

OMB Appendix I.

NLTS 2012 SCHOOL CHARACTERISTICS QUESTIONNAIRE



NLTS-2012

SCHOOL CHARACTERISTICS QUESTIONNAIRE

Thank you in advance for the time spent completing this questionnaire—it is vital to the success of this important U.S. Department of Education study. Study findings will be critical as federal, state and local agencies work to improve the quality of services and outcomes for youth with and without disabilities. Be assured that your answers will be completely confidential; no information will be reported that identifies you or this school. For the NLTS 2012, Mathematica Research Policy and DIR are authorized to collect data under law 20 U.S.C. 123g;34CFR Part 99. Gathering the following information will help you complete the questionnaire more quickly:

- For the **current school year**:
 - Student- body demographic information, including the estimated number of students who are:
 - English language learners
 - In each ethnic/racial category
 - School personnel counts such as the number of:
 - Teachers and other personnel working in your school
 - Teachers with less than 3 years of teaching experience
- For the **2010-2011 school year**:
 - The number of suspensions, expulsions, and incidents of physical violence
 - For students in grade 12, the number of students who graduated and the number who dropped out

If you prefer to complete the questionnaire on our secure website, you may do so at XXXXXX.XXX. Your log-in and password are XXXXXXXXXX XXXXXXXXXX. You may also call XXX-XXX-XXXX to complete the questionnaire by telephone, or if you have any questions about the study or the participation of your school, staff, or students.

Alternately, you may email us at XXXXXXXX, or visit our web site at XXXXXXXX.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is XXXX-XXXX. The time required to complete this information collection is estimated to average 30 minutes, 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 form, please write to: U.S. Department of Education, Washington, DC 20201-4651.

A. School Characteristics

The first questions are about the characteristics of your school.

A1. Which of the following best describes this school?

(NLTS2 Modified)

MARK ONE ONLY

- 1 Regular school that serves a wide variety of students
- 2 School that serves only students with disabilities
- 3 Magnet school or special program-emphasis school that specializes in a particular subject area or theme
- 4 Career-technical school
- 5 Alternative school
- 6 Charter school
- 7 Hospital school
- 8 Another kind of school (*Please describe*)

A2. Is this a / an...

(NLTS2A2 Modified)

MARK YES OR NO ON EACH ROW

	Yes	No
a. Public school?	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Residential/boarding school?	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Year-round school?	1 <input type="checkbox"/>	0 <input type="checkbox"/>
d. School serving a single gender of students?	1 <input type="checkbox"/>	0 <input type="checkbox"/>
e. Alternate school – such as schools specifically for students who have been suspended, expelled or who dropped out or have been referred for behavioral or adjustment problems?	1 <input type="checkbox"/>	0 <input type="checkbox"/>

A3. What grade levels are taught at this school?

(NLTS2A3, REV)

MARK ALL THAT APPLY

- | | |
|--|--|
| 1 <input type="checkbox"/> Pre-K / pre-first grade | 9 <input type="checkbox"/> 7 |
| 2 <input type="checkbox"/> K | 10 <input type="checkbox"/> 8 |
| 3 <input type="checkbox"/> 1 | 11 <input type="checkbox"/> 9 |
| 4 <input type="checkbox"/> 2 | 12 <input type="checkbox"/> 10 |
| 5 <input type="checkbox"/> 3 | 13 <input type="checkbox"/> 11 |
| 6 <input type="checkbox"/> 4 | 14 <input type="checkbox"/> 12 |
| 7 <input type="checkbox"/> 5 | 15 <input type="checkbox"/> Ungraded |
| 8 <input type="checkbox"/> 6 | 16 <input type="checkbox"/> Adult School |

A4. What is the average class size for the following kinds of classes? Your best guess is fine.

(NLTS2A9, REV)

	Class Size	No Classes of This Kind
a. General education academic classes	_ _	0 <input type="checkbox"/>
b. Career-technical education or applied academic classes	_ _	0 <input type="checkbox"/>
c. Special education resource rooms	_ _	0 <input type="checkbox"/>
d. Self-contained special education classes	_ _	0 <input type="checkbox"/>

A5. What proportion of buildings on the school campus are fully accessible to students with physical disabilities (i.e., have ramps or elevators if more than one floor, accessible restrooms, Braille signage, and visual announcement systems and fire alarms)?

(NLTS2A10)

MARK ONE ONLY

- 0 None
- 1 Some
- 2 Most
- 3 All

A6. During the previous school year (2010-2011), approximately how many of the following occurred at this school?

(NLTS2A11, REV)

Enter "0" if none

	Number of Incidents
a. Expulsions	_ _ _
b. Out-of-school suspensions	_ _ _
c. In-school suspensions (during the school day, after school, Saturday).....	_ _ _
d. Incidents of physical violence	_ _ _

B. Student Characteristics

Next, we would like to know about the students that attended your school around October of this year. Your best estimate of numbers or percentages is fine.

B1. Around October 1 of this school year, how many students were enrolled at this school?

(NLTS2A4)
 |__|,|__|__| NUMBER OF STUDENTS ENROLLED

B2. Is this a special education only school?

Yes → **GO TO B4**

No

B3. Around October 1 of this school year (2011-2012), about how many students with disabilities who did not have IEPs had a written accommodation plan as required by Section 504 of the Vocational Rehabilitation Act?

(NLTS2B2)

|__|__| NUMBER OF STUDENTS WITH A SECTION 504 PLAN
Enter "0" if none

B4. Around October 1 of this school year (2011-2012), about how many students were identified as English language learners (ELL), that is, limited-English-proficient (LEP) or English-as-a-second-language (ESL) students?

(NLTS2B3)

	Percentage of Students	OR	Number of Students
NUMBER OF ELL, LEP OR ESL STUDENTS	__ __ __ %		__ , __ __
<i>Enter "0" if none</i>			

B5. Around October 1 of this school year (2011-2012), about how many students in the school belonged to each of the following ethnic groups?

(NLTS2B4)

Please indicate percentage or number on each row, whichever is easiest.

	Percentage of Students	OR	Number of Students
a. Hispanic or Latino	__ __ __ %		__ , __ __
b. Not Hispanic or Latino	__ __ __ %		__ , __ __

B6. Around October 1, about how many students in the school belonged to each of the following groups?

Please indicate percentage or number on each row, whichever is easiest.

	Percentage of Students	OR	Number of Students
a. American Indian or Alaska Native	__ __ __ %		__ , __ __
b. Asian	__ __ __ %		__ , __ __
c. Black or African American	__ __ __ %		__ , __ __
d. Native Hawaiian or Other Pacific Islander	__ __ __ %		__ , __ __
e. White	__ __ __ %		__ , __ __
f. Two or more races	__ __ __ %		__ , __ __

B7. About how many of the students enrolled in your school last year (2010-2011) moved away from your school during that school year (student mobility rate)?

(NLTS2B6)
Modified)

Percentage of Students
_ _ _ %

OR

Number of Students
_ , _ _ _

B8. What is the last day of your school year for academic year 2011-2012?

(NEW)

Month: _____ Day: _____, 2012

B9. Did your school make Adequate Yearly Progress (AYP) Requirements during the 2010-2011 school year?

(NEW)

1 Yes → GO TO B10

0 No



B9a. Please specify the Program Improvement (PI) year status of your school during the 2010-2011 school year.

(NEW)

MARK ONE ONLY

1 School was not in PI in 2010-2011

2 PI Year 1

3 PI Year 2

4 PI Year 3

5 PI Year 4

6 PI Year 5 or longer

B10. Please indicate the school's participation status in the Title I, Part A, program for the 2011-2012 school year from the following:

(NEW)

MARK ONE ONLY

1 School receives funding as a Targeted Assistance School

2 School receives funding to operate a School-wide Program

3 School is not eligible for funding under Title I, Part A

4 School district does not accept funding from Title I, Part A

C. Staffing

The next questions are about the staff at your school and their caseloads in the 2010-2011 school year.

C1. In 2010-2011, what was the total number of FTE teachers (including general and special education)?

(NLTS2C1a and C1c)

- Report staff in full-time equivalent units (FTEs) and feel free to estimate percentages or numbers (e.g., a person who worked one full day each week is considered .20 FTE).
- Enter the number of FTEs on each row. Enter "0" if none.

Approximate Total Teacher FTEs	MARK THE NUMBER OF FTEs ON EACH ROW
a. General education classroom teachers (includes all specialties such as art, music, languages, and physical education)	_ _ _ _ . _ _
b. Special education teachers (self-contained or single subject)	_ _ _ _ . _ _
c. Special education resource room or consulting teachers.....	_ _ _ _ . _ _
d. Bilingual or ESL teachers	_ _ _ _ . _ _
e. Career and Technical Education (CTE) teachers.....	_ _ _ _ . _ _
f. Other teachers	_ _ _ _ . _ _
g. TOTAL	_ _ _ _ . _ _

C2. In 2010-2011, how many of the following personnel (including those contracted for services) worked in this school during a typical week (in FTE units)?

(NLTS2C2a-e)

Approximate Total FTEs	MARK THE NUMBER OF FTEs ON EACH ROW
a. Reading specialists.....	_ _ _ _ . _ _
b. Speech/communication therapists or pathologists	_ _ _ _ . _ _
c. Nursing/medical personnel	_ _ _ _ . _ _
d. School psychologists or other diagnostic personnel	_ _ _ _ . _ _
e. Guidance counselors	_ _ _ _ . _ _
f. Social workers	_ _ _ _ . _ _
g. Paid teacher aides/instructional assistants	_ _ _ _ . _ _
h. Librarians, library aides, or other library/media center staff	_ _ _ _ . _ _
i. Transition Specialists.....	_ _ _ _ . _ _
j. Administrators, including instructional coordinators and supervisors such as curriculum specialists	_ _ _ _ . _ _
k. TOTAL	_ _ _ _ . _ _

C3. In 2010-2011, about how many FTE teachers in this school...

- Report staff in full-time equivalent units (FTEs) and feel free to estimate percentages or numbers (e.g., a person who works one full day each week is considered .2 FTE).
- Enter the number of FTEs on each row. Enter "0" if none.

FTE Teachers	
a. Were fully credentialed for their primary teaching assignment?.....	_ _ _ _ . _
b. Had less than 3 years teaching experience?	_ _ _ _ . _

C4. How many different students do the following kinds of staff members see in an average month?

(NLTS2C3 Modification)

- Please enter one number on each row or indicate that you have no staff of this kind.

	Average Number of Students Seen per month	Have No Staff of this Kind
a. Guidance counselors.....	_ _ _	0 <input type="checkbox"/>
b. School psychologists.....	_ _ _	0 <input type="checkbox"/>
c. Transition specialists /case managers who coordinate services for students with IEPs as they set goals for transition out of secondary school.	_ _ _	0 <input type="checkbox"/>

D. School Resources and Programs

In the next questions, please tell us more about the resources available at your school.

D1. FOR EACH SETTING BELOW, PLEASE MARK WHEN THIS SCHOOL HAS COMPUTERS AVAILABLE FOR STUDENT USE.

(NLTS2 C5, CSA and B)

MARK ALL THAT APPLY FOR EACH ROW

Are computers available in...

	During class hours	During lunch	Before or after school	Computers not available
a. Regular academic classes?	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Special education classes?	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Career-technical education classes?	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. A library, media center, or computer lab?	0 <input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

D2. Below is a list of programs and supports schools can offer to students. For each, please indicate whether your school offers this program or support during the current school year (2011-2012).

(NEW)

- Each applies to students with and without disabilities.
- Please include programs provided by alternate service providers.

	Program or support offered?	
	Yes	No
Programs Providing Academic Support		
a. Supplemental instruction or tutoring in academic subjects before or after school	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Supplemental instruction or tutoring in academic subjects on weekends.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Saturday school for struggling learners.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
d. Drop out prevention or dropout recovery program.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Other School Programs and Supports		
e. Study-skills classes	1 <input type="checkbox"/>	0 <input type="checkbox"/>
f. Financial literacy classes	1 <input type="checkbox"/>	0 <input type="checkbox"/>
g. Organized school sports	1 <input type="checkbox"/>	0 <input type="checkbox"/>
h. Clubs or activities (e.g., literary magazine, cultural activity groups, pep club)	1 <input type="checkbox"/>	0 <input type="checkbox"/>
i. Band, chorus, drama, or other performing opportunities	1 <input type="checkbox"/>	0 <input type="checkbox"/>
j. Reproductive health or /pregnancy prevention education or services.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
k. Substance abuse counseling or education	1 <input type="checkbox"/>	0 <input type="checkbox"/>
l. Teen parenting instruction	1 <input type="checkbox"/>	0 <input type="checkbox"/>
m. Child care for children of teen parents	1 <input type="checkbox"/>	0 <input type="checkbox"/>
n. Instruction on appropriate use of social networking sites	1 <input type="checkbox"/>	0 <input type="checkbox"/>

Items D3 and D4 are for principals with grades 9 or above in their school.
Principals without these grades in their school should go to question D5.

D3. (NEW) Below is a list of programs and supports that schools can offer to students for transitioning to postsecondary education or employment. For each, please indicate whether your school offers this program or support during the current school year (2011-2012).

- Each applies to students with and without disabilities.
- Please only count formalized, wide-spread supports provided (versus those provided an ad-hoc basis to selected students, as needed).

	Program or support is offered?	
	Yes	No
Supports for Transitioning to Postsecondary Education Programs		
a. Helping students complete postsecondary school applications	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Assuring that high school course selections match requirements for the kind of postsecondary education program student plans to attend	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Helping students sign up for standardized college entrance tests	1 <input type="checkbox"/>	0 <input type="checkbox"/>
d. Reviewing college entrance test results and suggesting re-testing if necessary.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
e. Helping families with financial aid forms, comparing financial aid packages.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
f. Helping students arrange campus visits, taking them to college campuses or college fairs.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
g. Help ensuring students are aware of disability support services on college campuses.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
Supports for Transitioning to Employment		
h. Career counseling, including a formal assessment of skills and interests.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
i. Instruction in looking for jobs (e.g., application, interview, resume, portfolio, job readiness training, etc.)	1 <input type="checkbox"/>	0 <input type="checkbox"/>
j. Internship, apprenticeship, or other short-term work experience (paid or unpaid)	1 <input type="checkbox"/>	0 <input type="checkbox"/>
k. Training for specific occupations.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>

D4. New Does this school offer a processes for students who do not have IEPs to plan their transition from high school to adult life? If so, is it optional or required for students to participate?

MARK ONE ONLY

- 1 Yes – Optional Transition Planning Process
- 2 Yes – A Required Transition Planning Process
- 0 No such planning process exists at our school for students who do not have IEPs

D5. To what extent do teachers and administrators use the following behavior strategies in your school?

(NEW)

MARK ONE FOR EACH ROW

	Always	Sometimes	Never
a. Behavior expectations are defined and taught to students as part of the curriculum	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. A continuum of consequences is implemented for behavior infractions	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. Staff provide consistent reinforcement for positive behaviors	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. Information on individual student behavior is shared among teachers and other staff and used in decision making	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. A school-wide team of key stakeholders (e.g., general education and special education teachers, school psychologist, administration, etc.) to manage a positive behavior strategy	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. Training for school staff on positive behavioral interventions and supports during the school year	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

D6. What percentage of the total student body in your school are...

(HSL:09
SAO)

	Percentage of Students	OR	Number of Students
a. Enrolled in an alternative program to meet the needs of at-risk students who are not succeeding in a traditional setting (either at your school or off site)?	_ _ _ %		_ , _ _ _
b. Enrolled in a dropout-prevention program (either at your school or off site)?	_ _ _ %		_ , _ _ _
c. Enrolled in College Board Advanced Placement (AP) Courses (either at your school or off site)?	_ _ _ %		_ , _ _ _

In the next questions, please tell us about the types of programs that are offered at your school either as part of the curriculum or as after school instruction.

D7. Is there a systematic procedure for providing interventions to students who have learning or other problems, but no IEP or 504 plan (e.g., pre-referral interventions, response to intervention)?

(Revised from NLS2 C8a and b to reflect the three tiers in the RTI model)

- 1 Yes
- 0 No → **GO TO SECTION E**
- 0 N/A – All students at this school have an IEP or 504 Plan → **GO TO SECTION E**

MARK YES OR NO ON EACH ROW

D7a. Which of the following are involved in this procedure?

	Yes	No
a. Periodic screening to identify struggling learners	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Increasingly intensive instruction for students not making adequate progress	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Individualized, intensive interventions	1 <input type="checkbox"/>	0 <input type="checkbox"/>

E. Special Education Policies And Practices

Next, please tell us about the special education policies and practices at your school.

IF A1=2 (SCHOOL SERVING ONLY STUDENTS WITH DISABILITIES) – SKIP TO E3. ELSE CONTINUE TO E1.

E1. Which of the following placement options are available for students with IEPs at this school?

(Modified NLTSD1)

MARK YES OR NO ON EACH ROW

	Yes	No
a. General education with services or supports	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Classes co-taught by general and special education teachers	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Part-time resource room for special education students	1 <input type="checkbox"/>	0 <input type="checkbox"/>
d. Self-contained special education classrooms	1 <input type="checkbox"/>	0 <input type="checkbox"/>
e. Individual instruction such as home school or a residential, off-site, incarceration or hospital program	1 <input type="checkbox"/>	0 <input type="checkbox"/>
f. Other (<i>Please specify</i>)	1 <input type="checkbox"/>	0 <input type="checkbox"/>

E2. Which of the following are available to general education teachers in this school when students with IEPs are included in their classes?

(Modified NLTSD2)

MARK YES OR NO ON EACH ROW

	Yes	No
a. Consultation or technical assistance by special education or other staff with training and expertise in the child's disability	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Special equipment or materials.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. In-service training.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
d. Teacher aides, instructional assistants, or aides for individual students...	1 <input type="checkbox"/>	0 <input type="checkbox"/>
e. Smaller student load or class size	1 <input type="checkbox"/>	0 <input type="checkbox"/>
f. Co-teaching or team teaching with a special education teacher or related services provider	1 <input type="checkbox"/>	0 <input type="checkbox"/>

E3. Which of the following statements describe this school's practice regarding mandated standardized tests for students with IEPs? When standardized tests are mandated, students with IEPs are...

(Modified NLTSD03)

MARK ONE ONLY ON EACH ROW

	All IEP Students	Some IEP Students	No IEP Students
a. Required to follow the same procedures and meet the same standards for successful completion as regular education students.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Provided special accommodations in taking the test (e.g., reader, dictation, more time).....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Provided with a modified version of the test (e.g., shortened version, different test materials).....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	0 <input type="checkbox"/>
d. Given the option to complete an alternate assessment.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	0 <input type="checkbox"/>

E4. Below is a list of programs and supports schools can offer to students with IEPs. For each, please indicate whether your school offers this program or support during the current school year (2011-2012).

- Please include programs provided by alternate service providers.

	Program or support is offered?	
	Yes	No
a. Job coaching (e.g., staff who directly supervise and train students in the workplace).....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Referrals to Vocational Rehabilitation Services	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Help developing capability to dress, clean, care for self	1 <input type="checkbox"/>	0 <input type="checkbox"/>
d. Learning self-determination and self-advocacy skills	1 <input type="checkbox"/>	0 <input type="checkbox"/>
e. Peer buddy program	1 <input type="checkbox"/>	0 <input type="checkbox"/>
f. Alternative placements for students who are expelled and/or suspended	1 <input type="checkbox"/>	0 <input type="checkbox"/>
g. Helping students connect to outside transition services, supports, and activities (e.g., tutoring, mentoring, transportation, assistive technology, networking)	1 <input type="checkbox"/>	0 <input type="checkbox"/>
h. Helping students connect to adult residential providers and day services.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
i. Information bank for parents or guardians with materials and resources relating to independent living.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>
j. Instruction for parents or guardians on youth's rights and responsibilities under disability-related laws.....	1 <input type="checkbox"/>	0 <input type="checkbox"/>

E5. At what age or grade level does this school begin developing transition focused IEPs to assist students with IEPs as they move from high school to adult life?

(NLTSD10 REV)

ENTER AGE OR GRADE LEVEL OF STUDENT OR MARK AN "X" TO INDICATE THAT YOU DO NOT DEVELOP INDIVIDUAL TRANSITION FOCUSED IEPs.

|_|_| Age or |_|_|_| Grade Level

Do not develop Individual Transition Focused IEPs for leaving high school

E6. For students with IEPs, does this school offer instruction that specifically focuses on transition planning (e.g., a specialized curriculum designed to help students assess options and develop strategies for leaving secondary school and transitioning to adult life)?

(NLTS2 D11 REV)

MARK ONE ONLY

- 1 Yes
- 0 No
- n Not applicable

E7. Does this school or district receive any Medicaid funds for providing services (such as speech therapy or occupational therapy) to students with IEPs at this school?

(NLTS2 D12)

- 1 Yes
- 0 No
- n Don't Know

F. School Services for 12th Graders

Finally, we would like to learn more about the services offered to 12th grade students, your school/school district's graduation requirements, the average age of your 12th graders and how many have taken college entrance examinations.

F1. Does your school have 12th graders or those of equivalent age?

- 1 Yes
- 0 No → **GO TO "THANK YOU" ON PAGE 15**

F2. For how many semesters or quarters must students in this school take each of the following subjects to graduate with a regular diploma?

(NLTS2F2—modified to include high school exit exam)

	ENTER THE NUMBER OF SEMESTERS OR QUARTERS FOR EACH SUBJECT
a. English or language arts.....	_ _ Semesters OR _ _ Quarters
b. Mathematics	_ _ Semesters OR _ _ Quarters
c. Science	_ _ Semesters OR _ _ Quarters
d. Social studies.....	_ _ Semesters OR _ _ Quarters
e. Foreign language.....	_ _ Semesters OR _ _ Quarters

F3. During the previous school year (2010-2011), about how many 12th grade students or those of equivalent age...

(NLTS2F3)

ANSWER TOTAL 12th GRADERS AND
12th GRADERS WITH IEPs ON EACH ROW

	A. Total Number 12th Grade Students	B. Number of 12th Grade Students with IEPs
a. Were enrolled at this school?.....	_ , _ _ _	_ , _ _ _
b. Graduated with a regular diploma from this school?	_ , _ _ _	_ , _ _ _
c. Graduated with a special diploma or certificate of completion from this school?	_ , _ _ _	_ , _ _ _

F4. About how many students who had been enrolled in this school last year (2010-2011) in any grade, 9th through 12th, were considered to be dropouts by the end of the year?

(NLTS2-F4)

|_|,|_|_|_| DROPOUTS

F5. About what percentage of this school's students take college entrance examinations (i.e., SAT, ACT) before leaving high school?

(NLTS2-F5, REV)

- 1 Less than 50 percent
- 2 50 to 75 percent
- 3 76 to 90 percent
- 4 More than 90 percent

THANK YOU AGAIN FOR COMPLETING THIS QUESTIONNAIRE.

AS SOON AS WE RECEIVE THIS QUESTIONNAIRE, WE WILL SEND YOUR \$25 THANK YOU.

PLEASE ENTER THE NAME AND ADDRESS TO WHICH WE SHOULD SEND THE CHECK:

Name: _____
 Address: _____
 City: _____
 State: _____ ZIP Code: _____

May we also have your email and telephone number in case we have any questions about your responses?

Email: _____@_____
 Phone: (_____) - _____ - _____
Area Code Number

PLEASE RETURN THE QUESTIONNAIRE IN THE POSTAGE-PAID ENVELOPE. IF YOU DO NOT HAVE THE ENVELOPE, YOU MAY FAX THE QUESTIONNAIRE TO: xxxxxxxx OR MAIL IT TO: NLTS-2012 SCHOOL CHARACTERISTICS STUDY, xxxxxxxxxxxxxxxxxxxx