogy
- Mathematics, science, and/or teacher education content
- Educational assessment
- Educational leadership
- Other (specify): _____

4. What was the educational level of the course(s)? (Check *all* that apply)

- Undergraduate
- Graduate
- Certificate
- Other (specify): _____

5. How was the course(s) offered? (Check *all* that apply)

- Online
- In-class at a university or college campus
- In-class at a K-12 school building
- In-class at an other location (specify): _____
- Other (specify): _____

6. When was the course(s) offered? (Check *all* that apply)

- Not applicable – my courses are offered online
- During teaching hours
- Evenings
- Weekends

7. **Did you conduct or assist with any research as part of this course(s)?** (Check *all* that apply)

- No
- Yes, science, technology, engineering, and/or mathematics research
- Yes, education research
- Yes, action research
- Yes, other research (specify): _____

8. **How has completing a formal course(s) in mathematics, science, teacher education, educational assessment, and/or educational leadership contributed to your development as a teacher leader and/or enhanced understanding of your content area?**

NOTE - If reporting an enhanced understanding of your content area, please specify the content area.

If response is “Yes” to activity b) *Received ongoing support, assistance, or mentoring from one or more [INSERT PROJECT NAME] faculty members, then complete the following item set:*

1. Which of the following [INSERT PROJECT NAME] Institute faculty members provided you with ongoing technical support, assistance, or mentoring during the [INSERT SCHOOL YEAR] academic school year? (Check *all* that apply)

NOTE – If mentored, received support, or received support from more than one faculty member, provide information for the individual who was your primary mentor or the individual from whom you have received the most guidance.

- University, college, or community college science, technology, engineering, and/or mathematics faculty
- University, college, or community college education faculty
- Master teacher
- Post-doc
- Graduate student
- Undergraduate student
- Professional development consultant
- Other (specify): _____

2. How often were you provided support, assistance, or mentoring during the [INSERT SCHOOL YEAR] academic school year? (Check *one* response for each question)

<p>a. In person. (Check <i>one</i> response)</p> <ul style="list-style-type: none"><input type="checkbox"/> Daily<input type="checkbox"/> Once or twice a week<input type="checkbox"/> Once or twice a month<input type="checkbox"/> A few times during the year<input type="checkbox"/> Never
<p>b. By internet (e.g., email, chat room). (Check <i>one</i> response)</p> <ul style="list-style-type: none"><input type="checkbox"/> Daily<input type="checkbox"/> Once or twice a week<input type="checkbox"/> Once or twice a month<input type="checkbox"/> A few times during the year<input type="checkbox"/> Never
<p>c. By telephone. (Check <i>one</i> response)</p> <ul style="list-style-type: none"><input type="checkbox"/> Daily<input type="checkbox"/> Once or twice a week<input type="checkbox"/> Once or twice a month<input type="checkbox"/> A few times during the year<input type="checkbox"/> Never

3. Briefly describe the type of technical support, assistance, or mentoring you were provided during the **[INSERT SCHOOL YEAR]** school year:

4. How has receiving ongoing support, assistance, or mentoring from one or more **[INSERT PROJECT NAME]** faculty member contributed to your development as a teacher leader and/or enhanced understanding of your content area?

NOTE - If reporting an enhanced understanding of your content area, please specify the content area.

If response is “Yes” to activity c) *Participated in an externship/internship program*, then complete the following item set:

1. Where did you complete the externship/internship? (Check *one* response)

- An institution of higher education (specify): _____
- A private (non-institute of higher education) research institution or laboratory (specify): _____
- A business (specify): _____
- A government agency/lab (specify): _____
- An informal science institution (e.g., a museum) (specify): _____
- Other (specify): _____

2. How long was the externship/internship program? (Check *one* response)

- Less than a week
- 1 to 2 weeks
- 3 to 4 weeks
- One to three months
- Four to six months
- More than six months

3. Did you conduct or assist with any research as part of this externship/internship? (Check *all* that apply)

- No
- Yes, science, technology, engineering, and/or mathematics research
- Yes, education research
- Yes, action research
- Yes, other research (specify): _____

4. Briefly describe the types of activities that you participated in as part of your externship/internship during the [INSERT SCHOOL YEAR] school year:

5. How has participating in an externship/internship program contributed to your development as a teacher leader and/or enhanced understanding of your content area?

NOTE - If reporting an enhanced understanding of your content area, please specify the content area.

If response is “Yes” to activity d) *Attended conferences, workshops, seminars and/or colloquia, gave a talk at a meeting, or authored/co-authored a publication*, then complete the following item set:

1. How many publications did you author/co-author during the [INSERT SCHOOLYEAR] school year?

Specify number: _____ (Continued with question 1a)

Not applicable (Go to question 2)

1a. Using the table below, list the title of the publication(s) you have authored/co-authored during the [INSERT SCHOOL YEAR] school year and indicate whether or not the publication was published in a refereed journal.

Title of Authored/Co-Authored Publication	Published in a refereed journal?
1. _____	Yes/No
2. _____	Yes/No
3. _____	Yes/No
4. _____	Yes/No
5. _____	Yes/No
6. _____	Yes/No
7. _____	Yes/No
8. _____	Yes/No
9. _____	Yes/No
10. _____	Yes/No

2. **What was the focus of the conference, colloquia, workshop(s), talk, and/or seminar(s)?** (Check *all* that apply)

- Not applicable -- Did not attend conference, colloquia, workshop, talk, and/or seminar
- Science, technology, engineering, and/or mathematics content
- Science, technology, engineering, and/or mathematics research
- Instructional strategies
- Instructional materials (e.g. technology, curriculum, etc.)
- Pedagogy
- Assessment
- Student diversity
- Leadership
- Other (specify): _____

3. **How has attending conferences, workshops, seminars and/or colloquia, giving a talk at a meeting, or authoring/co-authoring a publication contributed to your development as a teacher leader and/or enhanced understanding of your content area?**

NOTE - If reporting an enhanced understanding of your content area, please specify the content area.

If response is “Yes” to activity e) *Other (specify)*, then complete the following item:

1. What was this professional development activity and how has it contributed to your development as a teacher leader and/or enhanced understanding of your content area?

NOTE – If reporting an enhanced understanding of your content area, please specify the content area.

Dissemination of Institute Information

This section obtains information about the ways in which you, as a teacher leader, during the **[INSERT SCHOOL YEAR]** have disseminated the information you learned through the **[INSERT PROJECT NAME]** Institute.

1. Estimate the number of teachers and administrators that you worked with on **[INSERT PROJECT NAME]** during the **[INSERT SCHOOL YEAR]** academic school year:

	Teachers	Administrators
In your school		
In your school district (excluding your school)		

- 1a. How often did you work with the other **[INSERT TEACHER OR ADMINISTRATOR]** in your **[INSERT SCHOOL OR DISTRICT]** on **[INSERT PROJECT NAME]** related activities during the **[INSERT SCHOOL YEAR]** academic school year? (Check *one* response)

- Daily
- Once or twice a week
- Once or twice a month
- Once or twice a year

- 1b. How have you disseminated **[INSERT PROJECT NAME]** Institute information to other **[INSERT TEACHER OR ADMINISTRATOR]** in your **[INSERT SCHOOL OR DISTRICT]** during the **[INSERT SCHOOL YEAR]** academic school year? (Check *all* that apply)

- Conducted classroom observations and offered feedback for improvement
- Served as a mentor
- Performed demonstration teaching for the other mathematics/science teachers
- Led study groups or science, technology, engineering, and/or mathematics learning communities with teachers on mathematics/science concepts and/or instructional skills
- Collaborated with other teachers to develop challenging mathematics/science curriculum
- Collaborated with other teachers to develop ways to promote higher student achievement
- Conducted professional development workshops and activities
- Other (specify): _____

2. Did you work with any teachers or administrators on [INSERT PROJECT NAME] related activities outside of your district or state?

- Yes (Continue with Question 2a)
- No (Go to Question 3)

2a. How often did you work with the other teachers and/or administrators from outside of your district and/or state on [INSERT PROJECT NAME] related activities during the [INSERT SCHOOL YEAR] academic school year? (Check *one* response)

- Daily
- Once or twice a week
- Once or twice a month
- Once or twice a year

2b. How have you disseminated [INSERT PROJECT NAME] Institute information to teachers and/or administrators from outside of your district and/or state during the [INSERT SCHOOL YEAR] academic school year? (Check *all* that apply)

- Conducted classroom observations and offered feedback for improvement
- Served as a mentor
- Performed demonstration teaching for the other mathematics/science teachers
- Led study groups or science, technology, engineering, and/or mathematics learning communities with teachers on mathematics/science concepts and/or instructional skills
- Collaborated with other teachers to develop challenging mathematics/science curriculum
- Collaborated with other teachers to develop ways to promote higher student achievement
- Conducted professional development workshops and activities
- Other (specify): _____

3. Did you present at a professional conference or workshop during the **[INSERT SCHOOL YEAR]** school year to disseminate information that you've learned through your participation in the **[INSERT PROJECT NAME]** Institute? (Check *one* response)

- Yes (Continue with Question 3a)
- No (Section complete)

3a. Please list the professional conference(s)/workshop(s) you presented at during the **[INSERT SCHOOL YEAR]** school year:

3b. What was the topic of your presentation(s)? (Check *all* that apply)

- Science, technology, engineering, and/or mathematics content
- Science, technology, engineering, and/or mathematics research
- Instructional strategies
- Instructional materials (e.g. technology, curriculum, etc.)
- Pedagogy
- Assessment
- Student diversity
- Leadership
- Other (specify): _____

[INSERT PROJECT NAME] Participation

This section obtains information about your involvement in the **[INSERT PROJECT NAME]** Institute during the **[INSERT SCHOOL YEAR]** school year.

1. **How much time did you spend at the **[INSERT PROJECT NAME]** 2005 Summer Institute?**
(Check *one* response)

- Less than 2 weeks (*Skip to Q2*)
- 2 to 3 weeks (*Skip to Q2*)
- 4 to 5 weeks (*Skip to Q2*)
- 6 weeks or more (*Skip to Q2*)
- Not applicable – No Summer Institute, entire program was offered online (*Continue to Q1a*)
- Did not attend

- 1a. **What support did you receive for participating in the **[INSERT PROJECT NAME]**?** (*Skip to Q4 after completing this item*)

- No support provided
- Release time, constituting _____% of my daily schedule
- Administrative support
- Financial support
- Additional recognition/rewards
- Tuition reimbursement
- Other (specify)

2. **What support did you receive for participating in the **[INSERT PROJECT NAME]** 2005 Summer Institute?** (Check *all* that apply)

- No support provided
- Release time, constituting _____ % of my daily schedule
- Administrative support
- Financial support
- Additional recognition/rewards
- Tuition reimbursement
- Other (specify): _____

3. What support did you receive from **[INSERT PROJECT NAME]** during the **[INSERT SCHOOL YEAR]** academic year to fulfill your teacher leader responsibilities and/or to participate in project related activities? (Check *all* that apply)

- No support provided
- Release time, constituting _____ % of my daily schedule
- Administrative support
- Financial support
- Additional recognition/rewards
- Tuition reimbursement
- Other (specify): _____

4. To what extent did each of the following facilitate or hinder your ability to fulfill your teacher leader responsibilities AND/OR participate in **[INSERT PROJECT NAME]** during the **[INSERT SCHOOL YEAR]** academic school year? (Check *one* response for each question)

	Facilitate 1	2	Neutral 3	4	Hinder 5	Not Applicable
a. Total amount of <i>financial assistance</i> that I received	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The total amount of <i>release time</i> that I received	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Level of cooperation provided by the <i>principal</i> at your school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Level of cooperation provided by <i>other administrators</i> in your school or district	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Level of cooperation provided by other <i>teachers</i> in your school or district	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Level of ongoing support provided by faculty or others at post-secondary institutions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Level of ongoing support (other than financial) provided by your school or district	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Were there any other factors that facilitated or hindered your ability to fulfill your teacher leader responsibilities AND/OR participate in **[INSERT PROJECT NAME]** during the **[INSERT SCHOOL YEAR]** academic school year?

6. Briefly describe how your teaching practices changed over the course of your involvement with the **[INSERT PROJECT NAME]**. Your response may include changes to your approach to planning lessons and/or classroom practices. Your response should also include what aspect of your involvement brought about this change.

7. What has been your own most significant contribution to your school, district, or state as a result of your involvement with the **[INSERT PROJECT NAME]**?

8. How has your role within your school and/or district changed over the course of your involvement with the **[INSERT PROJECT NAME]**?
