**Middle Grades Longitudinal Study of 2017-18 (MGLS:2017)**

**Operational Field Test (OFT) and Recruitment for Main Study Base-year**

OMB# 1850-0911 v.13

Appendices OFT1-T-V: Data Collection Instruments

Appendix MS1-T: Student Roster Template

National Center for Education Statistics

U.S. Department of Education

Institute of Education Sciences

Washington, DC

Revised April 2017

Table of Contents

Appendix OFT1-T. Student Rostering Form 1

Appendix OFT1-U1. Student Survey Specifications 2

Appendix OFT1-U2. Parent Interview Survey Specifications 34

Appendix OFT1-U3. Mathematics Teacher Survey Specifications 102

Appendix OFT1-U4. Special Education Teacher Survey Specifications 166

Appendix OFT1-U5. School Administrator Survey Specifications 225

Appendix OFT1-V. Facilities Checklist Specifications 287

Appendix MS1-T. Student Rostering Form 297

**\*\*\*NOTE:** confidentiality text cited during OFT (“*NCES is authorized to conduct MGLS:2017 by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C., § 9543). The data are being collected for NCES by RTI International, a nonprofit research organization based in North Carolina. The collected data may be used only for statistical purposes and may not be disclosed or used, in identifiable form, for any other purpose except as required by law (ESRA 2002, 20 U.S.C., § 9573). The collected information will be combined across respondents to produce statistical reports.”*)

will be replaced with (“*NCES is authorized to conduct MGLS:2017 by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543) and to collect students’ education records from education agencies or institutions for the purposes of evaluating federally supported education programs under the Family Educational Rights and Privacy Act (FERPA, 34 CFR §§ 99.31(a)(3)(iii) and 99.35). The data are being collected for NCES by RTI International, a U.S.-based nonprofit research organization. All of the information you provide may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (20 U.S.C. §9573 and 6 U.S.C. §151). The collected information will be combined across respondents to produce statistical reports.”*) when the OFT materials are shared with special contact districts during the research application process for Main Study and OFT follow-up recruitment. The pledge was updated to include reference to theCybersecurity Enhancement Act of 2015 (6 U.S.C. §151), which was enacted after OFT materials and initial state contacting materials for Main Study were fielded.

Appendix OFT1-T. Student Rostering Form

Appendix T includes the student rostering form referenced in Appendix S.

**Appendix T - Rostering Form**

**Operational Field Test**

**Instructions:** For each student currently enrolled in grade 6 in your school, please provide the below information.

Please be certain to include **all** children in each grade.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **General Student information** | | | | | | | | **Race/Ethnicity (Y/N all that apply)** | | | | | | **IEP** | **ELL** | **Disability Code** | **Parent Contact information** | | | | | | | | | **Student's Math Teacher** | | | | | **Student's Special Education Teacher, if applicable** | | |
| **StudentID** | **FirstName** | **Does student have IEP? (Y/N)** | **LastName** | **Suffix** | **Grade** | **Date of birth MM/DD/YY** | **Sex(M/F)** | **White** | **Black or African American** | **Asian** | **Native Hawaiian or Pacific Islander** | **American Indian or Alaska Native** | **Hispanic (Y/N)** | **IEP status (disability codes)** | **Student ELL Status?** | **If student has an IEP, please enter the disability code. Disability Code(s): (1) Specific Learning Disability (2) Autism (3) Emotional Disturbance (4) Other** | **Parent's First Name** | **Parent's Last Name** | **Parent's Address** | **Parent City** | **Parent State** | **Parent Zip** | **Parent's Email** | **Parent's Home Phone** | **Parent's Cell Phone** | **MathTeacherFirstName** | **MathTeacherLastName** | **MathTeacherEmail** | **Math Course Name** | **Math Course Period/Section** | **SpecialEDTeacherFirstName** | **SpecialEDTeacherLastName** | **SpecialEDTeacherEmail** |

*NCES is authorized to conduct MGLS:2017 by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543) and to collect students’ education records from education agencies or institutions for the purposes of evaluating federally supported education programs under the Family Educational Rights and Privacy Act (FERPA, 34 CFR §§ 99.31(a)(3)(iii) and 99.35).  The data are being collected for NCES by RTI International, a U.S.-based nonprofit research organization. All of the information you provide may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (20 U.S.C. §9573 and 6 U.S.C. §151). The collected information will be combined across respondents to produce statistical reports.*

*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 1850-0911. Approval expires 09/30/2018. The time required to complete this information collection is estimated to average approximately 5 minutes per row, including the time to review instructions, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate, suggestions for improving this survey, or any comments or concerns regarding the status of your individual submission of this survey, please write directly to: The Middle Grades Longitudinal Study of 2017-18 (MGLS:2017), National Center for Education Statistics, Potomac Center Plaza, 550 12th St, SW, Room 4002, Washington, DC 20202.*

## Appendix OFT1-U1. Student Survey Specifications

|  |
| --- |
| *NCES is authorized to conduct MGLS:2017 by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543) and to collect students’ education records from education agencies or institutions for the purposes of evaluating federally supported education programs under the Family Educational Rights and Privacy Act (FERPA, 34 CFR §§ 99.31(a)(3)(iii) and 99.35).  The data are being collected for NCES by RTI International, a U.S.-based nonprofit research organization. All of the information you provide may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (20 U.S.C. §9573 and 6 U.S.C. §151). The collected information will be combined across respondents to produce statistical reports.*  *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 1850-0911. Approval expires 09/30/2018. The time required to complete this information collection is estimated to average approximately 20 minutes per response, including the time to review instructions, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate, suggestions for improving this survey, or any comments or concerns regarding the status of your individual submission of this survey, please write directly to: The Middle Grades Longitudinal Study of 2017-18 (MGLS:2017), National Center for Education Statistics, Potomac Center Plaza, 550 12th St, SW, Room 4002, Washington, DC 20202.* |

|  |
| --- |
| WARNING – 30 MINUTES |

**[IF IDLE MORE THAN 30 MINUTES]** Your answers have been saved. **On the next page, please enter your User Name and Password to continue the survey.**

|  |
| --- |
| WARNING – 15 MINUTE TIMER FOR PART I |

[IF STUDENT TAKES MORE THAN 15 MINUTES TO COMPLETE THE SURVEY] “Thank you for your answers. Now it's time for the next part of the survey. Press submit to finish. ”

[Direct student to the next instrument]

|  |
| --- |
| WARNING – WELCOME BACK |

**[IF STUDENT RETURNING TO SURVEY FOR SECOND OR HIGHER ORDER TIME] Welcome back!** Thank you for your responses so far.The survey will begin where you left off. All your prior answers have already been saved**. Press “Next” to continue.**

|  |
| --- |
| ALL |

**Intro to Part 1.**

The first questions are about you.

Please click START to start the next assignment.

|  |
| --- |
| ALL |

**Q1.00A Is English your first language?**

🔾 Yes 1 Q1.00B

*4110810*

🔾 No 0 Q1.00B

NO RESPONSE M Q1.00B

|  |
| --- |
| ALL |

**Q1.00B How well do you read English?**

*4110820*

🔾 Very well 1 Q1.01

🔾 Well 2 Q1.01

🔾 Not well 3 Q1.01

🔾 Not at all 4 Q1.01

NO RESPONSE M Q1.01

|  |
| --- |
| ALL |

Q1.01 How old are you?

Q1.02

*4110104*

▼

(9 or younger, 10-14, 15 or older)

NO RESPONSE M Q1.02

|  |
| --- |
|  |

|  |
| --- |
| PROGRAMMER BOX: QUESTION/SUBQUESTION NUMBERING  THE QUESTION (E.G., Q1.01) AND SUB-QUESTION NUMBERING (E.G., a., b., etc.) SHOULD NOT BE DISPLAYED TO THE RESPONDENT FOR ALL ITEMS IN THE QUESTIONNAIRE. |

|  |
| --- |
| PROGRAMMER BOX: SOFT CHECK CONDITIONS  **CONDITION 1:** For item grid questions, the soft check, “Your responses are very important. Please answer as many questions as possible. Press “Edit” to return to this screen or press “Next” to continue. ”, should appear when all items are missing on a screen.  **CONDITION 2:** The soft check, “It is very important to the success of the study that you continue to provide complete responses. Please use the PREVIOUS button at the bottom of each page to back up and answer questions that were left blank..”, should appear when three consecutive questions that are select all/select one questions are left blank. |

|  |
| --- |
| ALL |

Q1.02 What is your birth date?

PROGRAMMER: INSERT DROP DOWN FIELDS

Month Day Year

BIRTH DATE Q1.03

▼

▼

▼

*4110103*

*4110102*

*4110101*

(January-December) (1-31) (2001-2009)

NO RESPONSE M Q1.03

|  |
| --- |
| SOFT CHECK: IF MONTH = 1, 3, 5, 7, 8, 10, OR 12, DAY CAN BE 1-31. IF MONTH = 2,  DAY CAN BE 1-29. IF MONTH = 4, 6, 9, 11, DAY CAN BE 1-30.  IF MONTH = 2 & DAY = 29 & YEAR ≠ 2004 & YEAR ≠ 2008, OR IF MONTH = 2 & DAY = 30 OR 31, Q1.02= OUT OF RANGE.  IF MONTH = 4, 6, 9, 11 & DAY =31, Q1.02= OUT OF RANGE.  IF Q1.02= OUT OF RANGE: **You entered <MONTH entered> <DAY entered> <YEAR entered> as your birthdate. Is that right?** |

|  |
| --- |
| PROGRAMMER BOX: SOFT CHECK: OUT OF RANGE  BELOW THE SOFT CHECK MESSAGE “**You entered <MONTH entered> <DAY entered> <YEAR entered> as your birthdate. Is that right? ”** PLEASE INCLUDE A “Yes” BUTTON AND A “No” BUTTON. SELECTING THE “Yes” BUTTON WILL ALLOW THE RESPONDENT TO CONTINUE TO Q1.03. SELECTING THE “No” BUTTON SHOULD KEEP THE RESPONDENT ON THE Q1.02 SCREEN AND MAKE THE SOFT CHECK MESSAGE DISAPPEAR SO THAT THE RESPONDENT CAN ADJUST THE PREVIOUS RESPONSE. |

|  |
| --- |
| ALL |

**Q1.03 What is your sex?**

*4110200*

*Select the one that best describes you.*

🔾 Male 1 Q1.04

🔾 Female 2 Q1.04

NO RESPONSE M Q1.04

|  |
| --- |
| ALL |

**Q1.04 The next few questions are about activities you do at school.**

**Have you participated in the following school-sponsored activities at any time during this school year?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

*4020107*

*4020101*

*4020102*

*4020104*

*4020105*

*4020106*

*4020103*

|  | Did not participate | Participated | Participated as an officer, leader, or captain |
| --- | --- | --- | --- |
| a. School sports | 1 🔾 | 2 🔾 | 3 🔾 |
| b. Math or science clubs | 1 🔾 | 2 🔾 | 3 🔾 |
| c. Performing arts | 1 🔾 | 2 🔾 | 3 🔾 |
| d. Student government | 1 🔾 | 2 🔾 | 3 🔾 |
| e. School yearbook, newspaper, or literary magazine | 1 🔾 | 2 🔾 | 3 🔾 |
| f. Other school clubs | 1 🔾 | 2 🔾 | 3 🔾 |
| g. Other school-sponsored activities | 1 🔾 | 2 🔾 | 3 🔾 |

|  |
| --- |
| If Q1.04f>1 or q1.04g>1 |

**Q1.04OTHER**

If Q1.04f>1: **In what other school clubs did you [participate/participate as an officer, leader, or captain]? Please type your answer.**

*4020109*

(STRING 255)

If Q1.04G>1: **In what other school-sponsored activities did you [participate/participate as an officer, leader, or captain]? Please type your answer.**

*4020108*

(STRING 255)

|  |
| --- |
| ALL |

**These questions ask for your opinion about different things, so there are no right or wrong answers.**

**Q1.05A How much do you agree or disagree with the following statements?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

*4050603*

*4050602*

*4050601*

|  | Strongly agree | Agree | Slightly agree | Slightly disagree | Disagree | Strongly disagree |
| --- | --- | --- | --- | --- | --- | --- |
| a. You have a certain amount of intelligence and you can’t really do much to change it. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| b. Your intelligence is something about you that you can’t change very much. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| c. No matter who you are, you can change your intelligence. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| ALL |

**Q1.05B How much do you agree or disagree with the following statements?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

*4050604*

*4050605*

*4050606*

|  | Strongly agree | Agree | Slightly agree | Slightly disagree | Disagree | Strongly disagree |
| --- | --- | --- | --- | --- | --- | --- |
| d. You can learn new things, but you can’t really change your basic intelligence. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| e. You can always change your intelligence. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| f. No matter how much intelligence you have, you can always change it quite a bit. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| ALL |

**Q1.06 How true are the following statements for you?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

*4050304*

*4050303*

*4050302*

*4050301*

|  | Not at all true | A little bit true | Somewhat true | True | Very true |
| --- | --- | --- | --- | --- | --- |
| a. I am certain I can learn everything taught in math. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. I am sure I can do even the most difficult homework problems in math. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. I am confident I can do all the work in math class if I don’t give up. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| d. I am confident I can do even the hardest work in my math class. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| ALL |

**Q1.07 How true are the following statements for you?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

*4050404*

*4050402*

*4050401*

*4050403*

|  | Not at all true | A little bit true | Somewhat true | True | Very true |
| --- | --- | --- | --- | --- | --- |
| a. Math will be useful for me later in life. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. Math helps me in my daily life outside of school. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. Being someone who is good at math is important to me. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| d. I enjoy doing math. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| all |

**Q1.08 What time do you usually wake up on school days?**

4080111

PROGRAMMER: INSERT THREE DOWN FIELDS

HOUR MINUTE AM/PM

▼

▼

▼

Q1.09

(1-12) (0-55) (AM/PM)

NO RESPONSE M Q1.09

|  |
| --- |
| SOFT CHECK: IF 11:00AM-3:00AM; **You answered <HOUR entered>:<MINUTE entered> <AM/PM entered> as the time you usually wake up on school days. If this is wrong, press “Edit” to return to this screen. If this is right, press “Next” to continue.**  **If partial answer:** Please enter the hours, minutes, and AM or PM that you usually wake up on school days. Press "Edit" to return to this screen or press "Next" to continue. |

|  |
| --- |
| PROGRAMMER BOX Q1.08  DISPLAY HOURS IN DROPDOWN MENU IN 1 HOUR INTERVALS RANGING 1-12 FOR HOUR  DISPLAY MINUTES IN DROPDOWN MENU IN 5 MINUTE INTERVALS RANGING 00-55 FOR MINUTE  DISPLAY “AM” AND “PM” RESPONSE OPTIONS IN DROPDOWN MENU FOR AM/PM  INSERT “:” BETWEEN HOUR AND MINUTE DROPDOWN BOXES |

|  |
| --- |
| PROGRAMMER BOX Q1.08  PROGRAMMERS: IN QUESTION Q1.08, PLEASE Display help text when THE WORD “USUALLY” is hovered over  Help text for Q1.08 QUESTION TEXT:  If you don’t have a usual time that you wake up on school days, please select the time when you most often wake up on school days. |

|  |
| --- |
| PROGRAMMER BOX: SOFT CHECK: IF 11:00AM-3:00AM  BELOW THE SOFT CHECK MESSAGE “**You answered <HOUR entered>:<MINUTE entered> <AM/PM entered> as the time you usually wake up on school days. If this is wrong, press “Edit” to return to this screen. If this is right, press “Next” to continue.”** PLEASE INCLUDE AN “Edit” BUTTON AND A “Next” BUTTON. SELECTING THE “Next” BUTTON WILL ALLOW THE RESPONDENT TO CONTINUE TO Q1.09. SELECTING THE “Edit” BUTTON SHOULD KEEP THE RESPONDENT ON THE Q1.08 SCREEN AND MAKE THE SOFT CHECK MESSAGE DISAPPEAR SO THAT THE RESPONDENT CAN ADJUST THE PREVIOUS RESPONSE. |

|  |
| --- |
| all |

**Q1.09 What time do you usually go to sleep on school nights?**

PROGRAMMER: INSERT THREE DOWN FIELDS

4080112

HOUR MINUTE AM/PM

▼

▼

▼

END1

(1-12) (0-55) (AM/PM)

NO RESPONSE M END1

|  |
| --- |
| SOFT CHECK: IF 2:00AM-7:00PM; **You answered <HOUR entered>:<MINUTE entered> <AM/PM entered> as the time you usually go to sleep on school nights. If this is wrong, press “Edit” to return to this screen. If this is right, press “Next” to continue.**  **If partial answer:** Please enter the hours, minutes, and AM or PM that you usually wake up on school days. Press "Edit" to return to this screen or press "Next" to continue. |

|  |
| --- |
| PROGRAMMER BOX Q1.09  display hours in dropdown menu in 1 hour intervals ranging 1-12 for hour  DISPLAY MINUTES IN DROPDOWN MENU IN 5 MINUTE INTERVALS ranging 00-55 for minute  display “am” and “pm” response options in dropdown menu for am/pm  insert “:” between hour and minute dropdown boxes |

|  |
| --- |
| PROGRAMMER BOX Q1.09  PROGRAMMERS: IN QUESTION Q1.09, PLEASE Display help text when THE WORD “USUALLY” is hovered over  Help text for Q1.09 QUESTION TEXT:  If you don’t have a usual time that you go to sleep on school nights, please select the time when you most often go to sleep on school nights. |

|  |
| --- |
| PROGRAMMER BOX: SOFT CHECK: IF 2:00AM-7:00PM  BELOW THE SOFT CHECK MESSAGE “**You answered <HOUR entered>:<MINUTE entered> <AM/PM entered> as the time you usually go to sleep on school nights. If this is wrong, press “Edit” to return to this screen. If this is right, press “Next” to continue.”** PLEASE INCLUDE AN “Edit” BUTTON AND A “Next” BUTTON. SELECTING THE “Next” BUTTON WILL ALLOW THE RESPONDENT TO CONTINUE TO END1. SELECTING THE “Edit” BUTTON SHOULD KEEP THE RESPONDENT ON THE Q1.09 SCREEN AND MAKE THE SOFT CHECK MESSAGE DISAPPEAR SO THAT THE RESPONDENT CAN ADJUST THE PREVIOUS RESPONSE. |

|  |
| --- |
| ALL |

**End of Part 1.** Thank you. Next are some math problems.

Please click START to start the next assignment.

|  |
| --- |
| PROGRAMMER BOX  The Next button will finalize answers, and go to the next module of the in-school session. |

|  |
| --- |
| ALL |

Intro to Part 2.

Next aresome more questions about you.

*Press "Next" to continue.*

|  |
| --- |
| all |

**Q2.01 These questions ask about activities you might do outside of school.**

**How often do you spend time…**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

*4020270*

*4020260*

*4020250*

*4020230*

*4020220*

*4020210*

|  | Never | Rarely | One to three times a month | Once or twice a week | Every day or almost every day |
| --- | --- | --- | --- | --- | --- |
| a. Working on hobbies, arts, crafts, or playing a musical instrument outside of school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. Taking music, art, or dance lessons outside of school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. Playing organized non-school sports? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| d. Participating in a non-school organized group activity, like 4-H, Scouts, or youth group? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| e. Doing other activities outside of school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| If Q2.01e>1 |

**Q2.01OTHER**

**What other activities do you do outside of school? Please type your answer.**

(STRING 255)

|  |
| --- |
| All |

**Q2.02 Some people your age get paid for work they do.**

**Have you ever been paid to do work outside of the home?**

4024110

**(Do not include chores, helping around the house, or an allowance you might receive.)**

🔾 Yes 1 Q2.03

🔾 No 0 Q2.03

|  |
| --- |
| PROGRAMMER BOX Q2.02  PROGRAMMERS: IN QUESTION Q2.02, PLEASE Display help text when THE PHRASE “WORK outside of the home” is hovered over  Help text for Q2.02 QUESTION TEXT:  Examples of getting paid to do work outside of the home is for things like babysitting, pet sitting, having a newspaper route, doing lawn work or farm work, or helping neighbors. |

|  |
| --- |
| ALL |

**Q2.03 Do you receive an allowance?**

4024120

🔾 Yes 1 Q2.04

🔾 No 0 Q2.04

|  |
| --- |
| ALL |

4020902Q2.04    How often do you use the internet outside of school to do homework or school assignments?

🔾 Never 1 Q2.05

🔾 Rarely 2 Q2.05

🔾 Sometimes 3 Q2.05

🔾 Often 4 Q2.05

🔾 Very often 5 Q2.05

🔾 Always 6 Q2.05

NO RESPONSE M Q2.05

|  |
| --- |
| ALL |

4020904**Q2.05     How often do you go somewhere other than home or school to access the internet when trying to do your homework or school assignments?**

🔾 Never 1 Q2.06

🔾 Rarely 2 Q2.06

🔾 Sometimes 3 Q2.06

🔾 Often 4 Q2.06

🔾 Very often 5 Q2.06

🔾 Always 6 Q2.06

NO RESPONSE M Q2.06

|  |
| --- |
| ALL |

4020903Q2.06    How often do you have a problem with your internet at home when trying to do your homework or school assignments?

   Do not have internet in the home.......................................................... .. 0 Q2.07

🔾 Never 1 Q2.07

🔾 Rarely 2 Q2.07

🔾 Sometimes 3 Q2.07

🔾 Often 4 Q2.07

🔾 Very often 5 Q2.07

🔾 Always 6 Q2.07

NO RESPONSE M Q2.07

|  |
| --- |
| ALL |

Q2.07A Do you ever...

4021103

4021104

4021105

4021102

4021101

|  | Yes | No |
| --- | --- | --- |
| a. Watch short video clips for fun on YouTube, Vine, or other sites? | 1 🔾 | 0 🔾 |
| b. Look up information online for your own interests (for example, using Google, Reddit, Tumblr, or other sites)? | 1 🔾 | 0 🔾 |
| c. Play video games, computer games, or mobile games? | 1 🔾 | 0 🔾 |
| d. Video chat through programs like Facetime, OoVoo, or Skype? | 1 🔾 | 0 🔾 |
| e. Message with friends using texting, KIK, iMessage, Snapchat, WhatsApp, or some other app? | 1 🔾 | 0 🔾 |

|  |
| --- |
| ALL |

Q2.07B Do you ever...

4021110

4021109

4021108

4021107

4021106

4021111

4021110

|  | Yes | No |
| --- | --- | --- |
| f. Post photos or updates on social media sites (such as Twitter, Instagram, Facebook, Snapchat, or Ask.fm)? | 1 🔾 | 0 🔾 |
| g. Send emails to friends, family members, teachers, or others? | 1 🔾 | 0 🔾 |
| h. Make your own digital art or music (such as painting, graphics, video editing, making digital music)? | 1 🔾 | 0 🔾 |
| i. Write computer programs (code) or develop apps? | 1 🔾 | 0 🔾 |
| j. Do some other activity using a computer, tablet, phone, or similar device? | 1 🔾 | 0 🔾 |

|  |
| --- |
| If Q2.07J>1 |

**Q2.07OTHER**

**What other activity do you do using a computer, tablet, phone, or similar device? Please type your answer.**

(STRING 255)

|  |
| --- |
| ALL |

Q2.08 On a typical weekday, how much time do you spend using all electronic devices (including phone, tablet, computer, video game systems, television, iPod, etc.) for school-related activities?

4021201

Hours

▼

Minutes

▼

(Hours: 0-24; Minutes: 00, 15, 30, 45)

|  |
| --- |
| ALL |

Q2.09 On a typical weekday, how much time do you spend using all electronic devices (including phone, tablet, computer, video game systems, television, iPod, etc.) for any activity?

4021202

Hours

▼

Minutes

▼

(Hours: 0-24; Minutes: 00, 15, 30, 45)

|  |
| --- |
| ALL |

Q2.10 On a typical weekend day, how much time per day do you spend using all electronic devices (including phone, tablet, computer, video game systems, television, iPod, etc.) for school-related activities?

4021203

Hours

▼

Minutes

▼

(Hours: 0-24; Minutes: 00, 15, 30, 45)

|  |
| --- |
| ALL |

Q2.11 On a typical weekend day, how much time per day do you spend using all electronic devices (including phone, tablet, computer, video game systems, television, iPod, etc.) for any activity?

4021204

Hours

▼

Minutes

▼

(Hours: 0-24; Minutes: 00, 15, 30, 45)

|  |
| --- |
| ALL |

**Q2.12 Next are some questions about things that may happen at school.**

**How often does the following happen at school?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4010303

4010205

4010204

4010203

4010202

4010201

|  | Never | Rarely | Sometimes | Often | Very often |
| --- | --- | --- | --- | --- | --- |
| a. I feel like a real part of my school. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. People notice when I’m good at something. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. Other students take my opinions seriously. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| d. People are friendly to me. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| e. I’m included in lots of activities. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| f. I feel safe at this school. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| all |

**Q2.13 The next questions are about the students at your school.**

**How often did the following happen at your school in the last month?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4010602

4010603

4010601

|  | Never | Rarely | Sometimes | Often | Very often |
| --- | --- | --- | --- | --- | --- |
| a. Physical conflicts (fights) among students. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. Students bullied other students. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. Students yelled and screamed at the teachers. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| all |

**Q2.14 Now we want you to answer these questions thinking only about teachers that you have class with.**

**How often does the following happen with your teachers?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4010504

4010505

4010503

4010502

4010501

|  | Never | Rarely | Sometimes | Often | Very often | Always |
| --- | --- | --- | --- | --- | --- | --- |
| a. I get along well with my teachers. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| b. My teachers listen to what I have to say. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| c. If I need extra help, I receive it from my teachers. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| d. My teachers treat me fairly. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| e. My teachers care about my feelings. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| All |

**Q2.15 The next questions are about your classmates this school year. Please think only about the students who are in your classes.**

**How often are the following statements true?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4030105

4030104

4030103

4030102

4030101

|  | Never | Rarely | Sometimes | Often | Very often | Always |
| --- | --- | --- | --- | --- | --- | --- |
| a. My classmates think it is important to be my friend. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| b. My classmates like me the way I am. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| c. My classmates care about my feelings. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| d. My classmates like me as much as they like other classmates. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| e. My classmates really care about me. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| all |

**Q2.16 Next are a few questions about people your age who you hang out with, including people you know from school or from somewhere else.**

**How important is it to the people your age who you hang out with that they...**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4030203

4030202

4030201

|  | Not at all important | A little bit important | Somewhat important | Important | Very important |
| --- | --- | --- | --- | --- | --- |
| a. Attend classes regularly? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. Get good grades? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. Work hard in school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| all |

**Q2.17 Of the people your age who you hang out with, how many...**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4030307

4030306

4030305

4030303

4030304

4030302

4030301

|  | None | Some | About half | Most | All or almost all |
| --- | --- | --- | --- | --- | --- |
| a. Are members of a gang? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. Have ever used a weapon in a fight? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. Have ever stolen things? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| d. Have ever hit someone, trying to seriously hurt them? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| e. Have ever damaged property that didn’t belong to them on purpose? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| f. Have been suspended from school at least once this year? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| g. Have skipped school at least once this year? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| all |

**Q2.18 Of the people your age who you hang out with, how many have ever pressured you to…**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4030406

4030405

4030404

4030403

4030402

4030401

|  | None | Some | About half | Most | All or almost all |
| --- | --- | --- | --- | --- | --- |
| a. Try cigarettes? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. Try e-cigarettes or vaping? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. Try marijuana or other drugs? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| d. Drink beer, wine, or liquor? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| e. Skip school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| f. Commit a crime or do something violent? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| ALL |

Q2.19 In the last month, how often…

4080105

4080104

4080103

4080102

4080101

|  | *Select one answer for each row* | | | | |
| --- | --- | --- | --- | --- | --- |
|  | Never | Rarely | Sometimes | Often | Very often |
| a. Did you wake up feeling tired? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. Did you have trouble falling asleep? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. Did you have trouble staying asleep? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| d. Did you move a lot when you slept / had restless sleep? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| e. Did you have trouble staying awake while sitting in class or watching TV? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| all |

**Q2.20 In the last month, how often…**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4040103

4040102

4040101

|  | Never | Rarely | Sometimes | Often | Very often |
| --- | --- | --- | --- | --- | --- |
| a. Did you have a headache? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. Did you have aches, pains, or soreness in your muscles or joints? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. Did you have a stomachache? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| ALL |

**Q2.21 Are you Hispanic or Latino/Latina?**

*4110300*

🔾 Yes 1 Q2.22

🔾 No 2 Q2.23

NO RESPONSE M Q2.23

|  |
| --- |
| PROGRAMMER BOX Q2.21  display help text when hovering over THE WORDS “**Hispanic or Latino/Latina**” for Q2.21  help text:  **Hispanic or Latino/Latina**: a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish cultures or origin (or descent), regardless of race. |

|  |
| --- |
| Q2.21=1 |

**Q2.22 Which of the following best describes you?**

*Select all that apply.*

4110410

🞏 Mexican, Mexican-American, or Chicano/Chicana 1 Q2.23

4110420

🞏 Cuban 2 Q2.23

🞏 Dominican 3 Q2.23

4110440

4110430

🞏 Puerto Rican 4 Q2.23

🞏 Central American such as Guatemalan, Salvadoran, Nicaraguan, Costa Rican, Panamanian, or Honduran 5 Q2.23

4110450

🞏 South American such as Colombian, Argentine, or Peruvian 6 Q2.23

4110460

🞏 Other Hispanic or Latino/Latina 99 Q2.23

4110471

4110470

Please type your answer. (STRING (255)

NO RESPONSE M Q2.23

|  |
| --- |
| SOFT CHECK: IF Q2.22=99 AND Q2.22\_SPEC UNANSWERED **Please type in which other Hispanic or Latino/Latina category best describes you.** |

|  |
| --- |
| ALL |

**Q2.23 Which of the following best describes your race?**

*Select all that apply.*

🞏 White 1 Q2.25

4110520

4110510

🞏 Black or African American 2 Q2.25

4110530

🞏 Asian 3 Q2.24

🞏 Native Hawaiian or other Pacific Islander 4 Q2.25

4110540

🞏 American Indian or Alaska Native 5 Q2.25

4110550

NO RESPONSE M Q2.25

|  |
| --- |
| PROGRAMMER BOX Q2.23  Display help text for each response option of Q2.23 when hovered over with each help text displaying only its corresponding definition:  **White**: a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.   **Black or African American**: a person having origins in any of the black racial groups of Africa.   **Asian**: a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.   **Native Hawaiian or other Pacific Islander**: a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.   **American Indian or Alaska Native**: a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment. |

|  |
| --- |
| Q2.23=3 |

**Q2.24 Which of the following best describes you?**

*Select all that apply.*

🞏 Asian Indian 1 Q2.25

4110610

🞏 Chinese 2 Q2.25

4110620

🞏 Filipino 3 Q2.25

4110630

🞏 Japanese 4 Q2.25

4110640

🞏 Korean 5 Q2.25

4110660

4110650

🞏 Vietnamese 6 Q2.25

🞏 Other Asian: 99 Q2.25

4110670

Please type your answer. (STRING 255)

4110671

NO RESPONSE M Q2.25

|  |
| --- |
| SOFT CHECK: IF Q2.24=99 AND Q2.24\_SPEC UNANSWERED: **Please type in which other Asian race category best describes you.** |

|  |
| --- |
| all |

**Q2.25 How much do you agree or disagree with the following statements?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4051104

4051103

4051102

4051101

|  | Strongly agree | Agree | Slightly agree | Slightly disagree | Disagree | Strongly disagree |
| --- | --- | --- | --- | --- | --- | --- |
| a. I feel close to others who share my race/ethnicity. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| b. Other people judge me based on my race/ethnicity. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| c. I get in fights with other people because of my race/ethnicity. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| d. People do not want to hang out with me because of my race/ethnicity. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| all |

**Q2.26 Now imagine a ladder that represents how your school is set up.**

**- At the top of the ladder are the students in your school who have the most respect, receive the highest grades, and are the most popular.**

4051020

**- At the bottom are the students who have the least respect, receive the worst grades, and are the least popular.**

**Where would you place yourself on this ladder?**

**Select the place on the ladder that best represents where you would be.**

[NOTE [NOTE TO PROGRAMMER: THE LADDER SHOULD APPEAR HERE, AFTER THE QUESTION TEXT WITH THE RADIO BUTTONS ADJACENT TO THE LADDER ON THE RIGHT SIDE]

**School**

*Select one only.*

*Select one only.*

🔾 1 (top of the ladder) 1 Q2.27

🔾 2 2 Q2.27

🔾 3 3 Q2.27

🔾 4 4 Q2.27

🔾 5 5 Q2.27

🔾 6 6 Q2.27

🔾 7 7 Q2.27

🔾 8 8 Q2.27

🔾 9 9 Q2.27

🔾 10 (bottom of the ladder) 10 Q2.27

NO RESPONSE M Q2.27

|  |
| --- |
| PROGRAMMER BOX Q2.26  \*NOTE: WE WANT TO VISUALLY REPRESENT A LADDER WITH 10 RUNGS, EACH OF WHICH WILL HAVE A CORRESPONDING RADIO BUTTON. THE STUDENT WILL SELECT THE RADIO BUTTON THAT MATCHES WHERE HE/SHE THINKS he/she WOULD BE ON THE LADDER. |

|  |
| --- |
| all |

**Q2.27 How often do your parents/guardians...**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4060302

4060303

4060304

4060305

|  | Never | Rarely | Sometimes | Often | Very often | Always |
| --- | --- | --- | --- | --- | --- | --- |
| a. Respect your privacy? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| b. Give you a lot of freedom? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| c. Make most of the decisions about what you can do? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| d. Believe you have a right to your own point of view? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| all |

**Q2.28 How often do your parents/guardians...**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4060405

4060404

4060403

4060402

4060401

|  | Never | Rarely | Sometimes | Often | Very often | Always |
| --- | --- | --- | --- | --- | --- | --- |
| a. Know what you do during your free time? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| b. Know how much homework you have? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| c. Know what you spend your money on? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| d. Know when you have an exam or paper due at school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| e. Know what your school grades are? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| PROGRAMMER BOX Q2.28c  display help text when hovering over THE WORDS “your money” for Q2.28c.  Help text for Q2.28c QUESTION TEXT:  Some people your age do not have their own money to spend. If you do not have your own money, please select “Never” for this question. |

|  |
| --- |
| all |

**Q2.29 How often does the following happen with your parents/guardians?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4060503

4060502

|  | Never | Rarely | Sometimes | Often | Very often | Always |
| --- | --- | --- | --- | --- | --- | --- |
| a. I tell my parents/guardians about my friends without them asking (for example, which friends I hang out with and how my friends feel about various things). | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| b. I tell my parents/guardians about school without them asking (for example, how each subject is going or my relationships with teachers). | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| c. I keep a lot of secrets from my parents/guardians about what I do during my free time. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

4060503

4060502

4060501

|  |
| --- |
| all |

**Q2.30 The next questions are about where you live.**

**How true are the following statements for you?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4060605

4060604

4060603

4060602

4060601

|  | Not at all true | A little bit true | Somewhat true | True | Very true |
| --- | --- | --- | --- | --- | --- |
| a. There are a lot of adults in my neighborhood who I want to be like when I grow up. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. I want to get away from my neighborhood as soon as I can. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. I can count on people in my neighborhood to help me if I need it. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| d. I feel very safe walking and playing in my neighborhood. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| e. I feel very safe participating in after school activities in my community. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| all |

**Q2.31A How often are the following statements true for you?**

**I see myself as someone who...**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4050105

4050104

4050103

4050102

4050101

|  | Never | Rarely | Sometimes | Often | Very often | Always |
| --- | --- | --- | --- | --- | --- | --- |
| a. Does things carefully and completely. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| b. Can be somewhat careless. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| c. Is a reliable worker. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| d. Tends to be disorganized. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| e. Tends to be lazy. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
|  |  |  |  |  |  |  |

|  |
| --- |
| all |

**Q2.31B How often are the following statements true for you?**

**I see myself as someone who...**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4050110

4050109

4050108

4050107

4050106

|  | Never | Rarely | Sometimes | Often | Very often | Always |
| --- | --- | --- | --- | --- | --- | --- |
| f. Keeps working until things are done. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| g. Does things efficiently (quickly and correctly). | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| h. Makes plans and sticks to them. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| i. Is easily distracted. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| j. Has trouble paying attention. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| all |

**Q2.32 How true are the following statements for you?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4050904

4050903

4050902

4050901

|  | Not at all true | A little bit true | Somewhat true | True | Very true |
| --- | --- | --- | --- | --- | --- |
| a. I like to explore strange places. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. I like to do frightening things. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. I like new and exciting experiences. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| d. I prefer friends who are exciting and unpredictable. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| all |

**Q2.33 How true are the following statements for you?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4050704

4050703

4050702

4050701

|  | Not at all true | A little bit true | Somewhat true | True | Very true |
| --- | --- | --- | --- | --- | --- |
| a. When I become confused about something I’m learning at school, I try to figure it out. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. I work my hardest to learn at school, even if I do not like the subject. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. When something I’m studying at school is difficult, I spend extra time and effort until I understand it. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| d. Even if it is boring, I try to learn as much as I can about what I am studying. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| all |

**Q2.34A How often are the following statements true for you?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4050203

4050202

4050201

|  | None of the time | A little of the time | Some of the time | A lot of the time | Most of the time | All of the time |
| --- | --- | --- | --- | --- | --- | --- |
| a. I think I am doing pretty well. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| b. I can think of many ways to get the things in life that are most important to me. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| c. I am doing just as well as other people my age. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| all |

**Q2.34B How often are the following statements true for you?**

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

4050205

4050204

4050206

|  | None of the time | A little of the time | Some of the time | A lot of the time | Most of the time | All of the time |
| --- | --- | --- | --- | --- | --- | --- |
| d. When I have a problem, I can come up with lots of ways to solve it. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| e. I think the things I have done in the past will help me in the future. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| f. Even when others want me to quit, I know that I can find ways to solve the problem. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| all |

**Q2.35 As things stand now, how far in school do you think you will go?**

4070200

*Select one only.*

🔾 Won’t finish high school 1 END1

🔾 Will graduate from high school, but won’t go any further 2 END1

🔾 Will go to a technical or trade school after high school 3 END1

🔾 Will attend college 4 END1

🔾 Will graduate from college 5 END1

🔾 Will attend a higher level of school after graduating from college 6 END1

🔾 Don’t know 7 END1

NO RESPONSE M END1

|  |
| --- |
| PROGRAMMER BOX Q2.35  PLEASE DISPLAY HELP TEXT WHEN THE PHRASE “technical or trade school” is hovered over.  help text for response option 3:  Examples of **technical or trade school** include automotive work, culinary/food industry, electrical work, carpentry, graphic design, fashion, and information technology.  PLEASE DISPLAY HELP TEXT WHEN THE PHRASE “higher level of school” is hovered over.  help text for response option 6:  Examples of a **higher level of school** after graduating from college include masters, law, medical, or PhD degrees.  PLEASE DISPLAY HELP TEXT WHEN THE PHRASE “don’t know” is hovered over.  help text for response option 7:  If you are deciding between two response options, please select the one that you think you have a better chance of doing rather than selecting “Don’t know.” |

**End of Part 2.**

Next you will be completing some reading activities.

**Press “Next” to continue to the next section.**

|  |
| --- |
| PROGRAMMER BOX  The Next button will finalize answers, and then route to the next module of the in-school session. |

## Appendix OFT1-U2. Parent Interview Survey Specifications

|  |
| --- |
| *NCES is authorized to conduct MGLS:2017 by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543) and to collect students’ education records from education agencies or institutions for the purposes of evaluating federally supported education programs under the Family Educational Rights and Privacy Act (FERPA, 34 CFR §§ 99.31(a)(3)(iii) and 99.35).  The data are being collected for NCES by RTI International, a U.S.-based nonprofit research organization. All of the information you provide may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (20 U.S.C. §9573 and 6 U.S.C. §151). The collected information will be combined across respondents to produce statistical reports.*  *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 1850-0911. Approval expires 09/30/2018. The time required to complete this information collection is estimated to average approximately 40 minutes per response, including the time to review instructions, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate, suggestions for improving this survey, or any comments or concerns regarding the status of your individual submission of this survey, please write directly to: The Middle Grades Longitudinal Study of 2017-18 (MGLS:2017), National Center for Education Statistics, Potomac Center Plaza, 550 12th St, SW, Room 4002, Washington, DC 20202.* |

|  |
| --- |
| INTRO BOX FOR INTRO PAGE |

|  |
| --- |
| ALL |

**A. WEB INTRO**

**A01a.** **SURVEY INFORMATION**

Thank you for being a part of the Middle Grades Longitudinal Study of 2017–18 (MGLS:2017) field test. This will help us learn about children’s development during an important time in their lives.

We also want to learn about family and school experiences that shape children’s development. This is where **we need your help**. This survey should be filled out by the parent, guardian, or person living with {CFNAME} who knows the most about {his/her} development, schooling, and home life. Your answers are very important to the study’s success and we hope you will complete the survey. This survey is voluntary and you can skip questions you do not want to answer. [You will receive a ($10-50) check for completing this survey.]

Please click the “Next” button below.

|  |
| --- |
| ALL |

**A01c.** Before you get started, here are a few helpful hints.

• To answer a question, click the box to choose your response.

• Press the "Next" button to move forward.

• Press the "Back" button to go back.

• Some questions offer text to help you understand the question or the response options. Click on the HELP icon at the top of the screen or the help iconcid:image001.png@01D164D7.97B47F70 in the survey to see the help text.

• If you need to take a break and leave the interview at any time, click the "Log out" button in the top left-hand corner of your screen. When you log back in, the survey will start from the screen you were on when you logged out.

• To protect your data, your responses will be automatically saved and you will be logged off if you are idle for more than 30 minutes.

Please click “Next” to begin.

|  |
| --- |
| PROGRAMMER BOX  **Notes to programmers:**   1. **Question numbers appear in the specs for programming purposes (i.e., routing, skip logic, etc.) but will be displayed in small font in upper right corner of screen** |

|  |
| --- |
| PROGRAMMER BOX: SOFT CHECK CONDITIONS  **CONDITION 1:** For item grid questions, the soft check, “Your responses are very important. Please answer as many questions as possible.” should appear when all items are missing on a screen.  **CONDITION 2:** The soft check, “"Your responses are important. Please answer as many questions as possible.” should appear when three consecutive questions are left blank.  **CONDITION 3:** When there is a combination of select all/select one questions and questions with an item grid are left blanked in a row, soft check, “Your responses are very important. Please answer as many questions as possible.” should appear when the third blank question in that series is a question with an item grid. |

|  |
| --- |
| ALL |
| **RFNAME=Respondent’s first name RLNAME= Respondent’s last name** |

**A02.** Are you **{RFNAME RLNAME TAKEN FROM CONSENT FORM}**?

5010200

🔾 Yes 1 A03a

🔾 No 2 A03a

|  |
| --- |
| PROGRAMMER BOX A02  Hard check if a02=missing:  Please respond to this question so you may continue. |

|  |
| --- |
| ALL |
| **CFNAME=Child’s first name** |

**A03a**. Does {CFNAME} {CLNAME} live with you?

🔾 Yes 1 A03

🔾 No 2 A06

5010301

|  |
| --- |
| PROGRAMMER BOX A03a  Hard check if a03A=missing:  Please respond to this question so you may continue.  the QUESTION TEXT “live with you” should have a HYPERLINK and infromation icon TO THE BELOW HELP TEXT:  Please select “Yes” if {CFNAME} normally lives with you. For example, if {CFNAME} lives with you all the time, every-other week, or some other regularly scheduled times, or if {CFNAME} has been legally placed under your care.  Please select “No” if {CFNAME} does not normally live with you. For example, if {CFNAME} is only visiting or if {CFNAME} used to live with you, but is now permanently living with someone else. |

|  |
| --- |
| **ASK IF A03a=1** |
| **CFNAME=Child’s first name** |

**A03.** Are you the parent, guardian, or person in this household who knows the most about **{CFNAME}**'s development, schooling, and home life?

🔾 Yes 1

🔾 No 2 A05a

5010300

NO RESPONSE M A05a

|  |
| --- |
| **ASK IF A02=1 and A03=1** |
| **RFNAME= Respondent’s first name; RMNAME = Respondent’s middle name; RLNAME = Respondent’s last name; RSUFFIX = Respondent’s suffix to name** |

**A04a.** Please check the spelling of **your** full name.

First name:[RFNAME]

Middle name:[RMNAME]

Last name: [RLNAME]}

Suffix: [RSUFFIX]

If your name is not spelled right, please fix it below. If everything is spelled right, press Next to continue.

5010411

1 First name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] (STRING 30)

5010412

2 Middle name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ] (STRING 30)

5010413

3 Last name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ] (STRING 30)

5010414

4 Suffix: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_] (STRING 30)

|  |
| --- |
| **ASK IF A02=2 OR MISSING and A03=1** |
| **RFNAME= Respondent’s first name; RMNAME = Respondent’s middle name; RLNAME = Respondent’s last name** |

**A04b.** Please enter **your** full name.

1 First name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 20)

5010421

2 Middle name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ] (STRING 20)

5010422

3 Last name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ] (STRING 20)

5010423

4 Suffix: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ] (STRING 20)

5010424

|  |
| --- |
| **PROGRAMMER BOX A04B**  **If A02=2 AND A03=1, GOTO A04b. Do not display "Current info" information.** |

|  |
| --- |
| **ASK IF A03=2** |
| **CFNAME= Child’s first name** |

**A05a.** Is the parent, guardian, or other person living in this household who knows the most about **{CFNAME}**'s development, schooling, and home life available between now and the end of June 2017 to complete this questionnaire?

5010501

🔾 Yes 1 A05b

🔾 No 2 A06

NO RESPONSE M A06

|  |
| --- |
| **ASK IF A05a=1** |

**A05b.** Great! Please provide the name of the person living in this household who knows the most about {CFNAME}’s development, schooling, and home life.

5010503

a First Name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 20)

5010504

b Middle Name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 20)

5010505

c Last Name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 20)

5010506

d. Suffix: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 20)

|  |
| --- |
| **ASK IF A05a=1** |

**FPPREINTRO**. If [NAME FROM A05B] is available now, please select “Next” to be taken back to the introductory page of this questionnaire and ask [NAME] to begin from there. If [NAME] cannot complete the questionnaire right now, please select “LOGOUT” in the top left area of the screen so [NAME] can log back in at a later time. Thank you very much!

🔾 Next 1 A01a

5010502

🔾 Log out 2

|  |
| --- |
| **ASK IF A05a=2** |
| **CFNAME= Child’s first name** |

**A06.** The MGLS:2017 team would like to contact a parent, guardian, or person who lives with {CFNAME} and knows about **{his/her}** development, schooling, and home life. Please enter the contact information for this person now and a team member will be in touch soon.

a First Name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 20)

5010601

5010605

b Middle Name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 20)

5010602

c Last Name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 20)

5010606

d Suffix: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 20)

5010603

e Phone Number: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 10)

5010604

f Email: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 50)

🔾 Next 1 Exit Screen

|  |
| --- |
| **PROGRAMMER BOX A06**  **If A05a=2 and new respondent information is entered at A06, GOTO “Exit Screen".**  **PROGRAMMER NOTE: When re-entering this case, GOTO to A01a for the new respondent.**  **HARD CHECK if A06a=MISSING: Please provide the name of {CFNAME}’s parent, guardian or a person who lives with {CFNAME} and knows about {his/her} development, schooling and home life so you may continue.** |

|  |
| --- |
| **ASK IF A06=1** |
| **Exit Screen** |

Thank you for your time. We will contact {FIRST NAME} {LAST NAME} soon. We appreciate you helping make MGLS:2017 a success!

|  |
| --- |
| **PROGRAMMER BOX EXIT SCREEN**  **FIRST NAME and LAST NAME would be taken from the information provided on the previous screen (A06).** |

|  |
| --- |
| **ALL ELIGIBLE RESPONDENTS** |
| **CFNAME= Child’s first name** |

**A07.** Please check the spelling of **{CFNAME}’s** full name.

First name:**[CFNAME]**

Middle name: **[CMNAME]**

Last name:**[CLNAME]**

Suffix: [CSUFFIX]

If [CFNAME]’s name is not spelled right, please fix it below. If everything is spelled right, press Next to continue.

5010701

a First name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 20)

5010702

b Middle name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ] (STRING 20)

5010703

c Last name: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ] (STRING 20)

5010704

d Suffix: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ] (STRING 20)

|  |
| --- |
| **ASK IF A03=1** |
| **CFNAME= Child’s first name** |

**A08.** What is **{CFNAME}**'s sex?

5010800

🔾 Male 1

🔾 Female 0

|  |
| --- |
| **ALL** |
| **CFNAME= Child’s first name** |

**A09.** What is **{CFNAME}**’s date of birth?

PROGRAMMER: INSERT DROP DOWN FIELDS

5010902

5010901

5010903

0 BIRTH DATE

▼

▼

▼

Month Day Year

(January-December) (1-31) (2000-2009)

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX A09  NOTE TO PROGRAMMER:   * DO NOT DISPLAY THE “NO RESPONSE” OPTION ON THE SCREEN. * PROGRAM DAYS OF MONTH TO CORRESPOND TO THE CORRECT NUMBER OF DAY (FOR EXAMPLE, IF “FEBRUARY” IS SELECTED, THE NUMBER OF DAYS AVAILABLE SHOULD ONLY BE 1-29) * IF A09\_DAY = MISSING AND {CFNAME}’S A09\_MONTH = MONTH(INTERVIEW\_DATE), THEN ROUND {CFNAME’S} B02\_A (AGE) UP |

|  |
| --- |
| **ASK IF A09 IS NOT MISSING** |

**A09CONFIRM.** Just to confirm, is {CFNAME} {AGE IN YEARS} years old?

5010905

🔾 Yes 1 A10

🔾 No 0 A09A

|  |
| --- |
| PROGRAMMER BOX A09CONFIRM  {AGE IN YEARS} TO BE CALCULATED USING THE DATE OF BIRTH PROVIDED IN A09. |

|  |
| --- |
| **If A09\_** IF A09\_MONTH = BLANK OR IF A09\_YEAR = BLANK |
| **CFNAME= Child’s first name** |

**A09a.** How old is **{CFNAME}**?

PROGRAMMER: INSERT DROP DOWN FIELDS

▼

5010904

0 YEARS OLD

(7-15)

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX A09A  NOTE TO PROGRAMMER: SOFT CHECK: IF NO RESPONSE, “Please provide {CFNAME}’s age in years. If you don’t know the exact age, please use your best guess.” |

|  |
| --- |
| **ALL** |
| **CFNAME= Child’s first name** |

**A10.** Please check that the current home address for {CFNAME} is right.

**WEB: INSERT**

Street addres1: **[CADDRESS1]**

Street address 2: **[CADDRESS2]**

City: **[CCITY]**

State: **[CSTATE]**

Zip: **[CZIP]”**

If the current home address is not right, please fix it below. If the current home address is right, press Next.

5011011

a Street address1: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 255)

5011012

b Street address2: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 255)

5011013

c City: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 255)

5011014

d State: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]

5011015

e Zip code: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 5)

|  |
| --- |
| PROGRAMMER BOX A10  NOTE TO PROGRAMMER:   * INSERT DROP DOWN MENU WITH ALL 50 STATES and DC.. |

|  |
| --- |
| **ALL** |
| **IF A03=1 and A10 NE Missing; A11e-i should not display** |

**A11. Please provide up-to-date contact information for yourself**

5010011

**a. Primary phone:**

5010012

**b. Alternate phone (if available):**

5010013

**c. Primary email:**

5010014

**d. Alternate email (if available):**

5010015

**e. Street address 1:**

5010016

**f. Street address 2:**

5010017

**g. Zip code:**

5010018

**h. City:**

5010019

**i. State:**

**B. Family Roster**

Now, we have a few questions about you and the other members of your household. We are only interested in knowing about people who normally live in your household. Please do not include anyone staying with you temporarily, such as someone visiting the household who usually lives somewhere else.

|  |
| --- |
| **ALL** |
| **CFNAME= Child’s first name** |

**B01.** In addition to you and {CFNAME}, does anyone else live in the household?

🔾 Yes 1 B01b

5021000

🔾 No 2 B02a

|  |
| --- |
| **ALL** |
| **CFNAME= Child’s first name** |

**B01b.**

|  |  |  |
| --- | --- | --- |
| First name | Last name | Suffix |
| {RFNAME} 5021001 | {RLNAME} 5021002 | {RSUFFIX} 5021003 |
| {CFNAME} 5021101 | {CLNAME} 5021102 | {CSUFFIX} 5021103 |
| {HH3FNAME} 5021201 | {HH3LNAME} 5021202 | {HH3SUFFIX} 5021203 |

**Who else lives in the household?**

We are only interested in knowing about people who normally live in your household. Please do not include anyone staying with you temporarily, such as someone visiting the household who usually lives somewhere else.

|  |  |  |  |
| --- | --- | --- | --- |
| **First Name** | **Last Name** | **Suffix** | **Age** |
|  |  |  |  |

|  |
| --- |
| SOFT CHECK: IF B01 ONLY HAS A FIRST NAME OR LAST NAME ENTERED, **“Please enter both a first name and last name. If you want, you can enter just an initial and not a full name. For example, instead of entering John Doe, you can enter J. Doe or John D. This will help you keep track of who later questions are asking about.”** |

**B01b\_2. In addition to those shown above, does anyone else live in the household?**

Recall that we are only interested in knowing about people who normally live in your household. Please do not include anyone staying with you temporarily, such as someone visiting the household who usually lives somewhere else.

🔾 Yes 1 B01b

🔾 No 2 B02a

|  |
| --- |
| PROGRAMMER BOX B01  AFTER COMPLETING THE PROCESS OF ADDING HOUSEHOLD MEMBERS, When a respondent clicks “No” (FP0B01b\_2=2) AND the “Next” button, a pop-up should appear:  Is this everyone in the household?  [LIST OF HOUSEHOLD MEMBERS]  *Please be sure to include anyone who usually lives here, but may be temporarily away from home on business or living in a dorm at school, or any babies, small children, grandparents, or other adults living in the household.*  a “Change answer” and “Keep answer and continue” button should be on the pop-up with “Keep answer and continue” advancing the respondent through the survey, and “Change answer” returning TO the family roster data. |

|  |
| --- |
| **ALL** |
| **FILL from A04a or A04b: RFNAME= Respondent’s first name; RLNAME= Respondent’s last name** |
| **FILL from A07: CFNAME= Child’s first name; CLNAME= Child’s last name.** |

**B02.** Please tell us a little bit about the members of your household. If you are not sure of something, your best guess is fine.

Please answer the following questions about: {FIRST NAME} {LAST NAME} ({SUFFIX})

|  |  |  |  |
| --- | --- | --- | --- |
|  | [RFNAME]  [RLNAME] | [CFNAME]  [CLNAME] | *[HH3FNAME]*  *[HH3LNAME]* |
| 1. What is [your/{CFNAME}’s/{HHNAME}’s] **age**? | 5022001  Select age… | 5022101  Select age… | 5022201  Select age… |
| 1. What is [your/{CFNAME}’s/{HHNAME}’s] **sex**? | 5022002  Select sex… | 5022102  Select sex… | 5022202  Select sex… … |
| 1. [Are you/Is {CFNAME}/IS {HHNAME}] **Hispanic or Latino/Latina**? | 5022003  Select… | 5022103  Select… | 5022203  Select… … |
| 1. Which of the following choices describes [your/{CFNAME}’s/{HHNAME}’s] **race**? You may choose more than one. | 5022004  Select race… | 5022104  Select race… | 5022204  Select race… |
| 1. 1. Which of the following best describes [you/{CFNAME}/{HHNAME}]? | 5022005  Select… | 5022105  Select… | 5022205  Select… … |
| 2. Which of the following best describes [you/{CFNAME}/{HHNAME}]? | 5022015  Select… | 5022115  Select… | 5022215  Select… … |
| 1. What is [your/{HHNAME}’s] **relationship** to [CFNAME]? | 5022006  Select relationship… | 5022106  Select relationship… | 5022206  Select relationship… |
| 1. Which of the following best describes this relationship with [CFNAME]? | 5022007  Select specific relationship… | 5022107  Select specific relationship… | 5022207  Select specific relationship… |
| 1. What is [your/{HHNAME}’s] **marital status**? | 5022008  Select marital status… | 5022108  Select marital status… | 5022208  Select marital status… |
| 1. What is the highest level of **education** [you have/{HHNAME} has] **completed**? | 5022009  Select education… | 5022109  Select education… | 5022209  Select education… |
| 1. During the past week did [you/{HHNAME}] work at a **job for pay**? | 5022010  Select… | 5022110  Select… | 5022210  Select… |
| 1. In which **country** [were you/was {HHNAME}] **born**? | 5022011  Select country… | 5022111  Select country… | 5022211  Select country… |
| 1. In what year did [you/{HHNAME}] move to the United States permanently? | 5022012  Select year… | 5022112  Select year… | 5022212  Select year… |

|  |
| --- |
| SOFT CHECK: IF B02A THROUGH B02L IS BLANK FOR EITHER THE RESPONDENT ([RFNAME], OR CHILD [CFNAME] OR HH MEMBER [HH3FNAME], PLEASE POP UP : List of people living in your household: **“You have left one or more items in the family roster blank. These items are important for the rest of the survey. Please complete the items that you have left blank.”** |

|  |
| --- |
| PROGRAMMER BOX B02  THE B02 LOOP SHOULD ASK QUESTIONS ACCORDING TO THE B01 MEMBER TYPE ORDERING.   1. RESPONDENT 2. CHILD 3. HH MEMBER #1 4. HH MEMBER #2, ETC.   Row a-d will be asked for everyone, although row a and row b should already be filled out for the child based on responses to a08 and a09. All other responses will be recorded using drop down boxes, so each of the responses listed below will appear as drop down boxes in the table.  row a will have the following values for responses from 0 through “99 or older”, with one response option of “don’t know” offered.  row b will have the following response options:   1. Male 2. Female   FOR ROW B: Don’t ask B02b when A08=1 or 0 and B02 is asked in regards to THE focus child.  row c will have the following response options:   1. Yes, this person is Hispanic or Latino/Latina 2. No, this person is not Hispanic or Latino/Latina   row D will have the following response options:   1. White 2. Black or African American 3. Asian 4. Native Hawaiian or other Pacific Islander 5. American Indian or Alaska Native   PROGRAMMER NOTE (for Row D): “add an information icon next to each of these response categories which would be the link to the help text but not activate the check box.  This would mean if the respondent clicked on the word “White” it would still check the box, but not deploy the help text.  If they clicked the information icon, it would take them to the help text but will not automatically check the response.”  **White**: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.  **Black or African American**: A person having origins in any of the black racial groups of Africa.  **Asian**: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.  **Native Hawaiian or other Pacific Islander**: A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.  **American Indian or Alaskan Native**: A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.  row e1 and e2 will be populated based on responses to row c and row d. If a person is reported to be hispanic/latino/latina, have response options in e1 for the specifc Hispanic group the respondent belongs to:   1. Mexican, Mexican-American, or Chicano 2. Cuban 3. Dominican 4. Puerto Rican 5. Central American 6. South American 7. Other (please specify)   the response option “central american” should have a HYPERLINK TO THE BELOW HELP TEXT:  By **Central American**, we mean, for example, people who describe themselves as Guatemalan, Salvadoran, Nicaraguan, Costa Rican, Panamanian, or Honduran.  the response option “south american” should have a HYPERLINK TO THE BELOW HELP TEXT:  By **South American**, we mean, for example, people who describe themselves as Colombian, Argentine, or Peruvian.  if an individual choses “other (please specify)” a pop-up box should appear asking the respondent to type in the hispanic group they identify with.  If a person is reported to be Asian in row d, then row e2 will have response options for the specifc asian group the respondent belows to:   1. Asian Indian 2. Chinese 3. Filipino 4. Japanese 5. Korean 6. Vietnamese 7. Other (please specify)   if an individual choses “other (please specify)” a pop-up box should appear asking the respondent to type in the asian group they identify with.  row f will be asked of every member in the household, with the response for child prefilled. Other response options for row f include:   1. Mother/Female guardian 2. Father/Male guardian 3. Sister 4. Brother 5. Girlfriend or partner of [CFNAME]’s parent/guardian 6. Boyfriend or partner of [CFNAME]’s parent/guardian 7. Grandmother 8. Grandfather 9. Aunt 10. Uncle 11. Cousin 12. Other relative (please specify) 13. Other non-relative 14. Focus child   programmer note: row f - When asking B02 question SERIES for [CFNAME] [CLNAME] , automatically code B02f as 13(focus child). Do not display the Bo2f question.  row G will be populated based on responses to row f. if row f=1, row g will be:   1. Biological or birth mother 2. Adoptive mother 3. Step mother 4. Foster mother or female guardian 5. Other female parent or guardian (please specify)   PLEASE MAKE THE RESPONSE CATEGORY “Birth Mother” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Biological or Birth Mother: Child's female biological parent. This may be the birth mother, but could also apply to a mother who used a surrogate mother to have her biological child.  PLEASE MAKE THE RESPONSE CATEGORY “adoptive mother” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Adoptive Mother: The female who has taken the child into her own family by legal process to raise as her own child.  PLEASE MAKE THE RESPONSE CATEGORY “step mother” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Step Mother: The female other than the child's mother who is married to the child's father.  PLEASE MAKE THE RESPONSE CATEGORY “FOSTER MOTHER OR FEMALE GUARDIAN” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Foster Mother: The female with whom the child is placed temporarily, usually through a social service agency and/or a court.  Female Guardian: The female legally placed in charge of the affairs of the child.  PLEASE MAKE THE RESPONSE CATEGORY “other female parent or guardian” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Other Female Parent or Guardian: This person acts as the mother of the child, but does not fit into one of the other categories. For example, in a household with two mothers, one of the mothers may not classify herself as biologically related and she may not be legally in charge of the affairs of the child even though she is another parent to the child. This category may also be used if a mother has a child through a surrogate mother, or with a donated egg, and does not classify the child as biologically related or adopted through a legal process.  if row f=2, row g will be:   1. Biological or birth father 2. Adoptive father 3. Step father 4. Foster father or male guardian 5. Other male parent or guardian (please specify)   PLEASE MAKE THE RESPONSE CATEGORY “Birth FATHER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Biological or Birth Father: Child's male biological parent. This could also apply to a father who used a surrogate mother to have his biological child.  PLEASE MAKE THE RESPONSE CATEGORY “adoptive FATHER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Adoptive Father: The male who has taken the child into his own family by legal process to raise as his own child.  PLEASE MAKE THE RESPONSE CATEGORY “step FATHER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Step Father: The male other than the child's father who is married to the child's mother.  PLEASE MAKE THE RESPONSE CATEGORY “FOSTER FATHER OR MALE GUARDIAN” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Foster Father: The male with whom the child is placed temporarily, usually through a social service agency and/or a court.    Male Guardian: The male legally placed in charge of the affairs of the child.  PLEASE MAKE THE RESPONSE CATEGORY “other MALE parent or guardian” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Other Male Parent or Guardian: This person acts as the father of the child, but does not fit into one of the other categories. For example, in a household with two fathers, one of the fathers may not classify himself as biologically related and he may not be legally in charge of the affairs of the child even though he is another parent to the child. This category may also be used if a father has donated sperm, and does not classify the child as biologically related or adopted through a legal process.  if row f=3, row g will be:   1. Full sister 2. Half sister 3. Step sister 4. Adoptive sister 5. Foster sister   PLEASE MAKE THE RESPONSE CATEGORY “FULL SISTER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Full Sister: A female with whom the child shares the same biological parents.  PLEASE MAKE THE RESPONSE CATEGORY “HALF SISTER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Half Sister: A female with whom the child shares one biological parent.  PLEASE MAKE THE RESPONSE CATEGORY “step SISTER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Step Sister: A female to whom the child is unrelated except by the marriage of one biological parent.  PLEASE MAKE THE RESPONSE CATEGORY “ADOPTIVE SISTER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Adoptive Sister: A female to whom the child is unrelated except that they are in the same family in which she or the child has been legally adopted by the family.    PLEASE MAKE THE RESPONSE CATEGORY “FOSTER SISTER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Foster Sister: A female to whom the child is unrelated except that they are in the same family in which she or the child have been taken into the home on a temporary basis and the parents have legal responsibility for the child.  if row f=4, row g will be:   1. Full brother 2. Half brother 3. Step brother 4. Adoptive brother 5. Foster brother   PLEASE MAKE THE RESPONSE CATEGORY “FULL BROTHER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Full Brother: A male with whom the child shares the same biological parents.  PLEASE MAKE THE RESPONSE CATEGORY “HALF BROTHER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Half Brother: A male with whom the child shares one biological parent.  PLEASE MAKE THE RESPONSE CATEGORY “step BROTHER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Step Brother: A male to whom the child is unrelated except by the marriage of one biological parent.  PLEASE MAKE THE RESPONSE CATEGORY “ADOPTIVE BROTHER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Adoptive Brother: A male to whom the child is unrelated except that they are in the same family in which he or the child has been legally adopted by the family.  PLEASE MAKE THE RESPONSE CATEGORY “FOSTER BROTHER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Foster Brother: A male to whom the child is unrelated except that they are in the same family in which he or the child have been taken into the home on a temporary basis and the parents have legal responsibility for the child.  if row f=13, row g will be:   1. Girlfriend or partner of [CFNAME]’s parent/guardian 2. Boyfriend or partner of [CFNAME]’s parent/guardian 3. Female guardian 4. Male guardian 5. Daughter/son of [CFNAME]’s parent’s partner 6. Other relative of [CFNAME]’s parent’s partner (please specify) 7. Other non-relative (please specify)   PLEASE MAKE THE RESPONSE CATEGORY “Girlfriend or Female Partner of CHILD's Parent/Guardian” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Girlfriend or Female Partner of CHILD's Parent/Guardian: The female who has a "partner-like" relationship with one of the child's parents or guardians. "Living as married" is another way of describing the relationship.  PLEASE MAKE THE RESPONSE CATEGORY “Boyfriend or Male Partner of CHILD's Parent/Guardian” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Boyfriend or Male Partner of CHILD's Parent/Guardian: The male who has a "partner-like" relationship with one of the child's parents or guardians. "Living as married" is another way of describing the relationship.  PLEASE MAKE THE RESPONSE CATEGORY “Female Guardian” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Female Guardian: The female legally placed in charge of the affairs of the child.  PLEASE MAKE THE RESPONSE CATEGORY “Male Guardian” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Male Guardian: The male legally placed in charge of the affairs of the child.  PLEASE MAKE THE RESPONSE CATEGORY “Daughter/son of CHILD's Parent's Partner” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Daughter/son of CHILD's Parent's Partner: The child of the person who has a "partner-like" relationship with one of the child's parents or guardians.  PLEASE MAKE THE RESPONSE CATEGORY “Other Relative of CHILD's Parent's Partner” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Other Relative of CHILD's Parent's Partner: Some other relative of the person who has a "partner-like" relationship with one of the child's parents or guardians.  PLEASE MAKE THE RESPONSE CATEGORY “Other Non-relative” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Other Non-relative: If one of the codes for non-relative above does not better describe the relationship of the person to the child, and there is no family relationship through blood, marriage, adoption, or partnership (i.e., living together as married), use this code.  row h will only be active (i.e., responses can only be provided) for individuals whose age is >=16 (based on responses in row a). response options for row h will be:   1. Married 2. Separated 3. Divorced 4. Widowed 5. Domestic partnership or civil union 6. Cohabiting or living together 7. Dating but not living together 8. Single, never married   row I will only be active (i.e., responses can only be provided) for individuals whose age is >=18 (based on responses in row a). response options for row i will be:   1. 8th grade or lower 2. 9th to 11th grade 3. 12th grade but no diploma 4. High school diploma or equivalent 5. Vocational/technical program after high school but no vocational/technical diploma 6. Vocational/technical diploma after high school 7. Some college but no degree 8. Associate’s degree 9. Bachelor’s degree 10. Graduate or professional school but no degree 11. Master’s degree (MA, MS) 12. Doctorate degree (Ph.D, Ed.D) 13. Professional degree after bachelor’s degree (medicine/MD; dentistry/DDS; law/JD/LLB; etc.) 14. Do not know   row J will only be active (i.e., responses can only be provided) for individuals whose age is >=16 (based on responses in row a). response options for row J will be:   1. Yes 2. No   row K will be asked of all members of the household. A list will be generated detailing a presumably exhausted list of countries and territories from around the world. The list will be searchable by typing in the first few letters, although “United States” should appear at the top of the list, along with the response option “don’t know”, and at the bottom of the list should be the option “Other (please specify)”. STRING FOR “OTHER - SPECIFY”=255  row l will only be asked of persons who were reported to be born somewhere other than the United states. Response options will be populated with the first response option equalling the value reported in row a and all years between then and the current year will be options, with the final category being “don’t know”. If row a is blank, populate row l with values of year starting with 1950 through to the current year and the final response option “don’t know”.  Programmer note: include a confirmation screen at the end when all information has been added for all household members. this screen will list all household members’ responses for each person and will allow respondents to edit the information on the screen if needed. also include a question to confirm that the screen has listed all household members. if respondent would like to add another person, he/she will be routed through the loop again. at the end of the loop, the confirmation screen with all household members information is re-displayed and respondents will be able to make changes for all members of the household and could add another person if needed, and loop again. |

|  |
| --- |
| **ASK for each member of the household WHO is 16 years old or older (B02a=16 or greater) AND [HH1FNAME] [HH1LNAME] NE CFNAME** |
| **CFNAME= Child’s first name** |
| **[HH1FNAME] [HH1LNAME]= First and last name of the respondent and each member of the household who is 16 years old or older** |

**B02m. Who is a parent, guardian, or primary caregiver for [CFNAME]?**

5020200

*Select all that apply.*

🞏 [HH1FNAME] [HH1LNAME] 1

🞏 [HH#FNAME] [HH#LNAME] #

|  |
| --- |
| PROGRAMMER BOX b02m  populate response options with the first and last name of the respondent and each member of the household WHO is 16 years old or older.  if respondent selects more than 2 members of the household, retain answers but have a pop-up appear with the following text:  Please select the two members of the household **most** responsible for providing care to [CFNAME]. If more than two household members provide equal amounts of care to the child, please select the two members that you know the most about.  🞏 [HH1FNAME] [HH1LNAME] 1  🞏 [HH#FNAME] [HH#LNAME] #  🞏 [HH#FNAME] [HH#LNAME] #  The total number of names to appear in the pop-up list is dependent on the number of household members selected in b02m. If the respondent continues to respond with more than two individuals as the primary parents in the household, the selection logic will be applied according to the following rules: 1) if a household member identified as mother is selected as one of the primary parents they will be set to be primary parent 1 regardless of who else is selected; 2) if a household member identified as father is selected as one of the primary parents they will be set to be primary parent 2 regardless of who else is selected; 3) if a household member identified as mother is selected and no household member is identified as father then primary parent 2 should be assigned to the household member according to their relationship type with the following priority order a) another mother, b) boyfriend/girlfriend, c) grandmother/grandfather, d) aunt/uncle, e) other relative/non-relative over age 18. If no other family member meets one of these criteria, then primary parent 2 set to missing; 4) if a household member identified as father is selected and no household member is identified as mother then primary parent 1 should be assigned to the household member according to their relationship type with the following priority order a) another father, b) boyfriend/girlfriend, c) grandmother/grandfather, d) aunt/uncle, e) other relative/non-relative over age 18. If no other family member meets one of these criteria, then household member identified as father becomes primary parent 1 and primary parent 2 set to missing.  if two or fewer household members are selected in b02m, the following rules apply for designating primary parent 1 and primary parent 2: 1) for households with two individuals of the opposite sex selected, the female will be primary parent 1 and the male will be primary parent 2; 2) for households with two individuals of the same sex selected, the individual identified as “mother” will be set as primary parent 1 (if two females) and the individual identified as “father” will be set as primary parent 2 (if two males); 3) for households with two individuals of the same sex who have both identified as mother or father, primary parent 1 will be assigned to the member that has the lowest value for b02g—the other member will be assigned primary parent 2; 4) for households with two individuals of the same sex who have both identified as mother or father and who have equal values on b02g, primary parent 1 will be assigned TO the member that is based on family roster number—the other household member will be assigned primary parent 2.  information from this item will be used to create ‘pointers’ for the primary adults in the household and assist with the marital status and employment questions.  the number or pound sign (#) implies that responses will be coded to coRrespond to a household member’s location in the family roster. |

|  |
| --- |
| **SOFT CHECK: B02m= IF RESPONDENT SELECTS MORE THAN 2 MEMBERS OF THE HOUSEHOLD;** Please select the two members of the household **most** responsible for providing care to [CFNAME]. If more than two household members provide equal amounts of care to [CFNAME], please select the two members that you know the most about. |
| SOFT CHECK: IF B02m=NO RESPONSE; **Your response is important for this survey. Please provide an answer for this question.** |

|  |
| --- |
| **ASK IF B02H = 1** |
| **FILL: HH#FNAME HH#LNAME with B02H = 1** |

**B03a.** Is [HH#FNAME HH#LNAME with B02H = 1] married to someone in the household?

5020301

🔾 Yes 1

🔾 No 2

|  |
| --- |
| **ASK IF B03a = 1** |
| **FILL: HH#FNAME HH#LNAME with B02H = 1** |

**B03b.** Who is [HH#FNAME HH#LNAME with B02H = 1] married to?

5020302

🔾 [HH#FNAME HH#LNAME] 1

🔾 [HH#FNAME HH#LNAME] 2

|  |
| --- |
| PROGRAMMER BOX B03b  populate response options with the first and last name of each member of the household WHO is 16 years old or older (and has not been selected in a previous loop of b03a and b03b) AS well as a ‘None of the above’ option.  if any b02a = m then listHH#FNAME HH#LNAME FOR B03B.  loop b03a and b03b for all household members WHO have not already been matched based on prior loops of b03a and b03b. |

|  |
| --- |
| **ASK IF B02H = 5** |
| **FILL: HH#FNAME HH#LNAME with B02H = 5** |

**B04a.** Is [HH#FNAME HH#LNAME with B02H = 5] in a domestic partnership or civil union with someone in the household?

5020401

🔾 Yes 1

🔾 No 2

|  |
| --- |
| **ASK IF B04a = 1** |
| **FILL: HH#FNAME HH#LNAME with B02H = 5** |

**B04b.** Who is [HH#FNAME HH#LNAME with B02H = 5] in a domestic partnership or civil union with?

5020402

🔾 [HH#FNAME HH#LNAME] 1

🔾 [HH#FNAME HH#LNAME] 2

|  |
| --- |
| PROGRAMMER BOX B04  populate response options with the first and last name of each member of the household WHO is 16 years old or older (and has not been selected previously in B03a, b03b or b04a or an earlier loop of b04b) AS well as a ‘None of the above’ option.  if any b02a = m then listHH#FNAME HH#LNAME FOR B04B.  loop b04a and b04b for all household members WHO have not already been matched based on prior loops of b04a and b04b. |

|  |
| --- |
| **ASK IF B02H = 6** |
| **FILL: HH#FNAME HH#LNAME with B02H = 6** |

**B05a.** Who is [HH#FNAME HH#LNAME with B02H = 6] cohabiting or living with?

5020501

🔾 [HH#FNAME HH#LNAME] 1

🔾 [HH#FNAME HH#LNAME] 2

|  |
| --- |
| PROGRAMMER BOX B05  populate response options with the first and last name of each member of the household WHO is 16 years old or older (and has not been selected previously in b03b, b04b, or an earlier loop of b05a) AS well as a ‘None of the above’ option.  if any b02a = m then listHH#FNAME HH#LNAME FOR B05A.  loop b05a for all household members WHO have not already been matched based on prior loops of b05a. |

**C. FAMILY AND PARENT BACKGROUND**

|  |
| --- |
| **All** |

Thank you for telling us about each member of your household. Now we have some questions about the household as a whole. First, we would like to know about languages used in your home.

**C01.** Is English the primary language used in your home?

5030100

🔾 Yes 1 C02a

🔾 No 2 C03a

NO RESPONSE M C02a

|  |
| --- |
| **ASK IF C01=1 OR M** |

**C02a.** Is any language other than English used in your home?

5030201

🔾 Yes 1 C02b

🔾 No 2 C04a

NO RESPONSE M C04a

|  |
| --- |
| **ASK IF C02A=1** |

**C02B.** Please select the language(s) other than English that are used in your home from the

alphabetical list below. You may select more than one.

*Select all that apply.*

5032201

🞏 a. Arabic 1

5032202

🞏 b. Chinese language/dialect 2

5032203

🞏 c. Farsi 3

🞏 d. Filipino language 4

5032205

5032204

🞏 e. French 5

5032206

🞏 f. German 6

5032207

🞏 g. Greek 7

5032208

🞏 h. Hmong 8

🞏 i. Italian 9

5032209

🞏 j. Japanese 10

5032210

5032211

🞏 k. Korean 11

🞏 l. Polish 12

5032213

5032212

🞏 m. Portuguese 13

🞏 n. Sign Language 14

5032215

5032214

🞏 o. Spanish 15

🞏 p. Vietnamese 16

5032216

5032217

🞏 q. Some other language 99

Specify (STRING (50))

NO RESPONSE M C04a

|  |
| --- |
| **ASK IF C01=2, AND MORE THAN ONE OPTION IS SELCTED IN C02B** |

**C03A.** What is the primary language used in your home?

*Select one only.*

5033100

🔾 a. Arabic 1

🔾 b. Chinese language/dialect 2

🔾 c. Farsi 3

🔾 d. Filipino language 4

🔾 e. French 5

🔾 f. German 6

🔾 g. Greek 7

🔾 h. Hmong 8

🔾 i. Italian 9

🔾 j. Japanese 10

🔾 k. Korean 11

🔾 l. Polish 12

🔾 m. Portuguese 13

🔾 n. Sign Language 14

🔾 o. Spanish 15

🔾 p. Vietnamese 16

🔾 q. Some other language 99

Specify (STRING (50))

🔾 r. More than one language used equally 17

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX C03A  display languages that were selected in c02b as response options here. |
| **ASK IF C01=2** | | |

**C03B.** Is any other language used in your home?

5030302

🔾 Yes 1 C03c

🔾 No 2 C04

NO RESPONSE M C04

|  |
| --- |
| **ASK IF C03B=1** |
| **Fill = LANGUAGE LISTED IN C03A** |

**C03C.** Please select the language(s) [other than **[LANGUAGE LISTED IN C03A]]** that are used in your home from the alphabetical list below. Select all that apply.

5033301 to1

To

5033318

|  |
| --- |
| PROGRAMMER BOX  if C03A is missing or C03A = More than one language used equally (17), or C03A = 99 and C03A\_other is empty,  fill should be empty  Checkbox response options should populate with same list of languages as used in FP0C03A, but should not include the option selected in FP0C03A (whatever was selected in FP0C03A should be hidden). List should include English.  Please program soft check if FP0C03Cr=1, and FP0C03Cr\_other is blank:  "You have selected "Some other language", but have not provided a response to the "Please specify" prompt." |

|  |
| --- |
| **ASK IF B02F NE 1 FOR ANY MEMBER OF HOUSEHOLD** |
| **CFNAME=Child’s first name** |

**C04a.** What is the highest level of education **[CFNAME’s] mother** completed?

5030401

Select one only.

🔾 8th grade or lower 1

🔾 9th to 11th grade 2

🔾 12th grade but no diploma 3

🔾 High school diploma or equivalent 4

🔾 Vocational/technical program after high school but no vocational/technical diploma 5

🔾 Vocational/technical diploma after high school 6

🔾 Some college but no degree 7

🔾 Associate’s degree 8

🔾 Bachelor’s degree 9

🔾 Graduate or professional school but no degree 10

🔾 Master’s degree (MA, MS) 11

🔾 Doctorate degree (Ph.D, Ed.D) 12

🔾 Professional degree after bachelor’s degree (medicine/MD; dentistry/DDS; law/JD/LLB; etc.) 13

🔾 Do not know 14

|  |
| --- |
| **ASK IF B02F NE 2 FOR ANY MEMBER OF HOUSEHOLD** |
| **CFNAME=Child’s first name** |

**C04b.** What is the highest level of education **[CFNAME’s] father** completed?

5030402

Select one only.

🔾 8th grade or lower 1

🔾 9th to 11th grade 2

🔾 12th grade but no diploma 3

🔾 High school diploma or equivalent 4

🔾 Vocational/technical program after high school but no vocational/technical diploma 5

🔾 Vocational/technical diploma after high school 6

🔾 Some college but no degree 7

🔾 Associate’s degree 8

🔾 Bachelor’s degree 9

🔾 Graduate or professional school but no degree 10

🔾 Master’s degree (MA, MS) 11

🔾 Doctorate degree (Ph.D, Ed.D) 12

🔾 Professional degree after bachelor’s degree (medicine/MD; dentistry/DDS; law/JD/LLB; etc.) 13

🔾 Do not know 14

|  |
| --- |
| **ASK IF B02F NE 7 FOR ANY MEMBER OF HOUSEHOLD AND RESPONDENT’S B02F NE 3 AND NE 4.** |

**C05.** What is the highest level of education **your** mother completed?

5030500

*Select one only.*

🔾 8th grade or lower 1

🔾 9th to 11th grade 2

🔾 12th grade but no diploma 3

🔾 High school diploma or equivalent 4

🔾 Vocational/technical program after high school but no vocational/technical diploma 5

🔾 Vocational/technical diploma after high school 6

🔾 Some college but no degree 7

🔾 Associate’s degree 8

🔾 Bachelor’s degree 9

🔾 Graduate or professional school but no degree 10

🔾 Master’s degree (MA, MS) 11

🔾 Doctorate degree (Ph.D, Ed.D) 12

🔾 Professional degree after bachelor’s degree (medicine/MD; dentistry/DDS; law/JD/LLB; etc.) 13

🔾 Do not know 14

|  |
| --- |
| **ASK IF B02F NE 8 FOR ANY MEMBER OF HOUSEHOLD AND RESPONDENT’S B02F NE 3 AND NE 4.** |

**C06.** What is the highest level of education **your** father completed?

5030600

*Select one only.*

🔾 8th grade or lower 1

🔾 9th to 11th grade 2

🔾 12th grade but no diploma 3

🔾 High school diploma or equivalent 4

🔾 Vocational/technical program after high school but no vocational/technical diploma 5

🔾 Vocational/technical diploma after high school 6

🔾 Some college but no degree 7

🔾 Associate’s degree 8

🔾 Bachelor’s degree 9

🔾 Graduate or professional school but no degree 10

🔾 Master’s degree (MA, MS) 11

🔾 Doctorate degree (Ph.D, Ed.D) 12

🔾 Professional degree after bachelor’s degree (medicine/MD; dentistry/DDS; law/JD/LLB; etc.) 13

🔾 Do not know 14

|  |
| --- |
| **ASK IF B02F NE 7 FOR ANY MEMBER OF HOUSEHOLD AND RESPONDENT’S B02F NE 3 AND NE 4 AND RESPONDENT’S MARITAL STATUS IS CONNECTED TO OTHER HOUSEHOLD MEMBER BASED ON NON-MISSING B03B, B04B, or B05A.** |
| **HH#FNAME HH#LNAME =** autofilled based on the first and last name of the individual from B03b, B04b, or B05a who is linked with the respondent |
| **IF B03B = M OR B04B = M OR B05A = M THEN GO TO D01**  **IF B02F = M THEN GO TO D01** |

**C07.** What is the highest level of education **[HH#FNAME HH#LNAME]’s mother** completed?

5030700

Select one only.

🔾 8th grade or lower 1

🔾 9th to 11th grade 2

🔾 12th grade but no diploma 3

🔾 High school diploma or equivalent 4

🔾 Vocational/technical program after high school but no vocational/technical diploma 5

🔾 Vocational/technical diploma after high school 6

🔾 Some college but no degree 7

🔾 Associate’s degree 8

🔾 Bachelor’s degree 9

🔾 Graduate or professional school but no degree 10

🔾 Master’s degree (MA, MS) 11

🔾 Doctorate degree (Ph.D, Ed.D) 12

🔾 Professional degree after bachelor’s degree (medicine/MD; dentistry/DDS; law/JD/LLB; etc.) 13

🔾 Do not know 14

|  |
| --- |
| PROGRAMMER BOX  hh#fname and hh#lname will be autofilled based on the first and last name of the individual from b03b, b04b, or b05a who is linked with the respondent. |

|  |
| --- |
| **ASK IF B02F NE 8 FOR ANY MEMBER OF HOUSEHOLD AND RESPONDENT’S B02F NE 3 AND NE 4 AND RESPONDENT’S MARITAL STATUS IS CONNECTED TO OTHER HOUSEHOLD MEMBER BASED ON NON-MISSING B03B, B04B, or B05A.** |
| **ASK IF RESPONDENT LEAVES B02H = M BUT RESPONDENT IS CONNECTED TO OTHER HOUSEHOLD MEMBER BASED ON NON-MISSING B03B, B04B, OR B05A.** |
| **HH#FNAME HH#LNAME =** autofilled based on the first and last name of the individual from B03b, B04b, or B05a who is linked with the respondent. (same name as appears in c07). |
| **IF B03B = M OR B04B = M OR B05A = M THEN GO TO D01**  **IF B02F = M THEN GO TO D01** |

**C08.** What is the highest level of education **[HH#FNAME HH#LNAME]’s father** completed?

5030800

Select one only.

🔾 8th grade or lower 1

🔾 9th to 11th grade 2

🔾 12th grade but no diploma 3

🔾 High school diploma or equivalent 4

🔾 Vocational/technical program after high school but no vocational/technical diploma 5

🔾 Vocational/technical diploma after high school 6

🔾 Some college but no degree 7

🔾 Associate’s degree 8

🔾 Bachelor’s degree 9

🔾 Graduate or professional school but no degree 10

🔾 Master’s degree (MA, MS) 11

🔾 Doctorate degree (Ph.D, Ed.D) 12

🔾 Professional degree after bachelor’s degree (medicine/MD; dentistry/DDS; law/JD/LLB; etc.) 13

🔾 Do not know 14

|  |
| --- |
| PROGRAMMER BOX  hh#fname and hh#lname will be autofilled based on the first and last name of the individual from b03b, b04b, or b05a who is linked with the respondent (same name as appears in c07). |

**D. HOME LIFE**

|  |
| --- |
| **All** |
| **CFNAME=Child’s first name;** |
| **“His/her”; ”he/she”; “himself/herself”** fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

Great! We really appreciate you taking the time to answer all of our questions about people living in your household. The study doesn’t happen without you. Let’s keep moving along. Now we have some questions about how much parents and guardians keep an eye on children around this age.

D00a. How many of {CFNAME}’s friends do you know?

5040001

Select one only.

🔾 None 1

🔾 Some 2

🔾 About half 3

🔾 Most 4

🔾 All or almost all 5

D00b. Please think about all of {CFNAME}’s friends. How many parents of {CFNAME}’s friends have you talked to in the last four weeks?

5040002

NUMBER OF PARENTS

D00c. About how many parents of children in {CFNAME}’s school do you talk or text with regularly, either in person, online, or on the phone?

5040003

NUMBER OF PARENTS

**D01.** How often do you…

PROGRAMMER: CODE ONE PER ROW

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | *(Please select one response per row.)* | Never | Rarely | Some-times | Often | Very often | Always |
| 5040101 | 1. Know what {CFNAME} does during {his/her} free time? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 5040102 | 1. Know what type of homework {CFNAME} has? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 5040104 | 1. Know when {CFNAME} has an exam or paper due at school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 5040105 | 1. Know what {CFNAME}'s grades are in different subjects at school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 5040106 | 1. Know where {CFNAME} goes after school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |
| **“His/her”:** fill will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

D01f. How often do you know what {CFNAME} spends {his/her} money on?

1. Never

5040103

1. Rarely
2. Sometimes
3. Often
4. Very Often
5. Always

g. Not applicable, child does not have own money.

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |
| **“His/her”:** fill will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

How often does {CFNAME} tell you about…

PROGRAMMER: CODE ONE PER ROW

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | *(Please select one response per row.)* | Never | Rarely | Some-times | Often | Very often | Always |
| 5041101 | 1. {His/Her} friends without you asking (for example, which friends {he/she} hangs out with and how {his/her} friends feel about things)? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 5041102 | 1. School without you asking (for example, how each subject is going or {his/her}relationships with teachers)? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |
| “His/her”; ”he/she”: fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

D01h. How often does {CFNAME} keep secrets from you about what {he/she} does during {his/her}free time?

1. Never

5041201

1. Rarely
2. Sometimes
3. Often
4. Very Often
5. Always

7. Don’t know

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |

D01j. Does your family have rules about…

PROGRAMMER: CODE ONE PER ROW

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | *(Please select one response per row.)* |  | Yes | No |
| 5040111 | 1. **who** {CFNAME} can text, message, video chat, email, or play online games with? | | 1 🔾 | 2 🔾 |
| 5040112 | b. **when** [CFNAME] can text, message, video chat, email, or play online games? | | 1 🔾 | 2 🔾 |
| 5040113 | c. **how much time** [CFNAME] can spend using technology (for example, a limit on “screen time” hours per day)? | | 1 🔾 | 2 🔾 |

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |
| “His/her”; ”he/she”: fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

Next, we’d like to ask you some questions about things children sometimes do around this age.

**D02.** Have any of the following things happened to {CFNAME}? Has {he/she}…

PROGRAMMER: CODE ONE PER ROW

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | *(Please select one response per row.)* |  | Yes | No |
| 5040201 | 1. Gotten involved with the wrong kinds of people? | | 1 🔾 | 2 🔾 |
| 5040202 | 1. Ever used drugs (for example, marijuana, cocaine, ecstasy, or 'bath salts')? | | 1 🔾 | 2 🔾 |
| 5040203 | 1. Ever used alcohol? | | 1 🔾 | 2 🔾 |
| 5040204 | 1. Gotten in trouble with the police? | | 1 🔾 | 2 🔾 |
| 5040205 | 1. Beaten up other people? | | 1 🔾 | 2 🔾 |
| 5040206 | 1. Been beaten up by other people? | | 1 🔾 | 2 🔾 |
| 5040207 | 1. Run away? | | 1 🔾 | 2 🔾 |

|  |
| --- |
| **All** |

The next set of questions is about the neighborhood in which you live.

**D03.** How true are the following statements about your neighborhood?

PROGRAMMER: CODE ONE PER ROW

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | *(Please select one response per row.)* | Not at all true | A little bit true | Somewhat true | True | Very true |
| 5040301 | 1. I worry about people with guns and knives in this neighborhood. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5040302 | 1. People in this neighborhood do not get along with each other. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5040303 | 1. Drug dealers are a problem in this neighborhood. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5040304 | 1. I worry about the kind of people my children will meet in this neighborhood. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5040305 | 1. This neighborhood is safe for children during the daytime. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5040306 | 1. This neighborhood is safe for children during the nighttime. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5040307 | 1. There are lots of run down homes in this neighborhood. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| PROGRAMMER BOX D03  PLEASE MAKE THE ITEM TEXT “run down homes” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  By “run down homes” we mean houses in very bad condition because of age or lack of care. |

**E. CHILD'S SCHOOL EXPERIENCES**

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |

The information you have provided so far is extremely helpful. Thanks! The next set of questions is about your involvement with **{CFNAME}**'s school and contact you may have had with the school about {CFNAME}'s behavior or performance.

**E01.** Indicate how much you agree or disagree with each of the following statements. Please think about the current school year as you consider each statement.

PROGRAMMER: CODE ONE PER ROW

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | *Please select one response per row.* | Strongly agree | Agree | Slightly agree | Slightly disagree | Disagree | Strongly disagree |
| 5050101 | 1. I make it my business to stay on top of things at school. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 5050102 | 1. I like to spend time at {CFNAME}'s school when I can. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 5050103 | 1. It's important that I let the teachers know about things that concern {CFNAME}. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 5050104 | 1. I find it helpful to talk with {CFNAME}'s teachers. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 5050105 | 1. {CFNAME}'s teachers know me. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |

**E02.** Indicate how often you have done the following during this school year.

PROGRAMMER: CODE ONE PER ROW

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | *Please select one response per row.* | Never | Once or twice | About once a month | Once every two weeks | Once a week | Daily |
| 5050201 | 1. I contacted {CFNAME}'s teachers with questions about schoolwork. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 5050202 | 1. I exchanged phone calls or notes with {CFNAME}'s teachers for questions not related to schoolwork. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |
| **IF B02h NE 1 OR 5 INSERT “you”; IF B02h=1 OR 5 INSERT “you or your spouse/partner”** |

**E03.** Since the start of the school year, how many times have you or someone else in your household had contact with the school about…

PROGRAMMER: CODE ONE PER ROW

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | *Please select one response per row.* | None | Once or twice | Three or four times | More than four times |
| 5050301 | 1. {CFNAME}'s school schedule for this year? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 5050302 | 1. {CFNAME} missing too many days of school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 5050303 | 1. {CFNAME}'s positive or good behavior in school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 5050304 | 1. Information on how to help {CFNAME} at home with specific skills or homework? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 5050305 | 1. {CFNAME}'s plans after leaving high school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 5050306 | 1. {CFNAME}'s course selection for entry into college or vocational/technical school after completing high school? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |

The next questions are about disciplinary actions {CFNAME}'s school may have taken.

**E04.** Since starting kindergarten, how many times has {CFNAME} ever been suspended or expelled from school? Do not count detentions.

5050400

PROGRAMMER: INSERT DROP DOWN FIELDS

▼

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX  INSERT DROP DOWN: R=0-10 or more, Don’t know  IF E04=0 GOTO E7. |

|  |
| --- |
| **ASK IF E04. >0** |
| **IF E04>1 INSERT “most recent”; DO NOT DISPLAY E05Ak IF E04= Don’t know** |

**E05A.** What was the reason for the **[IF E04>1 INSERT “most recent”]** suspension or expulsion?

*Select all that apply.*

5050501

🞏 a. Repeated violation of the school rules 1

5050502

🞏 b. Use of profanity (swearing) 2

5050503

🞏 c. Threatening students or teachers 3

5050504

🞏 d. Defacing or destroying school property 4

5050505

🞏 e. Bringing a weapon to school 5

5050506

🞏 f. Fighting with another student 6

5050507

🞏 g. Ganging up (with one or more other students) on another student 7

5050508

🞏 h. Threatening to use or making a false report of the use of an explosive device at school 8

5050509

🞏 i. Assaulting a teacher, principal, or other school personnel 9

🞏 j. Other 10

5050510

Specify (STRING (50))

🞏 k. Don’t know 11

5050511

NO RESPONSE M

|  |
| --- |
| **ASK IF E04. >0** |
| CFNAME=Child’s first name; |
| **IF E04>1 INSERT “most recent”** |

**E06.** How many days was the **[IF E04>1 INSERT “most recent”]** suspension or expulsion?

5050600

Days for most recent suspension or expulsion

Check this box if {CFNAME} was expelled permanently 2

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |

The next questions are about grade levels your child may have repeated or skipped.

**E07.** What grades, if any, has {CFNAME} repeated since starting school?

5050700

*Select all that apply.*

🞏 Has not repeated any grade levels 1

🞏 Kindergarten 2

🞏 Grade 1 3

🞏 Grade 2 4

🞏 Grade 3 5

🞏 Grade 4 6

🞏 Grade 5 7

🞏 Grade 6 8

NO RESPONSE M

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |

**E08.** What grade level, if any, has {CFNAME} skipped since starting school?

5050800

*Select all that apply.*

🞏 Has not skipped any grade levels 1

🞏 Kindergarten 2

🞏 Grade 1 3

🞏 Grade 2 4

🞏 Grade 3 5

🞏 Grade 4 6

🞏 Grade 5 7

🞏 Grade 6 8

NO RESPONSE M

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |

The following questions are about programs {CFNAME} may participate in at school.

**E09.** Has {CFNAME} ever been enrolled in a program for English language learners (ELLs) such as English as a Second Language (ESL), English immersion, or bilingual education?

5050900

🔾 Yes 1 E10

🔾 No 2 E11

NO RESPONSE M E11

|  |
| --- |
| **ASK IF E09. = 1** |
| “His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

**E10.** Is {he/she} currently enrolled in a program for English language learners (ELLs) such as English as a Second Language (ESL), English immersion, or bilingual education?

5051000

🔾 Yes 1

🔾 No 2

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |

**E11.** Does {CFNAME} receive free or reduced-price meals at school?

5051100

🔾 Yes 1 E12

🔾 No 2 E13a

|  |
| --- |
| **ASK IF E11. = 1** |

**E12.** Are these meals free or reduced-price?

5051200

🔾 Free 1

🔾 Reduced price 2

**PROGRAMS THAT CHILD PARTICIPATES IN**

|  |
| --- |
| **All** |

**E13a.** During the current school year, has {CFNAME} taken a field trip focused on science, for example to a science museum or center, a science lab, a planetarium, or a nature center?

5051301

🔾 Yes 1 E13b

🔾 No 2 E13c

🔾 Don’t know 3 E13c

|  |
| --- |
| **ASK IF E13a=1** |

**E13b.** During the current school year, how many times did {he/she} take a field trip focused on science, for example to a science museum or center, a science lab, a planetarium, or a nature center?

5051302

PROGRAMMER: INSERT DROP DOWN FIELDS

NUMBER OF TIMES

🔾 Do not know 91

NO RESPONSE M

|  |
| --- |
| **All** |

**E13c.** Other than school field trips, how many times did {CFNAME} visit a science museum or center, a science lab, a planetarium, or a nature center during the current school year?

5051303

PROGRAMMER: INSERT DROP DOWN FIELDS

NUMBER OF TIMES

🔾 Do not know 91

NO RESPONSE M

**F. CHILD HEALTH AND WELL-BEING**

Thank you for answering all of our questions about {CFNAME}'s educational experiences. Now, we would like to ask you about {CFNAME}'s health.

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |

**F01.** In general, would you say that {CFNAME}'s health is...

5060100

*Select one only.*

🔾 Excellent 1

🔾 Very good 2

🔾 Good 3

🔾 Fair 4

🔾 Poor 5

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |

**F03.** Has a doctor, nurse, or other medical professional ever told you that {CFNAME} has had a concussion?

5060300

🔾 Yes 1 F04

🔾 No 2 F05

|  |
| --- |
| **ASK IF F03. = 1** |
| CFNAME=Child’s first name; |

**F04.** How many times has {CFNAME} been diagnosed by a doctor, nurse, or other medical professional as having had a concussion?

5060400

|\_|\_| Number of times

(RANGE: 1- 20)

|  |
| --- |
| **All** |
| **CFNAME=Child’s first name;** |

**F05.** Has a doctor, nurse, or other medical professional ever told you that {CFNAME} has asthma?

5060500

🔾 Yes 1 F06

🔾 No 2 F07

|  |
| --- |
| **ASK IF F05. = 1** |
| CFNAME=Child’s first name; |

**F06.** Has {CFNAME} ever been taken to an emergency room or hospitalized for at least one night because of asthma?

5060600

🔾 Yes 1

🔾 No 2

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |
| “His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

The next set of questions is about professional evaluations {CFNAME} may have had in the past.

**F07.** Has {CFNAME} ever been evaluated by a professional because of an issue with...

|  |  |  |  |
| --- | --- | --- | --- |
|  |  | Yes | No |
| 5060701 | 1. Independently taking care of {himself/herself}? | 1 🔾 | 2 🔾 |
| 5060702 | 1. Paying attention? | 1 🔾 | 2 🔾 |
| 5060703 | 1. Learning, thinking, or solving problems? | 1 🔾 | 2 🔾 |
| 5060704 | 1. Difficulty coordinating or moving {his/her} **whole** body,arms, or legs? | 1 🔾 | 2 🔾 |
| 5060705 | 1. Behaving or relating to *other children*? | 1 🔾 | 2 🔾 |
| 5060706 | 1. Behaving or relating to *adults*? | 1 🔾 | 2 🔾 |
| 5060707 | 1. {His/Her} activity level? | 1 🔾 | 2 🔾 |
| 5060708 | 1. {His/Her} emotional or mental health issues? | 1 🔾 | 2 🔾 |
| 5060710 | 1. Anxiety or fear? | 1 🔾 | 2 🔾 |
| 5060709 | 1. Harming {himself/herself}? | 1 🔾 | 2 🔾 |
| 5060711 | 1. Over-sensitivity or under-sensitivity to touch, sound, or temperature? | 1 🔾 | 2 🔾 |
| 5060712 | 1. Communicating or understanding what is said in {home language}? | 1 🔾 | 2 🔾 |
| 5060714 | 1. Eating too much or eating too little? | 1 🔾 | 2 🔾 |
| 5060715 | 1. Sleeping too much or sleeping too little? | 1 🔾 | 2 🔾 |
| 5060713 | 1. Chronic health problem (e.g., asthma, seizure, sickle cell anemia)? | 1 🔾 | 2 🔾 |

|  |
| --- |
| PROGRAMMER BOX  IF F07a=1 OR F07b=1 OR F07c=1 OR F07d=1 OR F07e=1 OR F07f=1 OR F07g=1 OR F07h=1 OR f07i=1 OR f07j=1 OR f07k=1 OR f07l=1 OR f07m=1 OR f07n1=1 OR f07o1=1, **GO TO F08.**  ELSE IF F07a NE 1 AND F07b NE 1 AND F07c NE 1 AND F07d NE 1 AND F07e NE 1 AND F07f NE 1 AND F07g NE 1 AND F07h NE 1 AND F07i NE 1 AND F07j NE 1 AND F07k NE 1 AND F07l NE 1 AND F07m NE 1 AND F07n NE 1 AND F07o NE 1, **GO TO F16.** |

|  |
| --- |
| PROGRAMMER BOX F07  PLEASE MAKE THE ITEM TEXT “PROFESSIONAL” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Professional: This includes health and mental health professionals such as doctors, pediatricians, nurse practitioners, optometrists, ophthalmologists, school or other psychologists, psychiatrists, social workers, speech-language pathologists, physical therapists, etc. Do not include teachers, principals or guidance counselors. |

|  |
| --- |
| **ASK IF ANY OF F07A-O = 1.** |
| CFNAME= Fill text from any items in F07A-O=1Child’s first name; |

**F08. You reported that {CFNAME} was evaluated by a professional because of an issue with the following:**

5060800

**{TEXT FROM F07A-O}**

Have you obtained a diagnosis or diagnoses for these issues from a professional?

🔾 Yes 1 F09

🔾 No 2 F16

|  |
| --- |
| PROGRAMMER BOX  **{TEXT FROM F07A-O}** : Insert ALL options selected from F07 as a list (IF ANY OF F07A-O= 1). Only display F08 once. |

|  |
| --- |
| PROGRAMMER BOX F08  PLEASE MAKE THE ITEM TEXT “PROFESSIONAL” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Professional: This includes health and mental health professionals such as doctors, pediatricians, nurse practitioners, optometrists, ophthalmologists, school or other psychologists, psychiatrists, social workers, speech-language pathologists, physical therapists, etc. Do not include teachers, principals or guidance counselors. |

|  |
| --- |
| **ASK IF F08.=1.** |

**F09.** What was the diagnosis?

If you don’t see [CFNAME]’s diagnosis in the list below, please select “Other” and type it in the “Please Specify” box.

*Select all that apply.*

5060902

🞏 a. Learning disability LD -- Reading disability (or dyslexia) 2 F13b

5060903

🞏 b. Learning disability LD -- Math disability 3 F13b

🞏 c. Learning disability (LD) - other 1 F13b

5060904

5060901

🞏 d. Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD) 4 F13b

5060905

* e. Autism Spectrum Disorder (ASD); Autistic Disorder/Asperger’s Disorder/Pervasive Developmental Disorder (PDD)…………………………………………………… 5 F13b
* f. Speech or language disorder 6 F13b

5060907

5060906

🞏 g. Intellectual disability\* (severe cognitive disability) 7 F13b

🞏 h. Health impairment (such as seizures, asthma, diabetes)……………………………………………….8 F13b

5060908

🞏 i. Physical disability (such as cerebral palsy, spina bifida, amputee, contractures) 9 F13b

5060909

5060910

🞏 j. Sensory impairment (such as hypersensitivity; sensory processing problems; sensory integration problems; sensory deficit, or sensory organization problems) 10 F13b

🞏 k. Emotional disturbance 11 F13b

5060912

5060911

🞏 l. Conduct disorder or oppositional defiant disorder 12 F13b

5060913

🞏 m. Panic disorder 13 F13b

5060914

🞏 n. Anxiety disorder or phobia 14 F13b

5060915

🞏 o. Obsessive compulsive disorder (OCD) 15 F13b

5060916

🞏 p. Eating disorder 16 F13b

🞏 q. Depression 17 F13b

5060917

🞏 r. Bipolar disorder 18 F13b

5060918

🞏 s. Tourette’s syndrome 19 F13b

5060919

5060920

🞏 t. Traumatic brain injury 20 F13b

🞏 u. Diagnosis not yet determined 21 F16

5060921

🞏 v. Other 99 F13b

5060922

Please specify (STRING (50))

NO RESPONSE M F16

\*Previously called “mental retardation”

|  |
| --- |
| PROGRAMMER BOX F09  PLEASE MAKE THE RESPONSE CATEGORY “Learning disability” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Learning disability** involves problems with one or more of the basic processes used in understanding or in using language (spoken or written), listening, thinking, reading, writing, spelling, or solving problems in math. This may be referred to as a reading disability or math disability. In some cases a child with a learning disability can perform at grade level with special help.  PLEASE MAKE THE RESPONSE CATEGORY “READING DISABILITY” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Reading disability** is a learning disability that affects a child’s ability to read and often also affects his or her writing.  PLEASE MAKE THE RESPONSE CATEGORY “MATH DISABILITY” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Math disability** Math disability is a learning disability that affects the child’s ability to understand and solve math problems.  PLEASE MAKE THE RESPONSE CATEGORY “Attention Deficit Disorder (ADD)/ Attention Deficit Hyperactivity Disorder (ADHD)” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Attention Deficit Disorder** (ADD)/ **Attention Deficit Hyperactivity Disorder** (ADHD): ADD and ADHD are health impairments that make it hard for a child to focus and pay attention. With ADHD, a child is also often hyperactive (always on the go) and may have trouble being patient. A child may act without thinking, and struggle to sit still (more than is appropriate for his or her age).  PLEASE MAKE THE RESPONSE CATEGORY “Autism” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Autism Spectrum Disorder (ASD) or autism:** ASD or autism affects a child’s ability to communicate (verbally and nonverbally) and interact socially. A child with autism has difficulty understanding emotions and the perspective of others. The characteristics may include a lack of responsiveness to other people, facial expressions that do not seem appropriate for the situation, responding in other socially inappropriate ways, and repetitive activities and movements (such as hand-flapping or rocking). A child with autism may show resistance to change and hypersensitivity to sensory experiences such as the texture of some clothes for example. A child with autism may be advanced or gifted in one or more areas. Autism Spectrum Disorder (ASD) includes children with Asperger’s syndrome and pervasive developmental disorder (PDD).  PLEASE MAKE THE RESPONSE CATEGORY “SPEECH OR LANGUAGE DISORDER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Speech or language impairment r**efers to a communication disorder. A child with a speech disorder may have voice disorders, stutter, or have problems distinguishing sounds. Speech disorders range from difficulty with using a particular sound (for example, the “th” sound in this) to difficulty with speaking loudly. A child with a language impairment may have difficulty understanding and forming sentences, using words correctly, finding words for what she or he wants to say, or his or her ability to repeat information just heard.  PLEASE MAKE THE RESPONSE CATEGORY “Intellectual or Severe cognitive disability” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Intellectual disability (Severe cognitive disability):** A child's mental development is noticeably behind what is expected for a child of his or her age. A child with an intellectual disability also has difficulty with performing some daily life activities or functions on his or her own. A child’s learning in school is very slow and far behind other children of that age.  PLEASE MAKE THE RESPONSE CATEGORY “HEALTH IMPAIRMENT” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Health impairment** includes health issues that cause problems with strength, vitality, and alertness. A child with a health condition may function intellectually or cognitively as well as his or her peers, but have difficulty “keeping up” in general. Health impairments include problems such as epilepsy or other seizure disorder, asthma, diabetes, sickle cell anemia, or hemophilia.  PLEASE MAKE THE RESPONSE CATEGORY “PHYSICAL DISABILITY” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Physical disability** affects a child’s ability to move or balance. Disabling physical problems can include for example, cerebral palsy, amputations, bone tuberculosis, polio, and contractures (difficulty straightening a joint such as knees, elbows, and fingers).  PLEASE MAKE THE RESPONSE CATEGORY “SENSORY DISORDERS” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Sensory impairments** involve being hypersensitive (overly responsive) to touch, sound, movement, or temperature; or very under responsive to those sensory input. Sensory impairments may also involve a lack of control over what sensory information to pay attention to. A child may have an increased alertness to very small changes in the environment making it difficult to maintain attention to what she or he is supposed to be learning.  PLEASE MAKE THE RESPONSE CATEGORY “Serious Emotional Disturbance or SED” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Emotional Disturbance (ED)** involves difficulty with emotions over a long period of time that hurts a child's school performance. ED may include (a) difficulty learning that cannot be explained by other factors; (b) difficulty with interpersonal relationships (i.e., getting along) with peers and teachers; (c) behavior or feelings that do not match what is happening; d) a general mood of unhappiness or depression; and/or (e) a tendency to develop physical symptoms or fears associated with personal or school problems. Emotional disturbance includes bipolar disorder and schizophrenia. It does not apply to a child who is socially maladjusted (extreme behavior problems), unless he or she also has an emotional disturbance.  PLEASE MAKE THE RESPONSE CATEGORY “CONDUCT DISORDER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Conduct disorder** involves a pattern of behavior that is frequently defiant, angry, hostile, and disrespectful, and disrupts child’s normal functioning. Before the age of ten, a child exhibiting these negative behaviors is usually diagnosed with oppositional defiant disorder. If behavioral symptoms after age ten are not severe, a child may also be diagnosed with oppositional defiant disorder.  PLEASE MAKE THE RESPONSE CATEGORY “Panic Disorder” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Panic Disorder** involves the sudden onset of several different physical signs, such as rapid heart rate, shaking, sweating, nausea, dizziness, and difficulty breathing when the child is not in danger. A panic disorder may make a child think that something horrible is about to happen.  PLEASE MAKE THE RESPONSE CATEGORY “Anxiety Disorder” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Anxiety Disorders:** A child who has an anxiety disorder worries much more than other children and may worry all the time. She or he may worry about nothing in particular or themselves, other’s safety, her or his health, and/or the world. She or he often has physical signs of anxiety such as headache, abdominal pain, cramps, diarrhea, vomiting, and dizziness. Anxiety disorders include generalized anxiety disorder, posttraumatic stress disorder (PTSD), social anxiety disorder (also called social phobia), and other specific phobias that interfere with a child’s ability to function.  PLEASE MAKE THE RESPONSE CATEGORY “Obsessive Compulsive Disorder” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Obsessive Compulsive Disorder**: A child must have obsessions or compulsions or both to have this disorder, and these obsessions and/or compulsions must be disabling to the child. Obsessions are thoughts that occur over and over and cause distress. A child spends so much time on the thoughts that she or he has a hard time taking care of herself or himself or relating to others. Compulsions are acts that a child feels driven to repeat over and over, such as a need to clean or organize excessively, to keep everything the same.  PLEASE MAKE THE RESPONSE CATEGORY “EATING DISORDER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Eating disorders** may involve eating too little and an obsession with staying thin (anorexia) or binge eating (gorging food). A child may make his or herself throw-up (vomit) after binge eating and/or taking laxatives (bulimia) or a child may vomit without trying after overeating.  PLEASE MAKE THE RESPONSE CATEGORY “DEPRESSION” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Depression** is a general or pervasive mood of sadness or unhappiness. It includes feeling helpless, hopeless, and worthless. Depression lasts for many days to weeks keeping a child from functioning normally.  PLEASE MAKE THE RESPONSE CATEGORY “BIPOLAR DISORDER” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Bipolar Disorder** (also known as manic depressive disorder or manic depression) causes unusual swings in mood, energy, and activity levels in a child. This disability can make it difficult to carry out day-to-day tasks and can lead to poor decisions. The intense emotional swings are often unrelated to life events.  PLEASE MAKE THE RESPONSE CATEGORY “TOURETTE’S SYNDROME” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Tourette’s syndrome** is a nervous system disorder that involves movements or vocalizations that are repetitive and involuntary (not under the control of the child). These involuntary movements and vocalizations are called tics. Some examples include repeated facial grimaces, eye blinking, throat clearing, or grunting. Tics often get worse if a child is excited or anxious. Early symptoms are often first noticed between 3 and 9 years of age.  PLEASE MAKE THE RESPONSE CATEGORY “Traumatic Brain Injury” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  **Traumatic Brain Injury (TBI**) is an injury to the brain from an impact to the head such as a bad fall or a car accident. A TBI makes it hard for a child to learn and may affect day to day functioning. TBI applies to open or closed head injuries that lead to difficulties in one or more areas, such as understanding; memory; attention; reasoning; abstract thinking; judgment; problem-solving; language; sensory, perceptual, and motor abilities; social behavior; physical functions; information processing; and speech. The term does not apply to brain injuries that are there or that occur at birth, or that grow worse over time. |

|  |
| --- |
| **ASK IF F09=1-20 OR IF F09=99** |
| CFNAME=Child’s first name; |
| **IF F09=1-20 INSERT ITEM TEXT; IF F09 = 99 INSERT TEXT ENTERED AT F09\_specify** |

**F13B.** How old was {CFNAME} when {he/she} received the diagnosis or diagnoses?

5061303

|  |  |  |
| --- | --- | --- |
| DIAGNOSIS | AGE OF FIRST DIAGNOSIS | DON’T KNOW |
| [FILL BASED ON F09] |  |     Do not know |
|  |  |     Do not know |
|  |  |     Do not know |

|  |
| --- |
| PROGRAMMER BOX F13B  Under diagnosis, list all response options selected in f09 (i.e., for all f09=1-22 OR 99).  PROGRAMMER NOTE: PROGRAM SO EITHER An “age of first diagnosis” or the “don’t know” response is selected. can not do both. |

|  |
| --- |
| **ASK IF F09.=1-91** |
| CFNAME=Child’s first name; |
| “His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |
|  |

**F14.** Is {CFNAME} now taking any prescription medicine for the condition related to any of {his/her} diagnosis?

5061400

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| **ASK IF F09. = 4 AND F14.= 1** |
| CFNAME=Child’s first name; |

**F14a.** Is {CFNAME} now taking prescription medication for ADD or ADHD?

5061401

🔾 Yes 1 F14b

🔾 No 2 F16

NO RESPONSE M F16

|  |
| --- |
| **ASK IF F14a.= 1** |
| CFNAME=Child’s first name; |

**F14b.** Is {CFNAME} medicated for ADD or ADHD at school, at home, or both?

5061500

🔾 At school 1

🔾 At home 2

🔾 Both at school and at home 3

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |

Now we would like to ask about experiences {CFNAME} and your family may have had with a 504 Plan or an Individualized Education Program (IEP).

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |
| His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

**F16.** Does {CFNAME} currently have a 504 plan based on section 504 of the Rehabilitation Act that describes accommodations to support {his/her} learning?

5061600

🔾 Yes 1

🔾 No 2

🔾 Don’t know 3

|  |
| --- |
| PROGRAMMER BOX F16  PLEASE MAKE THE ITEM TEXT “Section 504 plan” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Section 504 plan: A written plan to provide appropriate services to a child with a disability, whether or not the disability is judged to affect the child’s educational performance. Speech therapy services may often be specified as part of a Section 504 plan. |

|  |
| --- |
| **All** |
| CFNAME=Child’s first name; |

**F17.** Has {CFNAME} ever had an Individualized Education Program (IEP)?

5061700

🔾 Yes 1 F18

🔾 No 2

🔾 Don’t know 3

|  |
| --- |
| **PROGRAMMER**  **IF F17 = 2, 3, or M GO TO PROGRAMMER BOX BEFORE SECTION G.** |

|  |
| --- |
| PROGRAMMER BOX F17  PLEASE MAKE THE ITEM TEXT “Individualized Education Program (IEP)” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Individualized Education Program (IEP) is a written statement for each student with a disability that sets goals for the student in school, says how progress will be measured, describes the special education and related services the school will provide, how much the student will be in the regular class with nondisabled students, and lists accommodations or modifications needed to measure what the student knows through tests. |

|  |
| --- |
| **ASK IF F17.=1** |
| CFNAME=Child’s first name; |

**F18.** Does {CFNAME} still have an IEP?

5061800

🔾 Yes 1 F20

🔾 No 2 F19a

🔾 Don’t know 3 F20

NO RESPONSE M F20

|  |
| --- |
| PROGRAMMER BOX F18  PLEASE MAKE THE ITEM TEXT “Individualized Education Program (IEP)” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Individualized Education Program (IEP) is a written statement for each student with a disability that sets goals for the student in school, says how progress will be measured, describes the special education and related services the school will provide, how much the student will be in the regular class with nondisabled students, and lists accommodations or modifications needed to measure what the student knows through tests. |

|  |
| --- |
| **ASK IF F18.=2** |
| CFNAME=Child’s first name; |
| His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

**F19A.** Why does {he/she} no longer have an IEP?

*Select all that apply.*

🞏 a. {CFNAME} no longer needs special education services 1

5061902

5061901

🞏 b. {CFNAME} met IEP goals 2

5061903

🞏 c. {CFNAME} was declassified, school says {he/she} no longer needs services 3

5061904

🞏 d. {CFNAME} is no longer eligible, doesn’t qualify 4

5061905

* e. School doesn’t have the programs {CFNAME} needs …………………………... 5

5061906

🞏 f. I don't want {CFNAME} in special education 6

5061907

🞏 g. {CFNAME} did not want to be in special education 7

5061908

🞏 h. {CFNAME} now has a 504 Plan 8

5061909

🞏 i. Other 99

Specify (STRING (50))

NO RESPONSE M

|  |
| --- |
| **PROGRAMMER**  **FOR ANY RESPONSE AT F19, GO TO PROGRAMMER BOX AFTER F28.** |

|  |
| --- |
| **ASK IF F18.=1.** |
| CFNAME=Child’s first name; |

**F20.** In the last 12 months, has there been an IEP meeting about {CFNAME}'s special education program or services?

5062000

🔾 Yes 1 F21

🔾 No 2 F23

🔾 Don’t know 3 F23

NO RESPONSE M F23

|  |
| --- |
| **ASK IF F20.=1** |

**F21.** Did you or another adult in the household go to the meeting?

5062100

🔾 Yes 1

🔾 No 2

🔾 Don’t know 3

|  |
| --- |
| **ASK IF F20.=1** |
| CFNAME=Child’s first name; |

**F22.** Did {CFNAME} go to the meeting?

5062200

🔾 Yes 1

🔾 No 2

🔾 Don’t know 3

|  |
| --- |
| **ASK IF F18.=1** |
| CFNAME=Child’s first name; |

**F23.** Who came up with the goals on {CFNAME}'s IEP?

*Select all that apply.*

5062301

🞏 a. School staff 1

5062302

* b. Me or other parent/family member ………………………………………………... 2

5062303

🞏 c. {CFNAME} 3

🞏 d. Another person 4

5062304

5062305

🞏 e. Don’t know 5

Specify (STRING (50))

NO RESPONSE M F25

|  |
| --- |
| **ASK IF F18.=1** |
| CFNAME=Child’s first name; |

**F24.** Of the people who came up with the IEP goals, who came up with the most goals?

5062400

*Select one only.*

🔾 School staff 1

🔾 Me or another parent/family member 2

🔾 {CFNAME} 3

🔾 Another person 4

Specify (STRING (50))

* Not applicable; everyone came up with the same number of goals. 5
* Don’t know. 6

|  |
| --- |
| PROGRAMMER BOX F24  If only one choice selected in F23 (1 OR 2 OR 3 OR 4), skip to F25. Do not ask F24.  Else if multiple persons are selected on F23 (1 or 2 or 3 or 4), administer F24, but only display those response options that were selected on F23. |

|  |
| --- |
| **ASK IF F18.=1** |
| CFNAME=Child’s first name; |
| His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

**F25.** How active was {CFNAME} in developing {his/her} IEP? For example, did {CFNAME} participate in discussions about {his/her} disability, {his/her} strengths, {his/her} needs, the accommodations that would help {him/her}achieve in class, {his/her}goals for the future, and the goals {he/she}feels are most important for {him/her}to work on?

5062500

*Select one only.*

🔾 Very active; took a leadership role in IEP development 1

🔾 Active; participated regularly in IEP development 2

🔾 Somewhat active; participated occasionally in IEP development 3

🔾 Not active; did not participate in IEP development 4

🔾 Don’t know 5

|  |
| --- |
| **ASK IF F18.=1** |
| CFNAME=Child’s first name; |
| His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

**F26.** Overall, how satisfied are you with the progress {CFNAME} has made towards {his/her} IEP goals this year? Are you...

5062600

*Select one only.*

🔾 Completely satisfied 1

🔾 Very satisfied 2

🔾 Fairly satisfied 3

🔾 Somewhat dissatisfied 4

* Very dissatisfied. 5

|  |
| --- |
| **ASK IF F18.=1** |
| CFNAME=Child’s first name; |
| His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

**F27.** During the past 12 months, has {CFNAME} received any services to help {him/her}  with academics, social and emotional skills, or behavior that are paid for by you or someone other than the school?

5062800

🔾 Yes 1

🔾 No 2

🔾 Don’t Know 3

|  |
| --- |
| **PROGRAMMER BOX**  PLEASE MAKE THE RESPONSE CATEGORY “OTHER THAN THE SCHOOL” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  *Other than the school*  could include community mental health, your medical insurance, free clinics, other family members, or the military. |

|  |
| --- |
| **ASK IF F18.=1** |
| CFNAME=Child’s first name; |
| His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

**F28.** How often have you discussed the following topics with staff at {CFNAME}'s school about how

{CFNAME} can...

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | Never | Rarely | Sometimes | Often | Very often |
| 5062801 | 1. Develop self-determination and self-advocacy skills? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5062802 | 1. Expand social and community support networks? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5062803 | 1. Learn “soft” employment skills (such as appropriate dress, working well in a group, following instructions)? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5062804 | 1. Practice skills in handling money such as counting money, making change, saving money for a desired object or event? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5062805 | 1. Prepare for change? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
|  |
| **All**  **SECTION G ITEMS WILL LOOP WITH SHIFTING FILLS TO CAPTURE RESPONDENT AND/OR CHILD’S MOTHER AND FATHER (IF THEY LIVE IN THE HOUSEHOLD) BASED ON RESPONSES TO B02g (mother’s relationship to CFNAME), B02h (marital status), AND B03a, B04a, B05a (spouse or partner in the household). PROGRAM ITEMS WILL INCLUDE A LOOP FOR EACH SCENARIO POSSIBILITY.** | |

**G. EMPLOYMENT AND INCOME**

Now we have a few questions about jobs and work people in the household do for a living.

|  |
| --- |
| Programmer Box G02  If (B02f=1 or2) and (B02j=2)  ELSE  If (B02f NE 1 or 2) and (B02j=2) and (B02H = 1 or 5 or 6), GO TO G02.  loop g02 through g12 for any member of household with b02f = 1 or b02f = 2 and if no household member has b02f = 1 and no household member has b02f = 2 for respondent and household member linked to respondent through marital status (b03b, b04b, b05a).  **Include this loop even if G02 is missing.**  If (B02f=1 or 2) and B02j= 1  ELSE  IF (B02f NE 1 or 2 and B02j = 1 and (B02h=1 or 5 or 6) and household member linked to the respondent through marital status (B03B, B04B, and B05a), GO TO G07. |
| G02 FILL: When the respondent is answering about himself, FILL "Were you", ELSE FILL "Was [HH#FNAME] {HH#LNAME] |

**G02.** During the past week, [were you/was [HH#FNAME] [HH#LNAME]] on leave or vacation from a job?

5070200

🔾 Yes 1 G07

🔾 No 2 G03

NO RESPONSE M G03

|  |
| --- |
| **ASK IF B02J = 2 AND G02 = 2** |
| **G03 FILL: When the respondent is answering about himself, FILL "Have you", ELSE FILL "Has [HH#FNAME] {HH#LNAME]** |

**G03.** [Have you/Has [HH#FNAME] [HH#LNAME]] been actively looking for work in the past 4 weeks?

5070300

🔾 Yes 1 G04

🔾 No 2 G05

NO RESPONSE M G05

|  |
| --- |
| PROGRAMMER BOX  please note hh#fname and hh#lname will be filled according to first and last names filled in G02. |

|  |
| --- |
| **ASK IF B02J = 2 AND G02 = 2 AND G03 = 1** |
| **G04 FILL: When the respondent is answering about himself, FILL "Have you", ELSE FILL "Has [HH#FNAME] {HH#LNAME]** |

**G04. What [have you/has [HH#FNAME] [HH#LNAME]] been doing in the past 4 weeks to find work?**

*Select all that apply.*

5070401

🞏 a. Checked with public employment agency 1

5070402

🞏 b. Checked with private employment agency 2

5070403

🞏 c. Checked with employer directly/sent resume 3

5070404

🞏 d. Checked with friends and relatives 4

5070405

* e. Placed or answered ads/sent resume/applications 5
* f. Contacted school/university employment center 6

5070407

5070406

🞏 g. Checked a union register or professional register 7

🞏 h. Attended a job training 8

5070409

5070408

🞏 i. Read want-ads/internet search 9

5070410

🞏 j. Something else 10

Specify (STRING (50))

🞏 k. Don’t know 11

5070411

|  |
| --- |
| PROGRAMMER BOX  please note hh#fname and hh#lname will be filled according to first and last names filled in G02. |

|  |
| --- |
| **SOFT CHECK: IF G04=10 (Something else) is checked and the specify other text is BLANK: “[What {have you/has [HH#FNAME] [HH#LNAME]} been doing the past 4 weeks to find work]?** |

|  |
| --- |
| **ASK IF B02J = 2 AND G02 = 2** |
| **G05 FILL: When the respondent is answering about himself, FILL " you", ELSE FILL "was [HH#FNAME] {HH#LNAME]** |

**G05.** Could {you/**[HH#FNAME] [HH#LNAME]}** have taken a job last week if one had been offered?

5070510

🔾 Yes 1

🔾 No 2

🔾 NO RESPONSE M

|  |
| --- |
| **ASK IF G03. = 2** |
| **G05 FILL: When the respondent is answering about himself, FILL "were you", ELSE FILL "was [HH#FNAME] {HH#LNAME]** |

**G06.** What was [HH#FNAME] [HH#LNAME] doing most of last week? Would you say…

5070500

🔾 Keeping house or caring for children 1

🔾 Going to school 2

🔾 Retired 3

🔾 Unable to work 4

🔾 Something else? 91

NO RESPONSE M

|  |
| --- |
| **ASK IF G05a. = 91** |
| **G06 FILL: When the respondent is answering about himself, FILL "you were", ELSE FILL "[HH#FNAME] {HH#LNAME] was"** |

**G06\_other.** Please enter what [HH#FNAME] [HH#LNAME] doing most of last week.

PROGRAMMER: INSERT TEXT BOX

5070600

(STRING (100)) G12a

NO RESPONSE M

|  |
| --- |
| If (B02f=1 or 2) and B02j= 1  ELSE  IF (B02J=2 and G02=1)  ELSE  IF (B02f NE 1 or 2 and B02j = 1 and (B02h=1 or 5 or 6) and household member linked to the respondent through marital status (B03B, B04B, and B05a), GO TO G07.  ELSE go to G12a |
| **G07 FILL: When the respondent is answering about himself, FILL "do you", ELSE FILL "does [HH#FNAME] {HH#LNAME]"** |

**G07.** How many jobs [do you/does [HH#FNAME] [HH#LNAME]] have now?

5070700

|\_\_\_|\_\_\_| Number of jobs

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX  please note hh#fname and hh#lname will be filled according to first and last names filled in G02 for b02j = 2 and according to b01 for b02j = 1. |

|  |
| --- |
| **ASK IF B02J. = 1 OR (BO2J = 2 AND G02=1)** |
| **G08 FILL: When the respondent is answering about himself, FILL "do you", ELSE FILL "does [HH#FNAME] {HH#LNAME]"** |

**G08.** About how many total hours per week does [HH#FNAME] [HH#LNAME] usually work for pay?

5070800

|\_\_\_|\_\_\_| Enter number of weekly hours

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX  please note hh#fname and hh#lname will be filled according to first and last names filled in G02 for b02j = 2 and according to b01 for b02j = 1. |

|  |
| --- |
| **ASK IF B02j. = 1** |

**G09.** What {is/was} the title of this job?

5071001

PROGRAMMER: INSERT TEXT BOX

Enter job title (STRING (100))

|  |
| --- |
| **G11 FILL: When the respondent is answering about himself, FILL "you", ELSE FILL "[HH#FNAME] {HH#LNAME]"** |

**G11.** What did [HH#FNAME] [HH#LNAME] do in that job?

PROGRAMMER: INSERT TEXT BOX

5071111

Enter job duties (STRING (100))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF G11 = BLANK, **Your response is important for this survey. Please provide an answer for this question.** |

|  |
| --- |
| PROGRAMMER BOX  please note hh#fname and hh#lname will be filled according to first and last names filled in G02 for b02j = 2 and according to b01 for b02j = 1.  **PROGRAMMER NOTE:** AFTER THE RESPONDENT ENTERS THEIR DUTIES AND CLICKS THE “next” BUTTON, A LIST OF AVAILABLE OCCUPATIONAL CODING OPTIONS WILL APPEAR IN A POPUP WINDOW. NEXT TO EACH OPTION IS A “SELECT” BUTTON THAT WILL ENABLE A POPUP MODAL. THIS MODAL BOX WILL ASK THE USER TO CONFIRM THEIR RESPONSE BY CLICKING THE “KEEP ANSWER AND CONTINUE” BUTTON. ONCE THAT IS CLICKED THE SURVEY WILL CONTINUE WHILE THE “CHANGE ANSWER” BUTTON WILL JUST CLOSE THE MODAL BOX. |

|  |
| --- |
| **ASK IF B02J. = 1 OR (BO2J = 2 AND G02=1)** |
| **G012a FILL: When the respondent is answering about himself, FILL "do you", ELSE FILL "does [HH#FNAME] {HH#LNAME]"** |

**G12a.** Since {CFNAME} was born}, {have you/has {[HH#FNAME] [HH#LNAME]}} served on active duty in the U.S. Armed Forces, military Reserves, or National Guard?

Active duty does not include training for the Reserves or National Guard, but does include activation, for

example, for the war in Afghanistan.

5071203

🔾 Yes 1

🔾 No 2

🔾 NO RESPONSE M

|  |
| --- |
| **ASK IF G12a. NE 2** |
| **G12B FILL: When the respondent is answering about himself, FILL "you", ELSE FILL " [HH#FNAME] {HH#LNAME]"** |
| **G12b [he/she] FILL: When the respondent is answering about himself, FILL "you", ELSE FILL " he or she"** |

**G12b.** {Are you/Is {[HH#FNAME] [HH#LNAME]} currently on active duty in the U.S. Armed Forces, military Reserves, or National Guard?

Active duty does not include training for the Reserves or National Guard, but DOES include

activation, for example, for the war in Afghanistan.

5071204

🔾 Yes 1

🔾 No 2

🔾 NO RESPONSE M

|  |
| --- |
| **All** |

In studies like this, households are sometimes grouped according to income.

**G13.** What was the total income of all persons in your household over the past year, including salaries

or other earnings, interest, retirement, and so on for all household members?

PROGRAMMER: INSERT DROP DOWN MENU

5071300

▼

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX G13  INSERT DROPDOWN MENU WITH THE FOLLOWING CATEGORIES:  0 Select Household Income  1 $5,000 or less  2 $5,001 to $10,000  3 $10,001 to $15,000  4 $15,001 to $20,000  5 $20,001 to $25,000  6 $25,001 to $30,000  7 $30,001 to $35,000  8 $35,001 to $40,000  9 $40,001 to $45,000  10 $45,001 to $50,000  11 $50,001 to $55,000  12 $55,001 to $60,000  13 $60,001 to $ 65,000  14 $65,001 to $70,000  15 $70,001 to $75,000  16 $75,001 to $80,000  17 $80,001 to $85,000  18 $85,001 to $90,000  19 $90,001 to $95,000  20 $95,001 to $100,000  21 $100,001 to $110,000  22 $110,001 t0 $120,000  23 $120,001 to $130,000  24 $130,001 to $140,000  25 $140,001 to $150,000  26 $150,001 to $160,000  27 $160,001 to $170,000  28 $170,001 to $180,000  29 $180,001 to $190,000  30 $190,001 to $200,000  31 $200,001 to $225,000  32 $225,001 to $250,000  33 $250,001 to $275,000  34 $275,001 to $300,000  35 $300,001 to $325,000  36 $325,001 to $350,000  37 $350,001 to $375,000  38 $375,001 to $400,000  39 $400,001 to $425,000  40 $425,001 to $450,000  41 $450,001 to $475,000  42 $475,001 to $500,000  43 $500,001 or more |

|  |
| --- |
| **All** |
| **CFNAME=Child’s first name** |

**G14.** Which of the following have you or members of your household done to financially prepare for **{CFNAME}**'s education after high school?

*Select all that apply.*

5071401

🞏 a. Started a savings account 1

5071402

🞏 b. Bought an insurance policy 2

5071403

🞏 c. Bought U.S. savings bonds 3

5071404

🞏 d. Made investments in stocks or real estate 4

5071405

🞏 e. Set up a college investment fund (such as a mutual fund) 5

5071406

🞏 f. Started working another job and/or more hours 6

5071407

🞏 g. Established another form of savings 7

🞏 h. Planned to re-mortgage your property or take out a home equity loan 8

5071411

5071412

🞏 i. Had your child put aside earnings 9

5071413

🞏 j. Participated in a state-sponsored college savings program (such as a 529 plan) 10

5071414

🞏 k. Other (please specify) 11

Specify (STRING (50))

5071415

🞏 l. Have not started planning yet 12 H01

5071416

🞏 m. Do not expect child to receive any education after high school 13 H01

NO RESPONSE M H01

|  |
| --- |
| **SOFT CHECK: IF G14\_14 (Other) is checked and the specify other text is BLANK: “Please specify what other thing you have done to financially prepare for {CFNAME}'s education after high school?** |

|  |
| --- |
| PROGRAMMER BOX G14  If G14 (item #15) OR G14 (item  #16) is checked, disable the response options 1-14. |

|  |
| --- |
| **ASK IF G14.<=11** |
| **[CFNAME]'s** = Child’s first name |

**G15.** About how much money has been set aside for [CFNAME]'s future educational needs?

5071500

*Select one only.*

🔾 None 1

🔾 $2,000 or less 2

🔾 $2,001‐$5,000 3

🔾 $5,001‐$10,000 4

🔾 $10,001‐$15,000 5

🔾 $15,001‐$25,000 6

🔾 $25,001‐$35,000 7

🔾 $35,001‐$60,000 8

* More than $60,000. 9

|  |
| --- |
| **All** |
| **CFNAME=Child’s first name** |
| **“His/her”; ”he/she”; “himself/herself”** fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

**H. MOBILITY**

The next questions ask about how often {CFNAME} has moved since {CFNAME} started kindergarten.

**H01.** How long has {CFNAME} lived in {his/her} current residence?

5080100

🔾 Less than 1 year 0

🔾 1 year 1

🔾 2 years 2

🔾 3 years 3

🔾 4 years 4

🔾 5 years 5

🔾 6 years 6

🔾 7 years 7

* 8 years. 8
* 9 years 9
* 10 years 10
* 11 years 11
* 12 years 12
* 13 years 13
* 14 years 14
* 15 years 15
* More than 15 years 16
* Don’t know 17

NO RESPONSE M

|  |
| --- |
| **PROGRAMMER BOX H01**  Insert dropdown menu including options from < 1 years to > 15 years. Hide any years greater than the child’s age (as calculated from A09 or A09a). |

|  |
| --- |
| **If H01< 5, ASK H02, ELSE GOTO H03a** |
| CFNAME=Child’s first name |

**H02.** Since {CFNAME} started kindergarten, how many different places has {CFNAME} lived for four months or more?

5080200

▼

Select number of places

NO RESPONSE M

|  |
| --- |
|  |

|  |
| --- |
| **PROGRAMMER BOX H02**  Insert dropdown menu including options from 0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10 or more, Don’t know |

|  |
| --- |
| **All** |
| CFNAME=Child’s first name |
| “His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

**H03A.** How many times has {CFNAME} changed schools since {he/she} started kindergarten as a

5080301

result of grade promotion?

▼

Select number of times

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX H03a  PLEASE MAKE THE ITEM TEXT “GRADE PROMOTION” CONTAIN THE HYPERLINK TO THE BELOW HELP TEXT:  Grade promotion would include moving to a different school because the prior school did not teach students in higher grades, such as a move from an elementary school to a middle school or from a middle school to a junior high school in the same district.  Insert dropdown menu including options from 0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10 or more, Don’t know |

|  |
| --- |
| **All** |
| CFNAME=Child’s first name |
| “His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

**H03B.** How many times has {CFNAME} changed schools since {he/she} started kindergarten for a reason other than grade promotion?

5080302

▼

Select number of times

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX H03b  Insert dropdown menu including options from 0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10 or more, Don’t know |

|  |
| --- |
| **All** |
| CFNAME=Child’s first name |
| “His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

**H04.** Is {CFNAME} attending a different school this year than the one {he/she}attended last school year?

5080400

🔾 Yes 1

🔾 No 2

|  |
| --- |
| **All** |
| CFNAME=Child’s first name |
| “His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

|  |
| --- |
| **All** |

**H05. Will {CFNAME} be attending [SCHNAME] next year?**

🔾 Yes 1

5010056

🔾 No 2 H06

|  |
| --- |
| **H05=2** |

5010057

**H06. What is the name of the school you expect (CFNAME) to be attending next year?**

501058

1 School Name: [ ] (STRING 255)

2 School Street address1: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 255)

5010060

5010059

3 School Street address2: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 255)

5010061

4 School City: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 255)

5 School State: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]

5010062

6 School Zip code: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 5)

5010063

🞏 Don’t know

**I. PARENTAL DISCUSSIONS WITH CHILD**

The final section asks about your expectations for {CFNAME}'s future and conversations you may have had with {CFNAME} about school or {his/her} future plans.

**I01.** Since the start of this school year, how often have you discussed the following with {CFNAME}?

Please select one response per row.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  | Never | Rarely | Sometimes | Often | Very often |
| 5090101 | 1. Selecting a math course to take next school year | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5090102 | 1. Selecting courses other than math to take next school year | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5090103 | 1. Preparing for college entrance exams such as the ACT, SAT, or ASVAB | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5090104 | 1. Applying to college or other schools after high school | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 5090105 | 1. Careers {CFNAME} might be interested in | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| **All** |
| CFNAME=Child’s first name |
| “His/her”; ”he/she”; “himself/herself” fills will be determined by the answer to A08: if A08=1 all gender fills are masculine, if A08=0 all gender fills are feminine |

**I02.** How far in school do you expect {CFNAME} to go? Would you say you expect {he/she} …

5090200

*Select one only.*

🔾 Won’t finish high school? 1

🔾 Will graduate from high school, but won’t go any further? 2

🔾 Will go to a technical or trade school after high school? 3

🔾 Will attend college? 4

🔾 Will graduate from college? 5

🔾 Will attend a higher level of school after graduating from college? 6

🔾 You don’t know? 7

|  |
| --- |
| **ALL** |

**I03. Finally, a very important part of this study is learning about how students do over time, so we want to make sure we are able to get in touch with you and your family next year. To help us be able to do that, please provide the name, email address, street address, and telephone number of a relative or close friend who does not live with you, but will know how to get in touch with you.**

5010041

**a. First name**

5010042

**b. Last name**

5010043

**c. Primary email**

5010044

**d. Primary phone**

5010045

**e. Street 1**

5010046

**f. Street 2**

5010047

**g. City**

5010048

**h. State**

**i. Zip code**

5010049

|  |
| --- |
| **IF INCENTIVE\_FILL NE $10-50, GO TO THANK** |
| **IF INCENTIVE FILL = $10- 50, GO TO INCENTIVE\_ADDRESS.** |

**INCENTIVE\_ADDRESS.**

You’re finished! Last thing we need to know is where you want us to send the ${10-50} check for completing the survey. If the address below is right, press Next. If this address below is not right, please fix it, and then press Next.

5010050

1 Name: [ ] (STRING 255)

5010051

2 Street address1: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 255)

5010052

3 Street address2: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 255)

5010053

4 City: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 255)

5010054

5 State: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_]

5010055

6 Zip code: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](STRING 5)

|  |
| --- |
| **All** |

**THANK.** Thank you very much for participating in MGLS:2017! We appreciate you taking the time to complete the survey. Press “Submit” to complete and close the survey.

**(SUBMIT)**

## Appendix OFT1-U3. Mathematics Teacher Survey Specifications

|  |
| --- |
| *NCES is authorized to conduct MGLS:2017 by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543) and to collect students’ education records from education agencies or institutions for the purposes of evaluating federally supported education programs under the Family Educational Rights and Privacy Act (FERPA, 34 CFR §§ 99.31(a)(3)(iii) and 99.35).  The data are being collected for NCES by RTI International, a U.S.-based nonprofit research organization. All of the information you provide may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (20 U.S.C. §9573 and 6 U.S.C. §151). The collected information will be combined across respondents to produce statistical reports.*  *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 1850-0911. Approval expires 09/30/2018. The time required to complete this information collection is estimated to average approximately 20 minutes for the teacher-level information and 10 minutes per study student, including the time to review instructions, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate, suggestions for improving this survey, or any comments or concerns regarding the status of your individual submission of this survey, please write directly to: The Middle Grades Longitudinal Study of 2017-18 (MGLS:2017), National Center for Education Statistics, Potomac Center Plaza, 550 12th St, SW, Room 4002, Washington, DC 20202.* |

|  |
| --- |
| ALL |

A00a. SURVEY INFORMATION

You have received an invitation to complete this questionnaire because one or more students you teach have been selected to participate in the MGLS:2017 field test study. To enhance the information provided by your students and their parents, we need you to complete this survey.

After confirming whether you teach the students selected for MGLS:2017, the survey will ask questions about your classroom(s) and about specific student(s) who are participating in our study. The survey will also ask some background questions about yourself and your school. The classroom- and student-specific portions of the survey will be repeated if you teach multiple study students, as applicable.

**Taking part in the study is voluntary, and you can skip questions you do not want to answer. We realize you are very busy, but urge you to complete the questionnaire as completely and accurately as possible. Your answers are very important to the study’s success. You will receive $20 for completing the parts about you and your classroom, plus an additional $7 for each individual student about whom you answer questions.**

**NOTE: there are [FILL NUMBER OF STUDENTS] MGLS:2017 student[s] that we will ask you to confirm.**

*Please click below to start the survey.*

|  |
| --- |
| PROGRAMMER BOX 1  **Next** |

|  |
| --- |
| PROGRAMMER BOX 1a  “Log out” should be in the top left corner of each screen, as in the math assessment. |

**A. Introduction**

|  |
| --- |
| ALL |

**Notes to programmers:**

1. **Question numbers appear in the specs for programming purposes (i.e., routing, skip logic, etc.) but will be displayed in small font in upper right corner of screen.**
2. **All questions will generally have the same soft check message**

**Time Out error message [if idle more than 30 minutes]:**

We’re very sorry!

Your session has been idle for more than 30 minutes. Please close this window and then log back into the survey.

|  |
| --- |
| PROGRAMMER BOX 1b  **Next** |

User Name:

Password: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Welcome back [if respondent returning to online survey for second or higher order time]:**

Welcome back [teacher’s first name], thanks for participating in our survey. Here are a few things to remember before you begin…

*You can stop the survey at any time by clicking the 'Logout' link at the upper left corner of the screen. When you log in again, you can resume where you left off.”*

**(IF CASE INDICATED AS ALREADY COMPLETE)**

Our records indicate that you have finished your survey. Thank you for your participation; you do not need to log in again.

If you think you are receiving this message in error, or have questions about the study, please call 1-855-500-1432 or send an email to [MGLS@rti.org](mailto:MGLS@rti.org) and include the contact information you were provided.

|  |
| --- |
| ALL |

A00c. How to Complete the Survey

Thank you very much for participating! Before you get started, here are a few helpful hints.

* To answer the questions, select the answer on the screen that matches your response.
* Answer each question as accurately as possible; if you need to estimate an answer that is okay.
* Press the "Next" button to save your responses and move forward.
* Press the "Previous" button to go back.
* Some questions offer text to help you understand the question or the response options. Click on the HELP icon at the top of the screen or the help iconhttps://hatteras4stage.rti.org/MGLSMathTeacher/icons/help.png in the survey to see the help text.
* If you need to take a break and leave the interview at any time, click the "LOG OUT" button in the top left-hand corner of your screen. When you log back in, the survey will start from the screen you were on when you logged out.
* To protect your data, you will be logged off if you are idle for more than 30 minutes.

|  |
| --- |
| PROGRAMMER BOX 2  **Next** |

**A00C2. Welcome to the Middle Grades Longitudinal Study of 2017-18 (MGLS:2017) Math Teacher Questionnaire. This is the information we have on record about your school, math classes, and name. Press “Next” to continue**.

School: [SCHOOL NAME]

Teacher: [TEACHER NAME]

Class(es): [CLASS NAME(S), PERIOD(S)]

SCINTRO

This first section will ask you to confirm whether you teach math to the [student/students] selected for MGLS:2017.

|  |
| --- |
| ALL |
| SC01 WILL BEGIN A SHORT CONFIRMATION LOOP WHICH IS TO INCLUDE AN ITERATION FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT. |

SC01. Do/did you teach math to [FILL PRELOADED STUDENT NAME] during this school year (2016-2017)?

🔾 Yes, and I am the current math teacher for [FILL PRELOADED STUDENT NAME] 1 [SKIP TO SC01b]

🔾 Yes, although I am not the current math teacher for [FILL PRELOADED STUDENT NAME] 2 [SKIP TO SC01a]

🔾 No 3 [SKIP TO SC02]

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF SC01=NO RESPONSE; **Please provide an answer to this question and then click “Next”.** |

|  |
| --- |
| SC01 = 2 |

**SC01a. In what month and year did you last teach math to [FILL PRELOADED STUDENT NAME]?**

* Month
* Year

|  |
| --- |
| Go to SC01b. |

|  |
| --- |
| SC01 = 1,2 |

**SC01b. Do/did you teach [FILL PRELOADED STUDENT NAME] in [FILL PRELOADED CLASS/PERIOD]?**

🔾 Yes 1 [SEE BELOW]

🔾 No 2 [SKIP TO SC01c]

NO RESPONSE M [SKIP TO SC01c]

|  |
| --- |
| IF SC01b=1 then do:  IF SC01 HAS NOT YET BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, LOOP BACK TO SC01 AND ADMINISTER FOR THE NEXT PRELOADED STUDENT.  ELSE IF SC01 HAS BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, AND SC01 in (1,2) FOR AT LEAST ONE STUDENT, GO TO THE PROGRESS SUMMARY SCREEN (IMMEDIATELY PRECEDING A01).  ELSE TEACHER IS INELIGIBLE; GOTO SC05. |

|  |
| --- |
| SC01b in (2,M) |
| EACH PRELOADED CLASS/PERIOD ASSOCIATED WITH THE TEACHER RESPONDENT WILL BE LISTED AS A RESPONSE OPTION FOR THIS QUESTION.  EACH CLASS/PERIOD SELECTED BY THE RESPONDENT WILL THEN BE ASKED ABOUT IN SECTION A. |

**SC01c. In which of the following classes do/did you teach [FILL PRELOADED STUDENT NAME]?**

* First preloaded class/period
* Second preloaded class/period
* Third preloaded class/period
* Etc.
* Etc.
* Other (specify)

|  |
| --- |
| IF SC01 HAS NOT YET BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, LOOP BACK TO SC01 AND ADMINISTER FOR THE NEXT PRELOADED STUDENT.  ELSE IF SC01 HAS BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, AND SC01=YES FOR AT LEAST ONE STUDENT, GO TO THE PROGRESS SUMMARY SCREEN (IMMEDIATELY PRECEDING A01).  ELSE TEACHER IS INELIGIBLE; GOTO SC05.  Hard check: You have selected "Other", but have not provided a response to the "Please specify" prompt."; |

|  |
| --- |
| SC01 =32 |
| FILL PRELOADED STUDENT FIRST NAME AND LAST NAME |

SC02. Did anyone else at your school teach math to [FILL PRELOADED STUDENT NAME] during this school year (2016-2017)?

🔾 Yes 1 [SKIP TO SC03]

🔾 No 2 [SEE BELOW]

NO RESPONSE M [SEE BELOW]

|  |
| --- |
| SOFT CHECK: IF SC02=NO RESPONSE;  Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue. |
| PROGRAMMER BOX 12a  If SC02 in (2, M) then do:  IF SC01 HAS NOT YET BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, LOOP BACK TO SC01 AND ADMINISTER FOR THE NEXT PRELOADED STUDENT.  ELSE IF SC01 HAS BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, AND SC01 in (1,2) FOR AT LEAST ONE STUDENT, GO TO THE PROGRESS SUMMARY SCREEN (IMMEDIATELY PRECEDING A01).  ELSE TEACHER IS INELIGIBLE; GOTO SC05. |

|  |
| --- |
| SC02 = 1 |
| FILL PRELOADED STUDENT NAME |

SC03. You indicated that [FILL PRELOADED STUDENT NAME] has a different math teacher. What is the name of this student’s math teacher?

NAME (STRING (50))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF SC03=NO RESPONSE; Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue. |
| IF SC01 HAS NOT YET BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, LOOP BACK TO SC01 AND ADMINISTER FOR THE NEXT PRELOADED STUDENT.  ELSE IF SC01 HAS BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, AND SC01 in (1,2) FOR AT LEAST ONE STUDENT, GO TO THE PROGRESS SUMMARY SCREEN (IMMEDIATELY PRECEDING A01).  ELSE TEACHER IS INELIGIBLE; GOTO SC05. |

**SC05. Thank you for taking the time to answer our questions! Since you are not the math teacher for any MGLS:2017 students, it is not necessary for you to answer any other questions.**

**Press “Finish” to finish.**

**[Programmer Note: Exit and Status.]**

|  |
| --- |
| PROGRESS SUMMARY SCREEN |
| THIS SCREEN APPRISES THE RESPONDENT OF THEIR PROGRESS BY LISTING THE CLASSES/STUDENTS FOR WHOM THE RESPONDENT HAS ALREADY ANSWERED QUESTIONS (IF APPLICABLE), AS WELL AS THE REMAINING CLASSES/STUDENTS FOR WHOM THE RESPONDENT WILL STILL BE ASKED QUESTIONS.  Now we have some additional questions about the classes and students you are currently teaching or have taught this school year (2016-2017).    **We have some questions for you about the following:**   * [STUDENT NAME FILL 1, CLASS NAME 1] * [STUDENT NAME FILL 2, CLASS NAME 2] * [STUDENT NAME FILL 3, CLASS NAME 3] * [STUDENT NAME FILL 4, CLASS NAME 4] |
| GO TO A01. |

[ClassName, Period]

|  |
| --- |
| ALL ELIGIBLE RESPONDENTS (SC01 = 1 or 2 FOR AT LEAST ONE STUDENT) |
| [ASK ONCE FOR EACH CLASSROOM SELECTED IN SC01b/SC01c.] |
| CLASS NAME, PERIOD = FILL FROM PRELOAD |

A01. {This section asks specific questions}/ {Now we would like to know} about your [CLASS NAME, PERIOD] class.

How many students are enrolled in this class?

6010101

STUDENTS

(RANGE 1-50)

NO RESPONSE M

|  |
| --- |
| HARD CHECK: IF A01 = 0. **You entered that 0 students are in this class. Adjust the number of students then click the “Next” button.** |
| SOFT CHECK: IF A01 > 50; **You entered that [A01 RESPONSE] students are in this class. Select “Edit”to adjust the number of students or select “Next” if this is correct.** |

|  |
| --- |
| PROGRAMMER BOX 3  If this is the first iteration for the class, display: “This section asks specific questions about your [class name, PERIOD] class.  if this is a subsequent class, display “Now we would like to know about your [class name, PERIOD] class”  PROGRAMMER NOTE: RANGE (1-50)  PROGRAMMER NOTE: TEACHERS SHOULD COMPLETE SURVEY SECTIONS A and b. THEN TSR ITEMS FOR STUDENTS IN THE CLASS FOR WHICH THEY ANSWERED SECTIONS A and B in the survey. IF MORE THAN ONE CLASSROOM, THEN LOOP SURVEY SECTIONS A-B FOR EACH CLASSROOM. WITHIN EACH CLASSROOM LOOP, INCLUDE TSRs FOR THAT CLASSROOM. After all classrooms and tsrs within are complete, move to sections c and d. |

|  |
| --- |
| ALL |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |
| CLASS NAME, PERIOD = FILL FROM PRELOAD |

A01a. Please provide some information about your [CLASS NAME, PERIOD] class.

6010102

Which of the following best describes this mathematics course?

🔾 Grade 6 general mathematics 1

🔾 Grade 6 honors mathematics 2

🔾 Grade 6 remedial mathematics 3

🔾 Grade 7 general mathematics 4

🔾 Grade 7 honors mathematics 5

🔾 Grade 7 remedial mathematics 6

🔾 Grade 8 general mathematics 7

🔾 Grade 8 honors mathematics 8

🔾 Grade 8 remedial mathematics 9

🔾 Introduction to algebra/ pre-algebra 10

🔾 Algebra 11

🔾 Algebra II 12

🔾 Geometry 13

🔾 Other 99

Specify (STRING (120))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF A01a=99 and no response entered; You have selected "Other", but have not provided a response to the "Please specify" prompt." |

|  |
| --- |
| ALL |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |
| CLASS NAME, PERIOD = FILL FROM PRELOAD |

A02. What percentage of students in this [CLASS NAME, PERIOD] class…

**If none, enter “0.”**

PROGRAMMER: RANGE FOR GRID IS 0 – 100 for each.

|  |  | PERCENTAGE |
| --- | --- | --- |
| 6010201 | a. Are below grade level in their mathematics skills? |  |
| 6010202 | b. Are about on grade level in their mathematics skills? |  |
| 6010203 | c. Are above grade level in their mathematics skills? |  |

|  |
| --- |
|  |
| SOFT CHECK: IF A02a+A02b+A02c NE 100; **Please make sure your answers add to 100 percent.**  SOFTCHECK: If letter, decimal, or special character entered; Please only enter whole numbers between 0-100. |

|  |
| --- |
| ALL |

A03. At this point in the school year, how would you rate the behavior of the students in this [CLASS NAME, PERIOD] class?

6010300

🔾 Group misbehaves very frequently and is almost always difficult to handle. 1

🔾 Group misbehaves frequently and is often difficult to handle. 2

🔾 Group misbehaves occasionally. 3

🔾 Group behaves well. 4

🔾 Group behaves exceptionally well. 5

NO RESPONSE M

**[Class Name, Period]: Content and teaching practices**

|  |
| --- |
| ALL |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |
| CLASS NAME, PERIOD = FILL FROM PRELOAD |

B01. This section focuses on the content you cover in this [CLASS NAME, PERIOD] class, as well as your teaching practices.

The curriculum used for this [CLASS NAME, PERIOD] is...

*Select all that apply.*

6020101

🞏 a. Locally or district-designed 1

6020102

🞏 b. State-designed 2

6020103

🞏 c. Nationally-designed 3

6020104

🞏 d. Other 99

Specify (STRING (120))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B01=99 and no response specified; "You have selected "Other", but have not provided a response to the "Please specify" prompt." |
|  |

|  |
| --- |
| ALL |

B02. What do you use as your primary basis for instruction for this [CLASS NAME, PERIOD]class?

6020200

🔾 Textbook (Print) 1

🔾 E-book 2

🔾 District or state educational content repository 3

🔾 Open educational resources 4

Specify (STRING (120))

🔾 Other 99

Specify (STRING (120))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B02=4 or =99 and no response specified; "You have selected "Other", but have not provided a response to the "Please specify" prompt." |

B02OER. What open educational resources did you use as your primary basis for instruction for this [T\_CLASS] class?

Please specify:

Specify

|  |
| --- |
| IF BO2= 1 OR 2 |

B03. Which one of the following textbooks or e-books do you use in this [CLASS NAME, PERIOD] class as your primary source of instruction?

6020301

🔾 Algebra 1; Glencoe / McGraw‐Hill 1

🔾 Algebra 1; McDougal Littell / Houghton Mifflin 2

🔾 Algebra; Prentice Hall 3

🔾 Big Ideas Math Common Core; Houghton Mifflin Harcourt 4

🔾 Connected Mathematics Program (CMP) 2 5

🔾 Connected Mathematics Program (CMP) 3 6

🔾 Contemporary Mathematics in Context; Glencoe / McGraw‐Hill 7

🔾 Everyday Mathematics (UCSMP); Everyday Learning 8

🔾 Geometry; Holt 9

🔾 Glencoe Math Common Core Edition Course 2 10

🔾 Glencoe Math Course 1 11

🔾 Glencoe Mathematics Applications and Concepts Course 1; Glencoe/McGraw-Hill 12

🔾 Glencoe Mathematics Applications and Concepts Course 2; Glencoe/McGraw-Hill 13

🔾 Glencoe Mathematics Applications and Concepts Course 3; Glencoe/McGraw-Hill 14

🔾 Go Math!; Houghton Mifflin Harcourt 15

🔾 Holt Algebra I; Holt, McDougal 16

🔾 Holt Mathematics Course 1; Holt, Rinehart & Winston 17

🔾 Holt Mathematics Course 2; Holt, Rinehart & Winston 18

🔾 Holt Mathematics Course 3; Holt, Rinehart & Winston 19

🔾 Holt McDougal Mathematics Common Core Course 1; Houghton Mifflin Harcourt 20

🔾 Holt McDougal Mathematics Common Core Course 2; Houghton Mifflin Harcourt 21

🔾 Holt McDougal Mathematics Common Core Course 3; Houghton Mifflin Harcourt 22

🔾 Holt Pre-Algebra; Holt, Littell 23

🔾 Holt Pre‐Algebra; Holt, McDougal 24

🔾 Impact Mathematics Course 1; Glencoe/McGraw-Hill 25

🔾 Impact Mathematics Course 2; Glencoe/McGraw-Hill 26

🔾 Impact Mathematics Course 3; Glencoe/McGraw-Hill 27

🔾 Integrated Mathematics; McDougal Littell / Houghton Mifflin 28

🔾 Math Connects Common Core Edition Course 2 29

🔾 Math Investigations; Pearson/TERC 30

🔾 Math; Harcourt, Brace, Jovanovich 31

🔾 Math; Scott Foresman 32

🔾 Pre-Algebra; Glencoe/McGraw-Hill 33

🔾 Prentice Hall Mathematics Common Core; Pearson 34

🔾 Saxon Math 35

🔾 Trailblazers; Kendall Hunt 36

🔾 Other 99

Specify (STRING (120))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B03=99 and no response specified; "You have selected "Other", but have not provided a response to the "Please specify" prompt." |

|  |
| --- |
| PROGRAMMER BOX 4  format b03 as drop-down. list responses alphabetically, with exception of “other,” which should appear at the bottom of the drop-down list. |

|  |
| --- |
| IF B02=1 OR =2 and B03 is not missing |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |
| FILL TEXTBOOK NAME from B03 |

B03a. Please indicate the publication year of your primary textbook, [FILL TEXTBOOK NAME from B03].

6020302

PUBLICATION YEAR

(RANGE 1990-2017)

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX 5  format b03a as drop-down ranging from 1990 to 2017. Note the upper range of year may need to be updated accordingly. |

|  |
| --- |
| IF B02=1 OR =2 and B03 is not missing |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |
| FILL TEXTBOOK NAME from B03 |

B03b. Please indicate the grade level of your primary textbook [FILL TEXTBOOK NAME from B03].

6020303

🔾 Grade 5 1

🔾 Grade 6 2

🔾 Grade 7 3

🔾 Grade 8 4

🔾 Grade 9 5

🔾 Not applicable 6

NO RESPONSE M

|  |
| --- |
| ALL |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |

B04. Which of the following do you use to supplement your primary basis for instruction for this [CLASS NAME, PERIOD] class?

*Select all that apply.*

🞏 a. Textbook (Print) 1

6020401

🞏 b. E-book 2

6020403

6020402

🞏 c. District or state educational content repository 3

🞏 d. Open educational resources 4

6020404

Specify (STRING (120))

6020405

🞏 e. Other 99

Specify (STRING (120))

6020406

🞏 f. I do not use additional resources to supplement instruction 5

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B04=4 You have selected "Open educational resources", but have not provided a response to the "Please specify" prompt."  IF B04 =99 and no response specified; You have selected "Other", but have not provided a response to the "Please specify" prompt. |

|  |
| --- |
| PROGRAMMER BOX 6  PROGRAMMING NOTE: If select option 5, should not be able to select other responses. |

|  |
| --- |
| IF B04 = 1 or = 2 |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |

B05. What additional textbooks or e-books do you use to supplement your instruction?

*Select all that apply.*

6025010

🞏 a. Algebra 1; Glencoe / McGraw‐Hill 1

6025020

🞏 b. Algebra 1; McDougal Littell / Houghton Mifflin 2

6025030

🞏 c. Algebra; Prentice Hall 3

6025040

🞏 d. Big Ideas Math Common Core; Houghton Mifflin Harcourt 4

6025050

🞏 e. Connected Mathematics Program (CMP) 2 5

🞏 f. Connected Mathematics Program (CMP) 3 6

6025070

6025060

🞏 g. Contemporary Mathematics in Context; Glencoe / McGraw‐Hill 7

6025080

🞏 h. Everyday Mathematics (UCSMP); Everyday Learning 8

6025090

🞏 i. Geometry; Holt 9

6025100

🞏 j. Glencoe Math Common Core Edition Course 2 10

6025110

🞏 k. Glencoe Math Course 1 11

6025120

🞏 l. Glencoe Mathematics Applications and Concepts Course 1; Glencoe/McGraw-Hill 12

🞏 m. Glencoe Mathematics Applications and Concepts Course 2; Glencoe/McGraw-Hill 13

6025130

🞏 n. Glencoe Mathematics Applications and Concepts Course 3; Glencoe/McGraw-Hill 14

6025140

🞏 o. Go Math!; Houghton Mifflin Harcourt 15

6025160

6025150

🞏 p. Holt Algebra I; Holt, McDougal 16

🞏 q. Holt Mathematics Course 1; Holt, Rinehart & Winston 17

6025180

6025170

🞏 r. Holt Mathematics Course 2; Holt, Rinehart & Winston 18

6025190

🞏 s. Holt Mathematics Course 3; Holt, Rinehart & Winston 19

6025200

🞏 t. Holt McDougal Mathematics Common Core Course 1; Houghton Mifflin Harcourt 20

🞏 u. Holt McDougal Mathematics Common Core Course 2; Houghton Mifflin Harcourt 21

6025210

🞏 v. Holt McDougal Mathematics Common Core Course 3; Houghton Mifflin Harcourt 22

6025220

🞏 w. Holt Pre-Algebra; Holt, Littell 23

6025240

6025230

🞏 x. Holt Pre‐Algebra; Holt, McDougal 24

6025250

🞏 y. Impact Mathematics Course 1; Glencoe/McGraw-Hill 25

6025260

🞏 z. Impact Mathematics Course 2; Glencoe/McGraw-Hill 26

6025270

🞏 aa. Impact Mathematics Course 3; Glencoe/McGraw-Hill 27

6025280

🞏 ab. Integrated Mathematics; McDougal Littell / Houghton Mifflin 28

🞏 ac. Math Connects Common Core Edition Course 2 29

6025300

6025290

🞏 ad. Math Investigations; Pearson/TERC 30

6025310

🞏 ae. Math; Harcourt, Brace, Jovanovich 31

6025320

🞏 af. Math; Scott Foresman 32

6025330

🞏 ag. Pre-Algebra; Glencoe/McGraw-Hill 33

6025340

🞏 ah. Prentice Hall Mathematics Common Core; Pearson 34

6025350

🞏 ai. Saxon Math 35

6025360

🞏 aj. Trailblazers; Kendall Hunt 36

6025370

🞏 ak. Other (Please specify) 97

6025380

🞏 al. Other (Please specify) 98

6025390

🞏 am. Other (Please specify) 99

* None of the above

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B05=97, 98, or 99 and no response specified; "You have selected "Other", but have not provided a response to the "Please specify" prompt." |

|  |
| --- |
| IF B04 = 1 or = 2 and B05 is not missing. |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] [ASK FOR EACH SELECTED BOOK IN B05] |
| FILL TEXTBOOK NAME(S) FROM B05. |

B05A. Please indicate the publication year of your supplemental textbook, [SUPPLEMENTARY TEXTBOOK].

6020501

PUBLICATION YEAR

(1990-2017)

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX 6a  format b05a as drop-down ranging from 1990 to 2017. Note the upper range of year may need to be updated accordingly. |

|  |
| --- |
| IF B04 = 1 or = 2 and B05 is not missing. |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT][ASK FOR EACH SELECTED RESPONSE IN B05] |
| FILL SUPPLEMENTAL TEXTBOOK NAME from B05 |

B05B. Please indicate the grade level of your supplemental textbook, [FILL SUPPLEMENTAL TEXTBOOK NAME from B05].

6020502

🔾 Grade 5 1

🔾 Grade 6 2

🔾 Grade 7 3

🔾 Grade 8 4

🔾 Grade 9 5

🔾 Not applicable 6

|  |
| --- |
| PROGRAMMER BOX 7  PROGRAMMING NOTE: Please loop B05A and B05B together for each response selected in B05, except for cases where B04 = 1 or = 2 and B05=97, 98, or 99, and the specify field is left blank. |

NO RESPONSE M

|  |
| --- |
| ALL |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |

B06. The next questions ask about how much time is scheduled for this [CLASS NAME, PERIOD] class.

6020600

How many weeks per year is the [CLASS NAME, PERIOD] class held?

WEEKS

(RANGE (1-52))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF 0 < B06 < 9 or B06 > 40; Just to confirm **You entered [B06 RESPONSE] weeks per year for this class.** Press "Edit" to return to this screen or press "Next" to continue. |
| **HARD CHECK: IF B06 = 0. You entered 0 weeks. Adjust the number of weeks then click the “Next” button.**  HARDCHECK IF B06>52 OR NOT A NUMBER: Please enter a number between 1 and 52. |

|  |
| --- |
| ALL |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |

B07. How many days per week is the [CLASS NAME, PERIOD] class typically held?

6020700

🔾 One day 1

🔾 Two days 2

🔾 Three days 3

🔾 Four days 4

🔾 Five days 5

🔾 Six days 6

NO RESPONSE M

|  |
| --- |
| ALL |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |

B08. How many minutes per day is the [CLASS NAME, PERIOD] class typically held?

6020800

NUMBER OF MINUTES

(RANGE (1-200))

NO RESPONSE M

|  |
| --- |
| ALL |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |
| CLASS NAME, PERIOD = FILL FROM PRELOAD |

B09. The purpose of this item is to obtain a description of the specific mathematic content areas you covered or plan to cover in your course this academic year.

Following is a list of content areas covering materials that may be taught in grade 6. Please respond to the entire list so that we may obtain an indication of the topics covered in your class that is as complete and accurate as possible. (Note: Not all areas are necessarily appropriate for your class).

For each listed content area, indicate the approximate number of class periods during this school year when the content area was or will be a primary focus for your [CLASS NAME, PERIOD] class.

How many full class periods have you or will you teach the following topics in this course during this school year? Indicate the number of class periods.

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | None | One or less than one full class | 2 to 5 | 6 to 10 | 11 to 15 | More than 15 |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6020901 | a. Understand ratio concepts and use ratio reasoning to solve problems. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020902 | b. Analyze proportional relationships and use them to solve real-world and mathematical problems. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020903 | c. Apply and extend previous understandings of multiplication and division to divide fractions by fractions. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020904 | d. Compute fluently with multi‐digit numbers and find common factors and multiples. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020905 | e. Apply and extend previous understandings of numbers to the system of rational numbers. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020906 | f. Apply and extend previous understandings of operations with fractions to add, subtract, multiply, and divide rational numbers. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020907 | g. Know that there are numbers that are not rational and approximate them by rational numbers. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020908 | h. Define, evaluate, and compare functions. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020909 | i. Use functions to model relationships between quantities. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

B09. (continued)

The purpose of this item is to obtain a description of the specific mathematic content areas you covered or plan to cover in your course this academic year.

Following is a list of content areas covering materials that may be taught in grade 6. Please respond to the entire list so that we may obtain an indication of the topics covered in your class that is as complete and accurate as possible. (Note: not all areas are necessarily appropriate for your class).

For each listed content area, indicate the approximate number of class periods during this school year when the content area was or will be a primary focus for your [CLASS NAME, PERIOD] class.

To what extent have you or will you teach each of the following topics in this course during this school year?

Indicate the number of class periods.

PROGRAMMER: CODE ONE PER ROW

*Select one answer for eachrow.*

|  |  | None | One or less than one full class | 2 to 5 | 6 to 10 | 11 to 15 | More than 15 |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6020910 | j. Apply and extend previous understandings of arithmetic to algebraic expressions. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020911 | k. Reason about and solve one‐variable equations and inequalities. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020912 | l. Represent and analyze quantitative relationships between dependent and independent variables. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020913 | m. Use properties of operations to generate equivalent expressions. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020914 | n. Solve real‐life and mathematical problems using numerical and algebraic expressions and equations. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020915 | o. Work with radicals and integer exponents. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020916 | p. Understand the connections between proportional relationships, lines, and linear equations. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6020917 | q. Analyze and solve linear equations and pairs of simultaneous linear equations. | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| ALL |
| CLASS NAME, PERIOD = FILL FROM PRELOAD |

B10. These next questions ask about the teaching practices you use in this classroom.

How often do the students in this [CLASS NAME, PERIOD] class...

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Almost every day | Once or twice a week | Once or twice a month | Never or hardly ever |
| --- | --- | --- | --- | --- | --- |
| 6021001 | a. Explain how to solve a mathematics problem (either verbally or in writing)? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 6021002 | b. Work on problems for which there is no immediate solution? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 6021003 | c. Practice solving routine items to develop or maintain fluency? | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |

|  |
| --- |
| ALL |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |
| CLASS NAME, PERIOD = FILL FROM PRELOAD |

B11. Please indicate the extent to which the following statements are true for students in this [CLASS NAME, PERIOD] class.

PROGRAMMER: CODE ONE PER ROW

*Select one answer for eachrow.*

|  |  | Not at all true | A little bit true | Somewhat true | Mostly true | Very true |
| --- | --- | --- | --- | --- | --- | --- |
| 6021101 | a. I try to give students a lot of choices about classroom assignments. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021102 | b. I have to lead students through their schoolwork step by step. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021103 | c. I can't afford to let students decide too many things about schoolwork for themselves. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021104 | d. I let students make a lot of their own decisions regarding schoolwork. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021105 | e. It's better not to give too many choices to students. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021106 | f. I find myself telling students every step to make when it comes to schoolwork. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021107 | g. I can't let students do things their own way. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021108 | h. When it comes to assignments, I'm always having to tell students what to do. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021109 | i. My general approach with students is to give them as few choices as possible. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| ALL |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |

B12. Next we would like to know about how you use technology in your teaching.

Please indicate if the following technology devices are available for your use in the classroom.

*Select all that apply.*

🞏 a. Desktop or laptop 1

6021201

6021202

🞏 b.Tablet 2

🞏 c. Smartboard, or interactive whiteboard 3

6021203

🞏 d. Interactive TV monitor 4

60212041

🞏 e. LCD or DLP projector 5

6021206

6021205

🞏 f. Smartphone 6

🞏 g. Apps 7

6021207

🞏 h. Digital camera 8

6021208

🞏 i. Digital video recorder 9

6021210

6021209

🞏 j. Graphing calculators 10

6021211

🞏 k. Student or audience response system for polling 11

🞏 l. Other (Please specify) 95

6021213

6021212

🞏 m. Other (Please specify) 96

6021214

🞏 n. Other (Please specify) 97

🞏 o. Other (Please specify) 98

6021215

🞏 p. Other (Please specify) 99

6021217

6021216

🞏 q. No technology devices are available for teacher use in the classroom 12

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B12=95-99 and no response specified; You have selected "Other" one or more times, but have not provided a response to the corresponding "Please specify" prompt(s)." |

|  |
| --- |
| PROGRAMMER BOX 7  PROGRAMMER NOTE: If select option 12, should not be able to select other responses. |

|  |
| --- |
| ALL |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |

B13. Please indicate if the following technology devices are available for student use in the classroom.

*Select all that apply.*

6021301

🞏 a. Desktop or laptop 1

6021302

🞏 b. Tablet 2

6021303

🞏 c. Smartboard, or interactive whiteboard 3

6021304

🞏 d. Interactive TV monitor 4

6021305

🞏 e. LCD or DLP projector 5

6021306

🞏 f. Smartphone 6

6021307

🞏 g. Apps 7

6021308

🞏 h. Digital camera 8

6021309

🞏 i. Digital video recorder 9

🞏 j. Graphing calculators 10

6021311

6021310

🞏 k. Student or audience response system for polling 11

6021312

🞏 l. Other (Please specify) 95

6021313

🞏 m. Other (Please specify) 96

6021314

🞏 n. Other (Please specify) 97

6021315

🞏 o. Other (Please specify) 98

🞏 p. Other (Please specify) 99

6021316

🞏 q. No technology devices are available for student use in the classroom 12

6021317

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF B13=95-99 and no response specified; You have selected "Other" one or more times, but have not provided a response to the corresponding "Please specify" prompt(s)." |

|  |
| --- |
| PROGRAMMER BOX 8  PROGRAMMER NOTE: If select option 12, should not be able to select other responses. |

|  |
| --- |
| B13=1 OR =2 OR =3 OR =4 OR =5 OR =6 OR =7 OR =8 OR =9 OR =10 OR =11 OR =95-99 |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |
| CLASS NAME, PERIOD = FILL FROM PRELOAD |

B14. In this [CLASS NAME, PERIOD] class this year, how often do your students use technological resources to do each of the following?

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Never | Rarely | Monthly | Weekly | Daily |
| --- | --- | --- | --- | --- | --- | --- |
| 6021401 | a. Practice or review mathematics topics. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021402 | b. Show work to the class in real time. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021403 | c. Research a mathematics topic. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021404 | d. Play games. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021405 | e. Create projects. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021406 | f. Collect and analyze data. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021407 | g. Conduct or watch simulations. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021408 | h. Submit assignments online. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021409 | i. Edit others' work or give others feedback. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021410 | j. Share or post their work for others to view at any time. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021411 | k. Extend mathematics learning with enrichment activities. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021412 | l. Participate in online discussions. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021413 | m. Fill free time. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| PROGRAMMER BOX 9  PROGRAMMER NOTE: PLEASE INCLUDE THE FOLLOWING AS HELP TEXT via a hyperlink in the words “technological resources”: Examples of technological resources would be tablets, e-readers, computers, smartphones, digital cameras, Smartboards and interactive whiteboards, as well as websites such as Khan Academy, Moodle, Dropbox, or Study Island and apps such as Edmodo, Poll Everywhere, or Remind 101. |

|  |
| --- |
| B13=1 OR =2 OR =3 OR =4 OR =5 OR =6 OR =7 OR =8 OR =9 OR =10 OR =11 OR =95-99 |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT]  SOFT CHECK:  If all items are left blank:  " Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue. |

**B14A. Please list any other ways students in your class use technological resources and indicate how often they use technological resources in this way.**

6020301

***If there are fewer other uses than the number of blank spaces provided, please leave any extra spaces empty and click “Next.”***

***If there are no other uses, then please click “Next.”***

|  |  | Rarely | Monthly | Weekly | Daily |
| --- | --- | --- | --- | --- | --- |
| 6021421 | a. Other use 1  (Please specify) | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021422 | b. Other use 2  (Please specify) | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021423 | c. Other use 3  (Please specify) | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021424 | d. Other use 4  (Please specify) | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021425 | e. Other use 5  (Please specify) | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

NO RESPONSE M

|  |
| --- |
| SOFT CHECK:   If respondent specifies an “other use” but does not indicate frequency, display the following soft check:  *You have indicated other ways students use technological resources, but have not responded to how often. Please select “Edit” to provide the missing answers, or select "Next" to continue without providing additional responses.*  If respondent indicates a frequency without specifying the “other use”, display the following soft check:  *You have selected how often the students use technological resources, but have not filled in the associated text box. Please select “Edit” to provide the missing answers, or select "Next" to continue without providing additional responses.* |

|  |
| --- |
| PROGRAMMER BOX 9a  PROGRAMMER NOTE: PLEASE INCLUDE THE FOLLOWING AS HELP TEXT via a hyperlink in the words “technological resources”: Examples of technological resources would be tablets, e-readers, computers, smartphones, digital cameras, Smartboards and interactive whiteboards, as well as websites such as Khan Academy, Moodle, Dropbox, or Study Island and apps such as Edmodo, Poll Everywhere, or Remind 101. |

|  |
| --- |
| B12=1 OR =2 OR =3 OR =4 OR =5 OR =6 OR =7 OR =8 OR =9 OR =10 OR =11 OR =95-99 |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |
| CLASS NAME, PERIOD = FILL FROM PRELOAD |

B15. In this [CLASS NAME, PERIOD] class this year, how often do you use technological resources to do each of the following?

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Never | Rarely | Monthly | Weekly | Daily |
| --- | --- | --- | --- | --- | --- | --- |
| 6021510 | a. Collaborate with other teachers. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021520 | b. Encourage student participation in class. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021530 | c. Collect and analyze data for classroom examples and activities. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021540 | d. Collect and analyze assessment data for grading. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021550 | e. Send reminders or class information to students. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021560 | f. Provide homework help or learning support outside of class. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021570 | g. Develop videos of classroom instruction. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021580 | h. Compile links to external resources. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021590 | i. Distribute study tools and self-assessments. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| PROGRAMMER BOX 10  PROGRAMMER NOTE: PLEASE INCLUDE THE FOLLOWING AS HELP TEXT via a hyperlink in the words “technological resources”: Examples of technological resources would be tablets, e-readers, computers, smartphones, digital cameras, Smartboards and interactive whiteboards, as well as websites such as Khan Academy, Moodle, Dropbox, or Study Island and apps such as Edmodo, Poll Everywhere, or Remind 101.  Soft check if all items are left blank:  “Your responses are very important. Please answer as many questions as possible. Press “Edit” to return to this screen or press “Next” to continue. |

|  |
| --- |
| B12=1 OR =2 OR =3 OR =4 OR =5 OR =6 OR =7 OR =8 OR =9 OR =10 OR =11 OR =95-99 |
| [ASK ONCE FOR EACH CLASSROOM WITH A SAMPLED STUDENT] |

**B15A. Please list any other ways you use technological resources in this class and indicate how often you use them in this way.**

***If there are fewer other uses than the number of blank spaces provided, please leave any extra spaces empty and click “Next.”***

***If there are no other uses, then please click “Next.”***

|  |  | Rarely | Monthly | Weekly | Daily |
| --- | --- | --- | --- | --- | --- |
| 6021521 | a. Other use 1  (Please specify) | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021522 | b. Other use 2  (Please specify) | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021523 | c. Other use 3  (Please specify) | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021524 | d. Other use 4  (Please specify) | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6021525 | e. Other use 5  (Please specify) | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

NO RESPONSE M

|  |
| --- |
| SOFT CHECK:   If respondent specifies an “other use” but does not indicate frequency, display the following soft check:  *You have indicated other ways students use technological resources, but have not responded to how often. Please select “Edit” to provide the missing answers, or select "Next" to continue without providing additional responses.*  If respondent indicates a frequency without specifying the “other use”, display the following soft check:  *You have selected how often the students use technological resources, but have not filled in the associated text box. Please select “Edit” to provide the missing answers, or select "Next" to continue without providing additional responses.* |

|  |
| --- |
| PROGRAMMER BOX 10a  PROGRAMMER NOTE: PLEASE INCLUDE THE FOLLOWING AS HELP TEXT via a hyperlink in the words “technological resources”: Examples of technological resources would be tablets, e-readers, computers, smartphones, digital cameras, Smartboards and interactive whiteboards, as well as websites such as Khan Academy, Moodle, Dropbox, or Study Island and apps such as Edmodo, Poll Everywhere, or Remind 101. |

|  |
| --- |
| ALL |

B16. How easily can you access the internet in your classroom?

6021561

🔾 Cannot access 1

🔾 Inconsistently, often a poor connection 2

🔾 Easily, usually a good connection 3

🔾 Very easily, a strong and consistent connection 4

NO RESPONSE M

|  |
| --- |
| ALL |

B17. How easily can your students access the internet in your classroom?

6021562

🔾 Cannot access 1

🔾 Inconsistently, often a poor connection 2

🔾 Easily, usually a good connection 3

🔾 Very easily, a strong and consistent connection 4

NO RESPONSE M

|  |
| --- |
| ALL |

B18. How often do you connect to the internet from your classroom for school-related work?

6021563

🔾 Not at all 1

🔾 Rarely 2

🔾 Sometimes 3

🔾 Often 4

NO RESPONSE M

|  |
| --- |
| ALL |

B19. How often do your students connect to the internet from your classroom for school-related work?

6021564

🔾 Not at all 1

🔾 Rarely 2

🔾 Sometimes 3

🔾 Often 4

NO RESPONSE M

|  |
| --- |
| ALL |

B20. How often do you assign homework that requires your students to connect to the internet?

6021565

🔾 Not at all 1

🔾 Rarely 2

🔾 Sometimes 3

🔾 Often 4

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX 11  PROGRAMMER NOTE: STATUS HERE FOR CLASSROOM LEVEL QUESTIONS.  CONTINUE TO SC00a. |

|  |
| --- |
| ALL |
| FILL CLASS NAME, PERIOD FROM SC01b OR SC01c. |

**Student information**

SC00a. Those are all of the questions we have about your [CLASS NAME, PERIOD] class.

Now we would like to ask some questions about the student who is participating in the MGLS:2017 and is in your [CLASS NAME, PERIOD] class. This section includes questions about each student’s math skills, social skills, and other behaviors at school.

Press the "Next" button to proceed.

[FILL PRELOADED STUDENT NAME]: Student skills and behaviors

|  |
| --- |
| ALL |
| ADMINISTER THE FOLLOWING SET OF QUESTIONS FOR EACH PRELOADED STUDENT WHERE SC01 = YES. |

[FOR SECOND AND FOLLOWING STUDENTS IN A GIVEN CLASS, IF MORE THAN ONE STUDENT IN THAT CLASS]

Now we have questions about [FILL PRELOADED STUDENT NAME]. The following questions ask about the skills and abilities [FILL PRELOADED STUDENT NAME] demonstrates in your [CLASS NAME, PERIOD] class.

A01aTSR. Please rate [FILL PRELOADED STUDENT NAME] 's skills in the following areas, as exhibited in your class.

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Outstanding | Very good | Good | Fair | Poor | Not applicable or not observed |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6110101 | a. Ability to apply mathematical concepts to "real world" problems | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6110102 | b. Ability to complete or conduct proofs or demonstrations of [his/her] mathematical reasoning | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6110103 | c. Ability to talk about [his/her] reasoning or thinking in solving a problem | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6110104 | d. Ability to explain [his/her] reasoning in solving a problem in writing | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6110105 | e. Ability to use representations to model mathematical ideas | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6110106 | f. Ability to use a calculator to solve problems | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6110107 | g. Ability to fluently apply math facts and procedures | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |

A02aTSR. Have you taught [FILL PRELOADED STUDENT NAME] math before this year?

6110110

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| ALL |

A03aTSR. Have you taught [FILL PRELOADED STUDENT NAME]in other academic areas before this year?

6110111

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| ALL |
| STUDENT NAME= FIRST NAME AND LAST NAME SELECTED FROM SC01 |

B01aTSR. For each item below, please think about [FILL PRELOADED STUDENT NAME]’S behavior during the past month. Decide how often the student demonstrates the behavior described.

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Never | Sometimes | Often | Very often | Always | No opportunity to observe this behavior |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6120101 | a. Organizes work | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6120102 | b. Appears motivated to learn new things | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6120103 | c. Works well independently | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6120104 | d. Adapts to changes in plans, requirements, or routines | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6120105 | e. Persists in completing tasks | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6120106 | f. Pays attention well | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |
| FILL: HIS OR HER FROM SEX IN PRELOAD |

B02aTSR. The following are some statements that describe behaviors many students exhibit. For each item below, please think about [FILL PRELOADED STUDENT]’s behavior during the past three months.

Describe how often this student demonstrates the behavior.

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Never | Some-times | Often | Very often | Always |
| --- | --- | --- | --- | --- | --- | --- |
| 6120201 | a. Manipulates others or lies | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120202 | b. Bullies or is cruel or mean to others | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120203 | c. Disobeys rules | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120204 | d. Has sudden changes in mood or feeling | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120205 | e. Argues too much | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120206 | f. Is stubborn, sullen, or irritable | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120207 | g. Has a strong temper or loses [his/her] temper easily | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |
| STUDENT NAME= FIRST NAME AND LAST NAME SELECTED FROM SC01 |

B03aTSR. Next are some questions about [FILL PRELOADED STUDENT NAME]'s interactions with other students.

During this school year, how often have other students...

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Never | Some-times | Often | Very often | Always |
| --- | --- | --- | --- | --- | --- | --- |
| 6120301 | a. Teased, made fun of, or called this student names | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120302 | b. Pushed, shoved, slapped, hit, or kicked this student | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120303 | c. Told lies or untrue stories about this student | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120304 | d. Intentionally excluded or left out this student from socializing with them | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |
| FILL: HIS OR HER FROM SEX IN PRELOAD |

B04aTSR. Please rate each of the listed behaviors according to how well it describes [FILL PRELOADED STUDENT NAME] PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Not at all | A little | Moderately well | Well | Very well |
| --- | --- | --- | --- | --- | --- | --- |
| 6120401 | a. Resolves peer problems on [his/her] own | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120402 | b. Is helpful to others | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120403 | c. Can give suggestions and opinions without being bossy | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120404 | d. Acts friendly toward others | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6120405 | e. Understands others | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |
| STUDENT NAME= FIRST NAME AND LAST NAME SELECTED FROM SC01  FILL: HE OR SHE FROM SEX IN PRELOAD |

These questions ask about how [FILL PRELOADED STUDENT NAME] behaves in your classroom.

C01aTSR. Please indicate the extent to which each of the following statements is true for [FILL PRELOADED STUDENT NAME].

PROGRAMMER: CODE ONE PER ROW

*Select one answer foreach row.*

|  |  | Not at all true | A little bit true | Somewhat true | Mostly true | Very true |
| --- | --- | --- | --- | --- | --- | --- |
| 6130101 | a. In my class, this student works as hard as [he/she] can. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6130102 | b. When working on classwork in my class, this student appears involved. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6130103 | c. When I explain new material, this student listens carefully. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6130104 | d. In my class, this student does more than required. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6130105 | e. When this student doesn't do well, [he/she] works harder. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |

Next are some questions about [FILL PRELOADED STUDENT NAME] attendance.

C02aTSR. Over the last month, how often has [FILL PRELOADED STUDENT NAME]been...

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | 0 times | 1-2 times | 3-6  times | 7-9  times | 10-12 times | 13 or more times |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6130201 | a. Late to your class. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6130202 | b. Absent from your class. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |

C03aTSR. Over the last month, how often did [FILL PRELOADED STUDENT NAME]...

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | 0 times | 1-2 times | 3-6  times | 7-9  times | 10-12 times | 13 or more times |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6130301 | a. Come to class without completing prior assignments or homework. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6130302 | b. Come to class without class materials (such as pencils, paper, tablet, books, or calculator). | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

[FILL PRELOADED STUDENT NAME]: Student services

|  |
| --- |
| ALL |
| STUDENT NAME= FIRST NAME AND LAST NAME SELECTED FROM Q. SC01 |

This last section asks about any special supports or opportunities [FILL PRELOADED STUDENT NAME] receives at school.

D01aTSR. How often does [FILL PRELOADED STUDENT NAME]receive instruction and/or related services in any of the following types of programs in your school during the day?

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Daily | 2-4 times per week | Weekly | Less than once a week | This student does not receive this service | Program or service not provided to students in this school |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6140101 | a. Individual tutoring in mathematics | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6140102 | b. Small group pull-out instruction in mathematics | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6140103 | c. Gifted and talented program in mathematics | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |

D02TSR. Have you recommended [FILL PRELOADED STUDENT NAME]for academic honors, advanced placement, or honors classes?

6140200

🔾 Yes 1

🔾 No 2

🔾 Not applicable (no such honor available) 3

NO RESPONSE M

END 1

Thank you. These are all the questions we have about this student at this time. Please press the “Next” button to continue.

|  |
| --- |
| PROGRAMMER BOX 15A  PROGRAMMER NOTE: STATUS HERE FOR EACH TSR.  IF ADDITIONAL STUDENTS WHERE SC01 in (1,2) ARE IN THIS CLASS, LOOP BACK TO A01aTSR.  ELSE IF ADDITIONAL STUDENTS WHERE SC01 in (1,2), BUT THEY ARE IN A DIFFERENT CLASS, LOOP BACK TO THE PROGRESS SUMMARY SCREEN (immediately preceding A01).  ELSE GO TO C01 (i.e. the “Your School and Teaching” section). |

ENDCLASS

Thank you. These are all the questions we have about the students in this class at this time. Please press the “Next” button to continue.

**Your school and your teaching**

|  |
| --- |
| ALL |

C01. This section asks questions about [FILL SCHOOL NAME] and your teaching.

6030100

Which statement best describes the way your mathematics classes at [FILL SCHOOL NAME] are organized?

🔾 You instruct several classes of different students all or most of the day in one or more subjects (sometimes called departmentalized instruction). 1

🔾 You instruct the same group of students all or most of the day in multiple subjects (sometimes called a self-contained class). 2

🔾 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). 3

NO RESPONSE M

|  |
| --- |
| IF PRELOAD GRADES TAUGHT = 6 |

C02\_6. In this school, how important is each of the following factors in placing a typical sixth-grade student into a mathematics course?

*Select one answer for each row.*

|  |  | Not at all important | A little important | Somewhat important | Very important | N/A |
| --- | --- | --- | --- | --- | --- | --- |
| 6030261 | a. Counselor recommendation | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030262 | b. Prior teacher recommendation | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030263 | c. Courses taken previously | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030264 | d. Achievement in previous courses | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030265 | e. Results of district or state end-of-year or end-of-course exams | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030266 | f. Results of placement tests | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030267 | g. Results of standardized tests | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030268 | h. Student career or education plan | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030269 | i. Student and/or parent or guardian selection | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |

C03. Please indicate how confident you are for each of the following statements about your teaching.

I am confident that I can...

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Not at all confident | A little confident | Somewhat confident | Mostly confident | Very confident |
| --- | --- | --- | --- | --- | --- | --- |
| 6030301 | a. Answer students’ mathematics-related questions | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030302 | b. Explain to students how to do complex mathematics problems | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030303 | c. Skillfully teach all the concepts covered in the mathematics curriculum | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030304 | d. Help students master difficult concepts in mathematics | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030305 | e. Help all students make significant improvements in mathematics | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030306 | f. Design lessons that enable all my students to master the material in mathematics | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 6030307 | g. Help students who have failed math in the past make significant progress | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |

C03A. How many hours of professional development did you receive this year that was focused on math?

6030310

Please enter whole numbers only.

NUMBER OF HOURS

NO RESPONSE M

HARDCHECK:”Please enter a whole number."

|  |
| --- |
| ALL |

C03AA. As part of your professional development, how many times this year did you observe another teacher?

6030311

🔾 Never 1

🔾 Once 2

🔾 2 times 3

🔾 3 or 4 times 4

🔾 More than 4 times 5

NO RESPONSE M

|  |
| --- |
| ALL |

C03AB. How many times this year were you observed by a coach, mentor, or peer?

6030312

🔾 Never 1

🔾 Once 2

🔾 2 times 3

🔾 3 or 4 times 4

🔾 More than 4 times 5

NO RESPONSE M

|  |
| --- |
| ALL |

C03AC. How many times this year were you observed as part of a teacher evaluation?

6030313

🔾 Never 1

🔾 Once 2

🔾 2 times 3

🔾 3 or 4 times 4

🔾 More than 4 times 5

NO RESPONSE M

|  |
| --- |
| ALL |

C03B. How often do you communicate with the special education provider about the students in your math classes?

6030331

🔾 Daily 1

🔾 Weekly 2

🔾 Monthly 3

🔾 Rarely. 4

🔾 Never. 5

🔾 Not applicable. 6

NO RESPONSE M

|  |
| --- |
| ALL |

C03C. The next set of questions is about use of assessment data in [FILL SCHOOL NAME].

Please indicate the extent to which you disagree or agree with each of the following statements:

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Strongly disagree | Disagree | Slightly disagree | Slightly agree | Agree | Strongly agree |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6030391 | a. Teachers in this school regularly use assessment data to inform instructional decisions | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030392 | b. I use assessment data to keep track of my struggling students | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030393 | c. I regularly use assessment data to inform my instruction | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |

C04. Next, we would like to know more about your school's principal or administrator. How much do you disagree or agree with each of the following statements?

The principal at this school...

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Strongly disagree | Disagree | Slightly disagree | Slightly agree | Agree | Strongly agree |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6030401 | a. Makes clear to the staff his or her expectations for meeting instructional goals | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030402 | b. Communicates a clear vision for our school | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030403 | c. Sets high standards for teaching | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030404 | d. Understands how students learn | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030405 | e. Sets high standards for student learning | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030406 | f. Presses teachers to implement what they have learned in professional development | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030407 | g. Carefully tracks student academic progress | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030408 | h. Knows what's going on in my classroom | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030409 | i. Actively monitors the quality of teaching in this school | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |

The next set of questions asks about the teaching climate at [FILL SCHOOL NAME]..

C05. How much do you disagree or agree with each of the following statements about math teachers at your school?

Math teachers at your school...

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Strongly disagree | Disagree | Slightly disagree | Slightly agree | Agree | Strongly agree |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6030501 | a. Believe all students can do well | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030502 | b. Have given up on their students | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030503 | c. Care only about the smart students | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030504 | d. Expect very little from students | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030505 | e. Work hard to make sure all students are learning | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue..

|  |
| --- |
| ALL |

C06. To what extent do you disagree or agree with the following statements about teaching at [FILL SCHOOL NAME]?

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Strongly disagree | Disagree | Slightly disagree | Slightly agree | Agree | Strongly agree |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6030601 | a. Curriculum, instruction, and learning materials are well coordinated across the different grade levels at this school. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030602 | b. There is consistency in curriculum, instruction, and learning materials among teachers in the same grade level at this school. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| ALL |

C07. How much do you disagree or agree with each of the following statements about [FILL SCHOOL NAME]?

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Strongly disagree | Disagree | Slightly disagree | Slightly agree | Agree | Strongly agree |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6030701 | a. The level of student misbehavior (for example, noise, horseplay, or fighting in the halls or cafeteria) in this school interferes with my teaching. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030702 | b. Many of the students I teach are not capable of learning the material I am supposed to teach them. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030703 | c. I feel accepted and respected as a colleague by most staff members. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030704 | d. Teachers in this school are continually learning and seeking new ideas. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030705 | e. Routine administrative duties and paperwork interfere with my job of teaching. Paperwork includes items associated with Response to Intervention, alignment with the Common Core State Standards, or other initiatives. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |

C08. Indicate the extent to which you disagree or agree with each of the following statements about [FILL SCHOOL NAME].

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Strongly disagree | Disagree | Slightly disagree | Slightly agree | Agree | Strongly agree |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 6030801 | a. I feel safe at this school. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030802 | b. This school's security policies and practices are sufficient. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 6030803 | c. The students get along well with teachers. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |

The next two questions ask about your school’s technology policies and practices.

C09. Does [FILL SCHOOL NAME]lend or provide computers, tablets, or similar devices to individual students?

6030900

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| ALL |

C10. Thinking about students, is this a bring your own device (BYOD) school?

6031000

🔾 Yes 1

🔾 No 2

NO RESPONSE M

**Educational background**

|  |
| --- |
| ALL |

The next several questions ask about your educational background.

D01. What is the highest level of education you have completed?

6040100

🔾 Did not complete high school 1

🔾 High school diploma or equivalent/GED 2

🔾 Some college or technical or vocational school 3

🔾 Associate’s degree 4

🔾 Bachelor’s degree 5

🔾 Master’s degree 6

🔾 Advanced professional degree beyond a master’s degree (for example, Ph.D., Ed.D.) 7

NO RESPONSE M

|  |
| --- |
| “If D01 = 2 or =3 or =4 or =5 or =6 or=7, go to D02; Else go to D05. |
| FILL = D01 RESPONSE if D01 = 2 or =4 or =5 or =6 or =7; FILL = “college or technical or vocational school training” if D01 =3 |

D02. In what year did you receive your [FILL WITH HIGHEST DEGREE LISTED IN D01]?

6040200

YEAR HIGHEST DEGREE RECEIVED

(1945-2017)

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX 18  format D02 as drop-down ranging from 1945 to 2017. Note the upper range of year may need to be updated accordingly. |

|  |
| --- |
| IF D01 >= 3, go to D03; Else go to D05. |

D03. Did you have a major, minor, or special emphasis in any of the following subjects as part

of your undergraduate or graduate coursework?

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | Yes, a major | Yes, a minor or special emphasis | No |
| --- | --- | --- | --- | --- |
| 6040301 | a. Elementary education | 1 🔾 | 3 🔾 | 2 🔾 |
| 6040302 | b. Secondary education | 1 🔾 | 3 🔾 | 2 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| IF D01 >= 3, go to D04, Else go to D05. |

D04. How many college-level classes have you taken in the following branches of mathematics?

PROGRAMMER: CODE ONE PER ROW

*Select one answer for each row.*

|  |  | None | One or two | Three or four | Five or more |
| --- | --- | --- | --- | --- | --- |
| 6040401 | a. Algebra such as abstract algebra, linear algebra, or groups, rings, and fields | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 |
| 6040402 | b. Applied mathematics such as dynamical systems, game theory, information theory, mathematical modeling, or mathematical physics | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 |
| 6040403 | c. Calculus, analysis, or differential equations | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 |
| 6040404 | d. Discrete mathematics, combinatorics, or graph theory | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 |
| 6040405 | e. Foundations, philosophy, history of mathematics, or logic | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 |
| 6040406 | f. Geometry, trigonometry, or topology | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 |
| 6040407 | g, Number theory | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 |
| 6040408 | h. Probability or statistics | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 |
| 6040409 | i. Teaching mathematics | 0 🔾 | 1 🔾 | 2 🔾 | 3 🔾 |

SOFT CHECK:   
If all items are left blank:   
Your responses are very important. Please answer as many questions as possible. Press "Edit" to return to this screen or press "Next" to continue.

|  |
| --- |
| ALL |

D05. Including this school year, how many years have you taught the following grades at any school...

Please estimate to the nearest year.

If you have been working for less than one year, enter 1.

|  |  | NUMBER OF YEARS |
| --- | --- | --- |
| 6040501 | a. Grade K-12 in any subject? | (RANGE 0.0-50.0) |
| 6040502 | b. Grade K-5 math? | (RANGE 0.0-50.0) |
| 6040503 | c. Grade 6-8 math? | (RANGE 0.0-50.0) |
| 6040504 | d. Grade 9-12 math? | (RANGE 0.0-50.0) |

|  |
| --- |
| HARD CHECK: IF D05 a, b, c, or d are non-numeric; **Please enter a numeric value that is 0 or greater.** |
| HARD CHECK: IF D05 < 0; **Please enter a value that is 0 or greater.** |
| SOFT CHECK: IF ANY D05 >40; **You entered [D05 a, b, c, or d RESPONSE] years.** Select “Edit" to adjust the number of students or select “Next" if this is correct |

|  |
| --- |
| PROGRAMMER BOX 18A  Programmer note: Omit blanks from soft check. |

|  |
| --- |
| ALL |

D06. Which of the following best describes the teaching certificate you currently hold?

6040600

🔾 Regular or standard state certificate or advanced professional certificate 1

🔾 Certificate issued after satisfying all requirements except the completion of a probationary teaching period 2

🔾 Certificate that requires some additional coursework or passing a test 3

🔾 Certificate issued to persons who must complete a certification program in order to continue teaching 4

🔾 I do not hold any of these certifications 5

🔾 Other (Please specify) 99

Specify (STRING (120))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF D06=99 and no response specified; You have selected "Other", but have not provided a response to the "Please specify" prompt." |

|  |
| --- |
| D6 NE 5 OR NE M |

D07. In which grades does this certificate allow you to teach math?

*Select all that apply.*

🞏 n. This certificate does not allow me to teach math 14

6040701

6040714

🞏 a. Kindergarten 1

🞏 b. Grade 1 2

6040703

6040702

🞏 c. Grade 2 3

6040704

🞏 d. Grade 3 4

🞏 e. Grade 4 5

6040706

6040705

🞏 f. Grade 5 6

6040707

🞏 g. Grade 6 7

6040708

🞏 h. Grade 7 8

6040709

🞏 i. Grade 8 9

🞏 j. Grade 9 10

6040710

6040711

🞏 k. Grade 10 11

🞏 l. Grade 11 12

6040712

🞏 m. Grade 12 13

6040713

NO RESPONSE M

|  |
| --- |
| ALL |

D08. Have you taken the exam for National Board Certification?

6040800

🔾 Not taken 1

🔾 Taken and passed 2

🔾 Taken and awaiting results 3

🔾 Taken and have not yet passed 4

NO RESPONSE M

|  |
| --- |
| D08=2 |

D09. In what content area(s) do you hold a National Board for Professional Teaching certificate?

*Select all that apply.*

6040901

🞏 a. Generalist, Early Childhood 1

6040902

🞏 b. Generalist, Middle Childhood 2

6040903

🞏 c. Mathematics, Early Adolescence 3

6040904

🞏 d. Mathematics, Adolescence and Young Adulthood 4

6040905

🞏 e. Other (Please specify) 99

Specify (STRING (120))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF D09=99 and no response specified; You have selected "Other", but have not provided a response to the "Please specify" prompt." |

|  |
| --- |
| ALL |

D10. Did you enter teaching through an alternative certification program? An alternative certification program is a program that is designed to expedite the transition of non-teachers to a teaching career, for example, a state, district, or university alternative certification program.

6041000

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| ALL |

This set of questions asks about you and your background.

D11. In what year were you born?

6041100

YEAR BORN

(RANGE 1925-1997)

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX 19  format D11 as drop-down ranging from 1925 to 1997. Note the upper range of year may need to be updated accordingly. |

|  |
| --- |
| ALL |

D12. What is your sex?

6041200

🔾 Male 1

🔾 Female 2

NO RESPONSE M

|  |
| --- |
| ALL |

D13. Are you of Hispanic or Latino/Latina origin?

6041300

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX 20  Help text for D13 QUESTION TEXT (hyperlink the words “hispanic or latino/latina in question text):  Hispanic or Latino/LaTina Origin: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish cultures or origin (or descent), regardless of race. |

|  |
| --- |
| ALL |

D14. Which of the following best describes your race?

*Select all that apply.*

6041401

🞏 a. American Indian or Alaska Native 1

6041402

🞏 b. Asian 2

6041403

🞏 c. Black or African American 3

6041404

🞏 d. Native Hawaiian or other Pacific Islander 4

6041405

🞏 e. White 5

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX 21  Help text for D14 QUESTION TEXT (each response option should include an information icon to its corresponding definition): (ONE HELP TEXT BOX CURRENTLY DISPLAYS WITH INFORMATION ABOUT ALL OF THE RACES WHEN ANY OF THE ABOVE RACES ARE CLICKED ON)  **American Indian or Alaskan Native:** A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.   **Asian:** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.   **Black or African American:** A person having origins in any of the black racial groups of Africa.    **Native Hawaiian or other Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.    **White:** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.. |

**INCENTADDR**

**To show our appreciation for completing the survey today, we would like to send you a [FILL CHECK AMOUNT] check. Please provide the address to which you would like the check mailed.**

**(Allow 4 weeks for delivery.)**

**Name:**

**Street Address:**

**ZIP Code:**

**City:**

**State:**

**END 3**

**These are all the questions we have for you. We appreciate your taking the time to complete the survey.**

**Thank you very much for participating in MGLS:2017!**

**Press “Finish to complete and close the survey.**

OR, if ineligible  
  
Thank you for taking the time to answer our questions! Since you are not the math teacher for any MGLS:2017 students, it is not necessary for you to answer any other questions.   
  
  
  
Press “END” to finish.

## Appendix OFT1-U4. Special Education Teacher Survey Specifications

|  |
| --- |
| *NCES is authorized to conduct MGLS:2017 by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543) and to collect students’ education records from education agencies or institutions for the purposes of evaluating federally supported education programs under the Family Educational Rights and Privacy Act (FERPA, 34 CFR §§ 99.31(a)(3)(iii) and 99.35).  The data are being collected for NCES by RTI International, a U.S.-based nonprofit research organization. All of the information you provide may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (20 U.S.C. §9573 and 6 U.S.C. §151). The collected information will be combined across respondents to produce statistical reports.*  *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 1850-0911. Approval expires 09/30/2018. The time required to complete this information collection is estimated to average approximately 10 minutes for the teacher-level information and 25 minutes per study student, including the time to review instructions, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate, suggestions for improving this survey, or any comments or concerns regarding the status of your individual submission of this survey, please write directly to: The Middle Grades Longitudinal Study of 2017-18 (MGLS:2017), National Center for Education Statistics, Potomac Center Plaza, 550 12th St, SW, Room 4002, Washington, DC 20202.* |

Note: the special education teacher survey specifications are presented in order of administration. The section and item letters and numbers do not reflect that order.

SURVEY INFORMATION

You have received an invitation to complete this questionnaire because one or more students you teach or provide services to have been selected to participate in the MGLS:2017 field test study. To enhance the information provided by your students and their parents, we need you to complete this survey.

After confirming whether you teach (or provide services to) the students selected for MGLS:2017, the survey will ask questions about these specific students. The survey will also ask questions about you and your instructional practices.

**Taking part in the study is voluntary, and you can skip questions you do not want to answer. We realize you are very busy, but urge you to complete the questionnaire as completely and accurately as possible. Your answers are very important to the study’s success. You will receive $20 for completing the parts about you and your instructional practices, plus an additional $7 for each individual student about whom you answer questions.**

**NOTE: There are [FILL NUMBER OF STUDENTS] MGLS:2017 student[s] that we will ask you to confirm.**

**Please click below to start the survey.**

|  |
| --- |
| ALL |

(**WELCOME BACK)**

[**IF RESPONDENT RETURNING TO ONLINE SURVEY OR HIGHER ORDER TIME**]

PROGRAMMER: THE MESSAGE BELOW WILL APPEAR ON A TRANSITION PAGE BETWEEN THE EXISTING LOGIN SCREEN AND THE RETURNING USER’S SCREEN LAST LEFT OFF AT: SO, THE PAGE ORDER FOR RETURNING USERS IS:

1. LOG IN PAGE
2. WELCOME BACK TRANSITION PAGE
3. PAGE RETURNING USERS LAST LEFT OFF

**Welcome back [teacher’s first name], thanks for participating in our survey. Here are a few things to remember before you begin.**

NEXT

**(COMPLETED SURVEY)**

[**IF RESPONDENT ATTEMPTS TO LOGIN TO A COMPLETED SURVEY**]

Our records indicate that you have finished your survey. Thank you for your participation; you do not need to login again.

If you think you are receiving this message in error, or have questions about the study, please call 1-855-500-1432 or send an email to MGLS@rti.org and include the contact information you were provided.

|  |
| --- |
| ALL |

A00c.

**How to Complete the Survey**

Thank you for taking the time to complete this survey. Before you get started, here are a few helpful hints.

* Please record your answers by checking the box next to the appropriate answer or entering information as directed.
* Answer each question as accurately as possible; if you need to estimate an answer that is okay.
* Press the "Next" button to move forward.
* Press the "Previous" button to go back.
* The “Log out” link can be used to save your responses and finish later.
* To protect your answers, your responses will be automatically saved and you will be logged off if you are idle for more than 30 minutes.

Please click on the “Next” button below to continue with the survey.

**Welcome to the Middle Grades Longitudinal Study of 2017-18 (MGLS:2017) Special Education Teacher/Service Provider Questionnaire. This is the information we have on record about your school and name.**

School: [SCHOOL FILL]

Teacher: [TEACHER FILL]

SCREENER

|  |
| --- |
| aLL |

A01. First we would like to ask you some questions about your current position or assignment. Which of the following best describes your current position in this school?

7010100

🔾 Special education teacher 1

🔾 Special education teacher consultant 2

🔾 General education teacher 3

🔾 Special education classroom aide/paraprofessional 4

🔾 Speech - language pathologist 5

🔾 Physical therapist 6

🔾 Physical therapy assistant or aide 7

🔾 Occupational therapist 8

🔾 Occupational therapy assistant or aide 9

🔾 School psychologist 10

🔾 School counselor 11

🔾 School social worker 12

🔾 Other (please specify) 99

Specify (STRING ( default 255))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; Your responses are very important. Please answer as many questions as possible. Press “Edit” to return to this screen or press “Next” to continue.” |
| SOFT CHECK: IF OTHER (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| aLL |

A02. How do you classify your main assignment at this school, that is, the activity at which you spend most of your time during this school year?

7010201

🔾 Regular full-time teacher 1

🔾 Regular full-time service provider 2

🔾 Regular part-time teacher (at one school) 3

🔾 Regular part-time service provider (at one school) 4

🔾 Itinerant teacher (i.e., your assignment requires you to provide instruction/related services at more than one school) 5

🔾 Itinerant related services consultant (e.g., speech and language therapist, social worker, psychologist, behavior specialist. Your assignment requires you to provide instruction/related services at more than one school). 6

🔾 Long-term substitute 7

🔾 Teacher aide or paraprofessional 8

🔾 Other (please specify) 99

Specify (STRING (255 default))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF OTHER (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| **PROGRAMMER BOX**  **If A01 = 4 OR A02 = 8, Go to SUBMIT2** |

|  |
| --- |
| ALL |

SC00a.

Now we would like to ask some questions about each of your students who are participating in MGLS:2017. This section includes questions about individual student’s IEP and primary disability, special education services received, and goals and expectations. First, however, we would like you to confirm whether you do in fact teach (or provide services to) student(s) at your school who were selected to participate in MGLS:2017.

Press the "Next" button to proceed.

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

SC01. Have you served as the teacher or special education provider for [STUDENT NAME] at any point during this school year (2016-17)?

🔾 Yes, and I am the current teacher or special education provider for [STUDENT NAME] 1 [SEE BELOW]

🔾 Yes, although I am not currently the teacher or special education provider for [STUDENT NAME] 2 [SKIP TO SC01a]

🔾 No 3 [SKIP TO SC02]

|  |
| --- |
| HARD CHECK: IF Q#=NO RESPONSE; **Please provide an answer to this question and then click “Next.”** |
| IF SC01=1 then do:  IF SC01 HAS NOT YET BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, LOOP BACK TO SC01 AND ADMINISTER FOR THE NEXT PRELOADED STUDENT.  ELSE IF SC01 HAS BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, AND SC01 in (1,2) FOR AT LEAST ONE STUDENT, GO TO PROGRESS SUMMARY SCREEN (immediately preceding D01).  ELSE TEACHER IS INELIGIBLE; GOTO SUBMIT2. |

|  |
| --- |
| SC01 = 2 |
| <<FILL STUDENT NAME>>  RESPONSE OPTIONS WILL BE PRESENTED AS DROPDOWN LISTS. |

SC01a. In what month and year did you last serve as the teacher or special education provider for [STUDENT NAME]?

* Month
* Year

|  |
| --- |
| IF SC01 HAS NOT YET BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, LOOP BACK TO SC01 AND ADMINISTER FOR THE NEXT PRELOADED STUDENT.  ELSE IF SC01 HAS BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, AND SC01 in (1,2) FOR AT LEAST ONE STUDENT, GO TO PROGRESS SUMMARY SCREEN (immediately preceding D01).  ELSE TEACHER IS INELIGIBLE; GOTO SUBMIT2. |

|  |
| --- |
| SC01 = 3 |
| <<FILL STUDENT NAME>> |

SC02. Has anyone else at your school served as the teacher or special education provider for [STUDENT NAME] at any point during this school year (2016-17)?

🔾 Yes 1 [SKIP TO SC03]

🔾 No 2 [SEE BELOW]

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; **Your responses are very important. Please answer as many questions as possible. Press “Edit” to return to this screen or press “Next” to continue.”** |
| IF SC02=1/YES THEN GO TO SC03.ELSE IF SC01 HAS NOT YET BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, LOOP BACK TO SC01 AND ADMINISTER FOR THE NEXT PRELOADED STUDENT.  ELSE IF SC01 HAS BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, AND SC01 in (1,2) FOR AT LEAST ONE STUDENT, GO TO PROGRESS SUMMARY SCREEN (immediately preceding D01).  ELSE TEACHER IS INELIGIBLE; GOTO SUBMIT2. |

|  |
| --- |
| SC02=1 or M |
| <<FILL STUDENT NAME>> |

SC03. What is the name of the teacher or special education provider for [STUDENT NAME]?

NAME

(STRING (255 default))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; **Your responses are very important. Please answer as many questions as possible. Press “Edit” to return to this screen or press “Next” to continue.”** |

|  |
| --- |
| PROGRAMMER BOX  IF SC01 HAS NOT YET BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, LOOP BACK TO SC01 AND ADMINISTER FOR THE NEXT PRELOADED STUDENT.  ELSE IF SC01 HAS BEEN ADMINISTERED FOR EACH PRELOADED STUDENT ASSOCIATED WITH THE TEACHER RESPONDENT, AND SC01 in (1,2) FOR AT LEAST ONE STUDENT, GO TO PROGRESS SUMMARY SCREEN (immediately preceding D01).  ELSE TEACHER IS INELIGIBLE; GOTO SUBMIT2. |

**D. STUDENT INFORMATION**

|  |
| --- |
| PROGRESS SUMMARY SCREEN |
| THIS SCREEN APPRISES THE RESPONDENT OF THEIR PROGRESS BY LISTING THE STUDENTS FOR WHOM THE RESPONDENT HAS ALREADY ANSWERED QUESTIONS (IF APPLICABLE), AS WELL AS THE REMAINING STUDENTS FOR WHOM THE RESPONDENT WILL STILL BE ASKED QUESTIONS.  **We have additional questions for you about this/these students:**   * + [PRELOADED STUDENT 1 NAME]   + [PRELOADED STUDENT 2 NAME]   + [PRELOADED STUDENT 3 NAME] |
| GO TO D01. |

|  |
| --- |
| SC01 in (1,2) |
| <<FILL STUDENT NAME>> |

D01. The next questions are about [STUDENT NAME]'s IEP status and grade.

7040100

Is [STUDENT NAME] currently receiving gifted/talented services or has [STUDENT NAME] received such services during this school year?

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| SC01 in (1,2) |
| <<FILL STUDENT NAME>> |

D02. Is [STUDENT NAME] currently receiving special education services through an IEP, due to a disability, or has [STUDENT NAME] received such services during this school year?

7040200

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| PROGRAMMER BOX  **If D02 = 2 OR M, Go to CONFIRM** |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

D03. In what capacity or capacities do you teach or provide services to [STUDENT NAME]? Do you…

Select all that apply.

|  |  |
| --- | --- |
| 7040301 | 🞏 a. Provide instruction directly to the student? 1 |
| 7040302 | 🞏 b. Provide related services directly to the student? 2 |
| 7040303 | 🞏 c. Provide consultation services directly to the student? 3 |
| 7040304 | 🞏 d. Provide indirect consultation services (e.g., consultation to the student's teacher)? 4 |
| 7040305 | 🞏 e. Provide case management? 5 |
| 7040306 | 🞏 f. Other (please specify)? 99 |
|  | (STRING (255 default)) |

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF OTHER (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

D04. In which grade is [STUDENT NAME] enrolled?

7040400

🔾 Sixth grade 1

🔾 This is an ungraded classroom 2

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

D05. When did [STUDENT NAME] first have an IEP?

7040500

🔾 Before sixth grade 1

🔾 During sixth grade 2

🔾 Don’t know d

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
|  |

|  |
| --- |
| D02=1 AND (D04 +1 > OR = D05) |

D06. Is this [STUDENT NAME]'s first year enrolled at this school?

7040600

🔾 Yes 1

🔾 No 2 [SKIP TO D09]

🔾 Don’t know d [SKIP TO D09]

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D06=1, M, go to D07; Else, skip to D09. |
| <<FILL STUDENT NAME>> |

D07. To what extent were you involved in planning the transition from the previous school's special education program for [STUDENT NAME]?

7040700

🔾 Not at all 1 [SKIP TO D09]

🔾 Somewhat 2

🔾 Extensively 3

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D07=2, 3, M |
| <<FILL STUDENT NAME>>  FILL HIS OR HER FROM SEX IN PRELOAD |

D08. To what extent did you communicate with the person who provided special education for [STUDENT NAME] at [HIS/HER] previous school?

7040800

🔾 Not at all 1

🔾 Somewhat 2

🔾 Extensively 3

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| If D05=1, go to FE0D09; Else, go to FE0E01. |
| <<FILL STUDENT NAME>> |

D09. Have you reviewed [STUDENT NAME]’s records related to special education services provided before this school year?

7040900

🔾 Yes 1

🔾 No, I do not have access to the records 2

🔾 No, I have access to the records, but have not reviewed them. 3

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

**E. SERVICES RECEIVED**

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>>  <<FILL HE/SHE>>  FILL HIS OR HER FROM SEX IN PRELOAD |

E01. Next we would like to know about this student’s disability and the services [HE/SHE] may receive.

For which of the following disabilities has [STUDENT NAME] received special education or related services this school year, whether for [HIS/HER] primary disability or another of [HIS/HER] disabilities?

*Select all that apply.*

|  |  |
| --- | --- |
| 7050101 | 🞏 a. Speech or language impairment 1 |
| 7050102 | 🞏 b. Specific learning disability 2 |
| 7050103 | 🞏 c. Emotional disturbance 3 |
| 7050104 | 🞏 d. Intellectual disability 4 |
| 7050105 | 🞏 e. Visual impairment (including blindness) 5 |
| 7050106 | 🞏 f. Hearing impairment (including deafness) 6 |
| 7050107 | 🞏 g. Orthopedic impairment 7 |
| 7050112 | 🞏 h. Other health impairment (specify: Please specify the other health impairment(s) for which the student receives services. ) 8 |
|  | (STRING (255 default)) |
| 7050108 | 🞏 i. Autism 9 |
| 7050109 | 🞏 j. Traumatic brain injury 10 |
| 7050110 | 🞏 k. Deaf-blindness 11 |
| 7050111 | 🞏 l. Multiple disabilities (students included in this category should be those who have more than one severe disability which does not include deaf-blindness) (specify: Please specify the other multiple disabilities for which the student receives services. ) (SPECIFY) 99 |
|  | (STRING (255 default)) |

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF OTHER (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| D02=1; IF E01>1, GO TO E02; ELSE GO TO E03. |
| <<FILL STUDENT NAME>>  FILL HIS OR HER FROM SEX IN PRELOAD |

E02. What is [STUDENT NAME]’s primary disability as identified on [HIS/HER] IEP?

7050200

🔾 Speech or language impairment 1

🔾 Specific learning disability 2

🔾 Emotional disturbance 3

🔾 Intellectual disability 4

🔾 Visual impairment (including blindness) 5

🔾 Hearing impairment (including deafness) 6

🔾 Orthopedic impairment 7

🔾 Other health impairment (please specify) 8

(STRING (255 default))

🔾 Autism 9

🔾 Traumatic brain injury 10

🔾 Deaf-blindness 11

🔾 Multiple disabilities (students included in this category should be those who have more than one primary disability which does not include deaf-blindness) 99

(please specify) (STRING (255 default))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| D02=1 |

E03. Has [STUDENT NAME] received any special education or related services because of Attention Deficit Disorder (ADD) or Attention Deficit Hyperactivity Disorder (ADHD)?

7050300

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

E04. Consider the IEP goals for [STUDENT NAME] during this school yea

Select all of the areas in which this student has IEP goals.

*.*

***Academics***

🞏 a. Reading 1

7050402

7050419

🞏 b. Mathematics 2

7050403

🞏 c. Language Arts 3

🞏 d. Science 4

7050404

🞏 e. Social Studies 5

7050405

***Speech and Language***

🞏 f. Auditory processing 6

7050408

7050407

🞏 g. Listening comprehension 7

7050409

🞏 h. Oral expression 8

7050410

🞏 i. Voice/speech articulation, quality, or fluency 9

7050411

🞏 j. Language pragmatics 10

***Social-Emotional***

7050413

🞏 k. Social skills 11

🞏 l. Behavior regulation 12

7050414

🞏 m. Emotional or mood regulation 13

7050415

***Life Skills***

🞏 n. Adaptive behavior or self-help skills 14

7050417

🞏 o. Transition and postsecondary goals 15

7050418

🞏 p. Organizational and planning skills 16

7050420

***Physical/Mobility***

🞏 q. Fine motor skills 17

7050422

🞏 r. Gross motor skills 18

7050423

🞏 s. Orientation and mobility 19

7050424

***Other***

🞏 t. Other (Please specify) 99

7050425

Specify (STRING (255 default))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF OTHER (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

E05. Which of the following related services have been provided through the school to [STUDENT NAME] during this school year?

*Select all that apply.*

|  |  |
| --- | --- |
| 7050501 | 🞏 a. Audiology 1 |
| 7050502 | 🞏 b. Counseling services 2 |
| 7050503 | 🞏 c. Occupational therapy 3 |
| 7050504 | 🞏 d. Physical therapy 4 |
| 7050505 | 🞏 e. Psychological services 5 |
| 7050506 | 🞏 f. Health services 6 |
| 7050507 | 🞏 g. Social work services 7 |
| 7050508 | 🞏 h. Special transportation 8 |
| 7050509 | 🞏 i. Speech or language therapy 9 |
| 7050510 | 🞏 j. Orientation services 10 |
| 7050511 | 🞏 k. Mobility services 11 |
| 7050512 | 🞏 l. Rehabilitation services 12 |
| 7050513 | 🞏 m. Other (please specify) 99 |
|  | (STRING (255 default)) |

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF OTHER (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

E06. Has [STUDENT NAME] received any of the following?

PROGRAMMER: CODE ONE PER ROW

*Select one per row.*

|  |  | Yes | No |
| --- | --- | --- | --- |
| 7050601 | a. Adaptive physical education | 1 🔾 | 2 🔾 |
| 7050602 | b. Assistance from classroom aides or paraprofessionals (e.g., teacher aide, behavioral assistant, special education aide) | 1 🔾 | 2 🔾 |
| 7050603 | c. Interpreter for the deaf or hard of hearing (oral or sign) | 1 🔾 | 2 🔾 |
| 7050604 | d. Materials provided in Braille or Nemeth code to support learning/instruction | 1 🔾 | 2 🔾 |
| 7050605 | e. Student was taught how to use Braille and/or the Nemeth code | 1 🔾 | 2 🔾 |
| 7050606 | f. Instruction provided in American Sign Language | 1 🔾 | 2 🔾 |
| 7050607 | g. Student was taught how to use American Sign Language | 1 🔾 | 2 🔾 |
| 7050608 | h. Instruction provided in Manual English | 1 🔾 | 2 🔾 |
| 7050609 | i. Student was taught how to use Manual English | 1 🔾 | 2 🔾 |
| 7050610 | j. Instruction provided in Cued Speech | 1 🔾 | 2 🔾 |
| 7050611 | k. Student was taught how to use Cued Speech | 1 🔾 | 2 🔾 |
| 7050612 | l. Mental health services, personal/group counseling, therapy, or psychiatric care provided to the student | 1 🔾 | 2 🔾 |
| 7050613 | m. Tutoring/remediation from special education teacher | 1 🔾 | 2 🔾 |
| 7050614 | n. Training, counseling, and other supports/services provided to this student's family | 1 🔾 | 2 🔾 |
| 7050615 | o. Assistive technology | 1 🔾 | 2 🔾 |

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

**F. INSTRUCTIONAL SETTINGS AND MATERIALS**

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

F01. Now we have a few questions about where and how this student receives instruction.

7060100

Which of the following best describes [STUDENT NAME]’s classroom placement?

🔾 In general education classroom 80% of the time or more. 1

🔾 In general education classroom 40% to 79% of the time. 2

🔾 In general education classroom less than 40% of the time. 3

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

F02A. In what setting does [STUDENT NAME] primarily receive mathematics instruction?

7060201

🔾 General education classroom 1

🔾 Special education classroom 2

🔾 Resource room 3

🔾 Some other setting (specify) 99

Specify (STRING (255 default))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF OTHER (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

F02AB. Does [STUDENT NAME] receive mathematics instruction in any additional setting or settings?

7060202

🔾 Yes 1

🔾 No 2 GO TO F03

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| F02AB=1 |
| <<FILL STUDENT NAME>>  <<HIDE RESPONSE TO F02A>> |

F02B. In what additional setting or settings does [STUDENT NAME] receive mathematics instruction?

Select all that apply.

🞏 a. General education classroom 1

7060203

7060204

🞏 b. Special education classroom 2

🞏 c. Resource room 3

7060205

🞏 d. Some other setting (specify) 99

7060206

Specify (STRING (255 default))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF OTHER (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

F03. On average, how many hours per week of direct special education and related services has [STUDENT NAME] received this school year?

7060300

Please include hours for any services in which you or another professional staff member at your school provided services directly to [STUDENT NAME], and also hours for any services [STUDENT NAME] received through a referral to another professional. Do not include paraprofessional services.

HOURS PER WEEK

(NUMBER RANGE ALLOW 0 – 70 AND UP TO ONE DECIMAL PLACE)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D02=1 |

F04. Of the hours of direct special education and related services reported above, approximately how many of those hours per week were the instruction/services provided outside of a general education classroom but within the school setting?

7060400

HOURS PER WEEK

(NUMBER RANGE ALLOW 0 – 70 AND UP TO ONE DECIMAL PLACE)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| HARD CHECK: IF F04>F03; **Your answer is greater than the number of hours you reported in the previous question. Go back if you would like to change your answer to the previous question OR change your answer to this question, and then click “Next.”** |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

F05. What teaching practices and methods have you and/or other special education service providers used with [STUDENT NAME]?

*Select all that apply.*

|  |  | | |  |
| --- | --- | --- | --- | --- |
| 7060501 | | 🞏 | a. One-on-one instruction 1 | |
| 7060502 | | 🞏 | b. Small-group instruction 2 | |
| 7060503 | | 🞏 | c. Large-group instruction 3 | |
| 7060504 | | 🞏 | d. Cooperative learning 4 | |
| 7060505 | | 🞏 | e. Peer tutoring 5 | |
| 7060506 | | 🞏 | f. Computer-based instruction 6 | |
| 7060507 | | 🞏 | g. Direct instruction 7 | |
| 7060508 | | 🞏 | h. Cognitive strategies 8 | |
| 7060509 | | 🞏 | i. Self-management 9 | |
| 7060510 | | 🞏 | j. Behavior management 10 | |
| 7060511 | | 🞏 | k. Instruction received through a sign interpreter 11 | |
| 7060512 | | 🞏 | l. Video-based instruction 12 | |
| 7060513 | | 🞏 | m. Audio-recorded texts or lessons 13 | |
| 7060514 | | 🞏 | n. Use of visual organizers or visual models 14 | |
| 7060515 | | 🞏 | o. Use of 3-dimensional materials and/or models (e.g., base ten blocks, fraction bars) 15 | |
| 7060516 | | 🞏 | p. Student did not receive instruction from me and/or other special education service providers 16 | |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. | | | | | |
| SOFT CHECK: Please program so respondent can either select “STUDENT DID NOT RECEIVE INSTRUCTION FROM ME AND/OR OTHER SPECIAL EDUCATION SERVICE PROVIDERS” OR ANY OTHER RESPONSE CATEGORY BUT NOT BOTH. | | | | | |

|  |
| --- |
| D02=1; F02a=1 OR F02b=1 |
| <<FILL STUDENT NAME>> |

F06. Which of the following math curriculum materials were used with [STUDENT NAME] in the general education classroom?

PROGRAMMER: CODE ONE PER ROW

*Select one per row.*

|  |  | Yes | No | Don’t know |
| --- | --- | --- | --- | --- |
| 7060601 | a. General education curriculum materials were used without modification | 1 🔾 | 2 🔾 | d 🔾 |
| 7060602 | b. General education curriculum materials were used with some modifications | 1 🔾 | 2 🔾 | d 🔾 |
| 7060603 | c. General education curriculum materials were used with substantial modifications | 1 🔾 | 2 🔾 | d 🔾 |
| 7060604 | d. Specially-designed commercial materials were used | 1 🔾 | 2 🔾 | d 🔾 |
| 7060605 | e. Teacher-designed materials were used | 1 🔾 | 2 🔾 | d 🔾 |

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

F07. Which of the following best describes the curriculum materials used with [STUDENT NAME] in the special education classroom/program?

PROGRAMMER: CODE ONE PER ROW

*Select one per row.*

|  |  | Yes | No | Don’t know |
| --- | --- | --- | --- | --- |
| 7060701 | a. General education curriculum materials were used without modification | 1 🔾 | 2 🔾 | d 🔾 |
| 7060702 | b. General education curriculum materials were used with some modifications | 1 🔾 | 2 🔾 | d 🔾 |
| 7060703 | c. General education curriculum materials were used with substantial modifications | 1 🔾 | 2 🔾 | d 🔾 |
| 7060704 | d. Specially-designed commercial materials were used | 1 🔾 | 2 🔾 | d 🔾 |
| 7060705 | e. Teacher-designed materials were used | 1 🔾 | 2 🔾 | d 🔾 |

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

F08. Which of the following assistive technologies and devices has [STUDENT NAME] used this school year?

Select all that apply.

***Mobility aids***

🞏 a. Vans, vehicles 1

7060801

🞏 b. Wheelchairs 2

7060802

🞏 c. White canes 3

7060803

***Communication aids***

🞏 d. Electronic with voice output (e.g., Touch Talker) 4

7060804

🞏 e. Nonelectronic (e.g., manual printing board or picture exchange system) 5

7060805

***Hearing assistance***

7060806

🞏 f. Hearing aids 6

🞏 g. FM loops 7

7060807

🞏 h. TTYs/TDDs 8

7060808

🞏 i. Cochlear implants 9

7060809

🞏 j. Real time captioning 10

7060810

***Visual aids***

🞏 k. Braille texts 11

7060811

🞏 l. Electronic Braille devices 12

7060813

7060812

🞏 m. Digital texts 13

🞏 m. Magnifying devices 14

7060814

🞏 o. Closed Captioned Television (CCTV) 15

7060815

🞏 p. Screen readers 16

7060816

🞏 q. Talking calculators 17

7060817

🞏 r. Abacus 18

7060818

***Learning aids***

🞏 s. Tape recorder or digital recorder 19

7060819

🞏 t. Calculators 20

7060820

🞏 u. Electronic spelling devices 21

7060821

🞏 v. Dictation software 22

7060822

***Computer hardware designed or adapted for students with disabilities (e.g., alternate keyboards, switch interface)***

🞏 w. Used solely by individual student 23

7060823

🞏 x. Shared with other students 24

7060824

***Computer software designed for students with disabilities***

🞏 y. Reading 25

7060826

7060825

7060100

🞏 z. Writing 26

🞏 aa. Mathematics 27

7060827

***Other***

🞏 ab. Other (please specify) 99

7060829

Specify (STRING (255 default))

***Student did not use any assistive technologies***

7060828

🞏 ac. Student did not use any assistive technologies 28

🞏 ad. Don’t know

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| **PROGRAMMER BOX:**  **Please program so respondent can either select “STUDENT DID NOT USE ANY ASSISTIVE TECHNOLOGIES” or any other response category but not both.** |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>>  FILL HIM OR HER FROM SEX IN PRELOAD |

F09. Does [STUDENT NAME] have a computer, laptop, tablet, or word processing device assigned to [HIM/HER] for use full time?

7060900

🔾 Yes 1

🔾 No 2

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

**G.** **Communication with teachers and parents**

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

G01. The following questions ask about your communications with others regarding this student.

7070100

On average, how often have you met with general education teacher(s) to discuss [STUDENT NAME]’s IEP or progress during this school year?

🔾 Every day or several times a week 1

🔾 Once a week or several times a month 2

🔾 Once a month 3

🔾 A few times over the school year 4

🔾 Once during this school year 5

🔾 Never during this school year 6 [SKIP TO G03]

🔾 Not applicable to my work with this student 7 [SKIP TO G03]

🔾 Not applicable as student receives all instruction from me 8 [SKIP TO G03]

NO RESPONSE M [SKIP TO G03]

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| G01=1, 2, 3, 4, 5 |
| <<FILL STUDENT NAME>> |

G02. On average, how long were the meetings with the general education teacher(s) to discuss [STUDENT NAME]’s IEP or progress?

7070200

🔾 1 to 15 minutes 1

🔾 16 to 30 minutes 2

🔾 31 to 45 minutes 3

🔾 46 to 60 minutes 4

🔾 More than 60 minutes 5

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

G03. Approximately how often have you communicated with [STUDENT NAME]’s parents during this school year about [STUDENT NAME]’s IEP or progress (by phone, in person, or in writing, including email)?

7070300

🔾 Every day or several times a week 1

🔾 Once a week or several times a month 2

🔾 Once a month 3

🔾 A few times over the school year 4

🔾 Once during this school year 5

🔾 Never during this school year 6

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

**H. GOALS AND EXPECTATIONS**

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

H01. During this school year, has [STUDENT NAME] received formal individual evaluations in any of the following areas for purposes of developing IEP goals?

Select all that apply.

|  |  |
| --- | --- |
| 7080101 | 🞏 a. Psychological 1 |
| 7080102 | 🞏 b. Social work services 2 |
| 7080103 | 🞏 c. Behavioral 3 |
| 7080104 | 🞏 d. Speech/language 4 |
| 7080105 | 🞏 e. Vision 5 |
| 7080106 | 🞏 f. Hearing 6 |
| 7080107 | 🞏 g. Learning style 7 |
| 7080108 | 🞏 h. Motor skills 8 |
| 7080109 | 🞏 i. Academics 9 |
| 7080110 | 🞏 j. Other (please specify) 99 |
|  | (STRING (255 default)) |

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF OTHER (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>>  FILL: HIS OR HER FROM SEX IN PRELOAD |

H02. To what extent is [STUDENT NAME] expected to achieve the same general education goals as other students at [HIS/HER] grade level?

7080200

🔾 Student is expected to attain grade level achievement for all of the academic content standards. 1

🔾 Student is expected to attain grade level achievement for some of the academic content standards. 2

🔾 Student is expected to attain grade level achievement for only a few of the academic content standards. 3

🔾 Student is not expected to attain grade level achievement for any of the academic content standards. 4

🔾 Don’t know d

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

H04. Which of the following best expresses the likelihood that [STUDENT NAME] will continue to receive some level of special education services (through an IEP) in the next school year?

7080400

🔾 Definitely will continue in special education 1

🔾 Very likely to continue in special education 2

🔾 Rather likely to continue in special education 3

🔾 Rather unlikely to continue in special education 4

🔾 Very unlikely to continue in special education 5

🔾 Definitely will not continue in special education (will be dismissed from services) 6

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

H05. To what extent has [STUDENT NAME] participated in any grade-level assessment administered as part of the school’s testing program during the current school year?

7080500

🔾 Student did not participate in the school’s testing or assessment program. 1

🔾 Student participated in alternate assessments and no regular assessments. 2

🔾 Student participated in some alternate assessments and some regular assessments. 3

🔾 Student participated fully in the school’s regular testing or assessment program. 4

🔾 There is no testing or assessment program at this grade level. 5

🔾 Don’t know d

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

H06A. Overall, at what grade level is [STUDENT NAME] performing in language and literacy skills?

7080600

🔾 Preschool to Grade 2 1

🔾 Grade 3 2

🔾 Grade 4 3

🔾 Grade 5 4

🔾 Grade 6 5

🔾 Grade 7 6

🔾 Grade 8 7

🔾 Grade 9 8

🔾 Grade 10 or higher 9

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| D02=1 |
| <<FILL STUDENT NAME>> |

H06B. Overall, at what grade level is [STUDENT NAME] performing in mathematical skills?

7080601

🔾 Preschool to Grade 2 1

🔾 Grade 3 2

🔾 Grade 4 3

🔾 Grade 5 4

🔾 Grade 6 5

🔾 Grade 7 6

🔾 Grade 8 7

🔾 Grade 9 8

🔾 Grade 10 or higher 9

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>>  <<FILL STUDENT SEX = his or her>> |

**A00. Thank you for answering our questions about the services [FILL STUDENT NAME] receives!**

**The next set of questions asks you to please rate [FILL STUDENT NAME]’s reading and mathematics skills as well as [his/her] functional abilities.**

|  |
| --- |
| All |
| <<FILL STUDENT SEX = him or her>> |

**A00a. Please rate the student's skills, knowledge, and behaviors based on your experience with [him/her]. This is NOT a test and should not be administered directly to the student.**

Each question includes examples that are meant to help you think of the range of situations in which the student may demonstrate the skills and behaviors. The examples are not exhaustive, but they do indicate the level of proficiency a student should have reached in order to receive the highest ratings.

It may be necessary to consider adaptations for some questions to make them more inclusive for this student's skills and/or use of adaptive equipment. For example, if a student utilizes alternative forms of verbal communication (e.g., sign language, communication boards) or written communication (e.g., word processors, Braille, dictation), please answer the questions with these adaptations in mind.

Each skill, knowledge, or behavior is rated on a five-point scale:

1 Not yet = Student has not yet demonstrated skill, knowledge, or behavior

2 Beginning = Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently

3 In progress = Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence

4 Intermediate = Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient

5 Proficient = Student demonstrates skill, knowledge, or behavior competently and consistently

For students with Limited English Proficiency or English language learners: Please answer the questions based on your knowledge of this student's skills. If the student does not yet demonstrate skills in English but does demonstrate them in his/her native language, please answer the questions with the student's native language in mind. You can also consult with the student’s English language learner teacher or general education teacher to answer any question. If you feel you cannot answer any question, you will also have the option to indicate you are “unable to assess the student.”

**I. READING SKILLS AND ABILITIES**

|  |
| --- |
| all |
| <<FILL STUDENT NAME>>  FILL HIM OR HER FROM SEX IN PRELOAD  FILL HIS OR HER FROM SEX IN PRELOAD |

**I04. In this section, please rate [STUDENT NAME]’s reading-related abilities, including language, literacy, and listening comprehension skills. Let’s begin.**

7090400

**[STUDENT NAME] shows basic comprehension of a story or text read aloud to [him/her}. For example, by retelling a story just read to the group, or telling about why a story ended as it did, or connecting part of the story to [his/her} own life.**

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| all |
| <<FILL STUDENT NAME>> |

**I07. [STUDENT NAME] reads words with regular vowel sounds. For example, reads “coat,” “junk,” “lent,” “chimp,” “halt,” or “bite.”**

7090700

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| all |
| <<FILL STUDENT NAME>> |

**I08. [STUDENT NAME] reads words with irregular vowel sounds. For example, reads "through," "point," "enough," or "shower."**

7090800

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| all |
| <<FILL STUDENT NAME>>  FILL STUDENT SEX = him or her AND he or she |

**I05. [STUDENT NAME] shows advanced comprehension of text read aloud to {him/her}. For example, identifies the author’s purpose, or relates how the story would be different if told from another point of view, or identifies techniques of persuasion.**

7090500

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| all |
| <<FILL STUDENT NAME>> |

**I03. [STUDENT NAME] conveys ideas clearly when speaking. For example, presents a well-organized oral report, or uses precise language to express opinions, feelings, and ideas, or provides relevant answers to questions that summarize classmates’ concerns.**

7090300

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE;see earlier programmer note. |

|  |
| --- |
| aLL |
| <<FILL STUDENT NAME>> |

**I06. [STUDENT NAME] uses different strategies to read unfamiliar words. For example, examines cues from pictures or context, or uses consonant sounds to read words, or uses prior knowledge in order to make predictions.**

7090600

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| all |
| <<FILL STUDENT NAME>>  FILL STUDENT GRADE FROM I04; IF I04 = ungraded or missing, fill “grade 6” for OFT and first round of the National study. In subsequent rounds of data collection, the fill should reflect the grade for the majority of students. |

I10. [STUDENT NAME] reads grade [enter grade level] books independently with comprehension. For example, reads most words correctly and answers questions about what was read, makes predictions while reading, and retells the story after reading.

7091000

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| all |
| <<FILL STUDENT NAME>>  FILL STUDENT GRADE FROM I04; IF I04 = ungraded or missing, fill “grade 6” for OFT and first round of the National study. In subsequent rounds of data collection, the fill should reflect the grade for the majority of students. |

**I09. [STUDENT NAME] reads grade {STUDENT GRADE FILL} books fluently. For example, easily reads words in meaningful phrases rather than reading word by word.**

7090900

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| all |
| <<FILL STUDENT NAME>>  FILL: HE OR SHE FROM SEX IN PRELOAD |

I11. [STUDENT NAME] reads and comprehends expository text. For example, after reading about how early colonists lived, creates a chart comparing life today with colonial life, or after reading a news story about pollution, [HE/SHE] identifies cause and effect relationships, or summarizes main ideas and the supporting details in a science or social studies selection.

7091100

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

**I02. [STUDENT NAME] contributes relevant information to classroom discussions. For example, during a class discussion, can express an idea or a personal opinion on a topic and the reasons behind the opinion.**

7090200

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

**I01.**

7090100

[STUDENT NAME] uses complex sentence structures. For example, says "If she had brought her umbrella, she wouldn't have gotten wet," or "Yesterday it was raining cats and dogs," or "Why can't we go on the field trip after we finish the assignment that you gave us last week?"

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

**J. MATHEMATICS SKILLS AND ABILITIES**

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

Now we would like to know about this student's mathematics skills and abilities.

J03. [STUDENT NAME] shows an understanding of the relationship between quantities. For example, knows that a group of ten small stones is the same quantity as a group of ten larger blocks.

7100300

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

J02. [STUDENT NAME] creates and extends patterns. For example, extends an alternating pattern involving addition and subtraction (+3, -1, +3, -1, +3... or +5, -3, +5, -3,... ) or creates a complex visual pattern (aabc).

7100200

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

**PROGRAMMER: (+3, -1, +3, -1, +3… or +5, -3, +5, -3,…) should start at beginning of second line, so that the full pattern is on the same line.**

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

J01. [STUDENT NAME] sorts, classifies, and compares math materials by various rules and attributes. For example, by creating a rule for sorting keys, such as "keys with numbers" in one pile and "keys without numbers" in another pile, or by sorting shapes by several attributes such as "large plastic shapes" and "small wooden shapes."

7100100

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

**J09. [STUDENT NAME] solves problems involving numbers using concrete objects. For example, "Vera has six blocks, George has three, how many blocks are there in all?" or "How many do I need to give George so he will have the same number of blocks as Vera?"**

7100900

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

J04. [STUDENT NAME] demonstrates an understanding of place value to 100. For example, by explaining that fourteen is ten plus four, or using two stacks of ten and five single cubes to represent the number 25.

7100400

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

J11. [STUDENT NAME] subtracts numbers that require regrouping. For example, 1300 - 579, or 2302 - 947, or 2603 - 1594.

7101100

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

J05. [STUDENT NAME] shows understanding of place value with whole numbers to 100,000. For example, correctly orders the numbers 19,321, 14,999, 9,900, and 20,101 from least to greatest, or correctly regroups when adding and subtracting.

7100500

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE;see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

J07. [STUDENT NAME] models, reads, writes, and compares fractions. For example, shows that ½ of the candy bar is ¼ + ¼, or shows that ¼ of 12 is 3.

7100700

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE;see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

J08. [STUDENT NAME] reduces fractions to lowest denominator. For example, reduces 27/63 to 3/7, or 41/6 to 6 5/6.

7100800

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

J12. [STUDENT NAME] divides a 3-digit number by a 1-digit number. For example, 348÷4 or 228÷6.

7101200

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

J06. [STUDENT NAME] shows understanding of place values with decimals. For example, compares decimals to the thousandths place (1.04 > 1.009).

71006000

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

**PROGRAMMER: (1.04 > 1.009) should appear on the same line.**

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

J13. [STUDENT NAME] divides multi-digit problems with remainders in the quotient. For example, computes 536÷30 or 6135÷7.

7101300

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

**J10. [STUDENT NAME] uses a variety of strategies to solve math problems. For example, using manipulative materials, using trial and error, making an organized list or table, drawing a diagram, looking for a pattern, acting out a problem, or talking with others.**

7101000

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>>  FILL HIM OR HER FROM SEX IN PRELOAD |

**J14. [STUDENT NAME] demonstrates algebraic thinking. For example, solves for an unknown in an equation such as 16 x A = 48; or expresses a function as a general rule that enables [him/her] to determine any term in the sequence.**

7101400

🔾 Not yet-Student has not yet demonstrated skill, knowledge, or behavior 1

🔾 Beginning-Student is just beginning to demonstrate skill, knowledge, or behavior but does so very inconsistently 2

🔾 In progress- Student demonstrates skill, knowledge, or behavior with some regularity but varies in level of competence 3

🔾 Intermediate-Student demonstrates skill, knowledge, or behavior with increasing regularity and average competence but is not completely proficient 4

🔾 Proficient-Student demonstrates skill, knowledge, or behavior competently and consistently 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

**K. FUNCTIONAL SKILLS AND ABILITIES**

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

**The next few questions ask about this student's functional abilities.**

K01. Which of the following best describes [STUDENT NAME]’s expressive communication?

7110100

🔾 Uses symbolic language to communicate: Student uses verbal or written words, signs, Braille, or language-based augmentative systems to request, initiate, and respond to questions, describe things or events, and express refusal 1

🔾 Uses intentional communication, but not at a symbolic language level: Student uses understandable communication through such modes as gestures, pictures, objects/textures, points, etc., to clearly express a variety of intentions. 2

🔾 Student communicates primarily through cries, facial expressions, change in muscle tone, etc., but no clear use of objects/textures, regularized gestures, pictures, signs, etc., to communicate. 3

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

K02. Does [STUDENT NAME] use an augmentative communication system in addition to or in place of oral speech?

7110200

🔾 Yes 1

🔾 No 2

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

K03. Which of the following best describes [STUDENT NAME]’s vision?

7110300

🔾 Vision appears to be within normal limits 1

🔾 Corrected vision within normal limits 2

🔾 Low vision; uses vision for some activities of daily living 3

🔾 No functional use of vision for activities of daily living, or unable to determine functional use of vision 4

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

**K04. Which of the following best describes [STUDENT NAME]’s hearing?**

7110400

🔾 Hearing appears to be within normal limits 1

🔾 Corrected hearing loss within normal limits 2

🔾 Hearing loss aided, but still with a significant loss 3

🔾 Profound loss, even with aids 4

🔾 Unable to determine functional use of hearing 5

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

**K05. Which of the following best describes [STUDENT NAME]’s motor abilities?**

7110500

🔾 No significant motor dysfunction that requires adaptations 1

🔾 Requires adaptations to support motor functioning (e.g., walker, adapted utensils, and/or keyboard) 2

🔾 Uses wheelchair, positioning equipment, and/or assistive devices for most activities 3

🔾 Needs personal assistance for most/all motor activities 4

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| ALL |
| <<FILL STUDENT NAME>> |

**K06. Which of the following best describes [STUDENT NAME]’s social interactions?**

7110600

🔾 Initiates and sustains social interactions 1

🔾 Responds with social interaction, but does not initiate or sustain social interactions 2

🔾 Alerts to others 3

🔾 Does not alert to others 4

NO RESPONSE M

I am unable to assess the student 6

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| PROGRAMMER BOX  IF STUDENT-SPECIFIC QUESTIONS HAVE BEEN ADMINISTERED FOR EACH STUDENT WHERE SC01 in (1,2), THEN GO TO A03.  ELSE LOOP BACK TO THE PROGRESS SUMMARY SCREEN (immediately preceding D01) TO ADMINISTER STUDENT-SPECIFIC QUESTIONS FOR THE NEXT STUDENT WHERE SC01 in (1,2). |

**A. YOUR TEACHING ASSIGNMENT AND YOUR SCHOOL**

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

A03. You have completed the portion of the survey about your students that are in the study. Thank you.

7010300

Now we have some questions about you and your instructional practices.

Do you coteach with another teacher or professional educator?

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

IF A03 = 2 OR M, GO TO A05

|  |
| --- |
| {A03=1} |

A04. Which of the following models best describes your current coteaching arrangement?

7010401

🔾 One teach, one drift (one teacher leads the class and the other moves throughout the classroom to make sure everyone is on track). 1

🔾 Station teaching (class divided into two or more stations; each teacher spends at least half of the period with one group, and then teachers switch). 2

🔾 Alternative teaching (one teacher teaches the large group and the other teacher works with a smaller group of students to reteach any necessary information). 3

🔾 Parallel teaching (both teachers are teaching at the same time, and both lead discussion; class may be divided into groups). 4

🔾 Team teaching (both coteachers balance the responsibilities of the class in such a way that both teach the same amount in front of the classroom). 5

🔾 Other (please specify) 99

Specify (STRING (255 default))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF OTHER (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

A05. During this school year, where have you worked with students with IEPs?

|  | Select all that apply. |
| --- | --- |
| 7010501 | 🞎 a. In a general education classroom 1 |
| 7010502 | 🞎 b. In a special education classroom 2 |
| 7010503 | 🞎 c. In a nonclassroom space (e.g. office, therapy room, small work space, mobile van, etc.) 3 |
| 7010504 | 🞎 d. Other (please specify) 99 |
|  | (STRING (255 default)) |
| 7010505 | 🞎 e. I do not work directly with students who have IEPs 4 |

NO RESPONSE……………………………………………………………..M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF OTHER (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| **PROGRAMMER BOX:**  **Please program so respondent can either select “I DO NOT WORK DIRECTLY WITH STUDENTS WHO HAVE IEPS” or any other response category but not both.** |

|  |
| --- |
| [{IF A01 IS 1 or 2} |

A07A. Do you teach academic content to students who have IEPs?

7010700

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| [{IF A07a = 1 }] |

A07B. When teaching academic content to students who have IEPs, how often do you use each of the following instructional strategies?

PROGRAMMER: CODE ONE PER ROW

*Select one per row.*

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | Never | Once a month or less | Two or three times a month | Once or twice a week | Three or four times a week | Every day |
| 7010710 | a. Provide students with background knowledge and skills | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010711 | b. Provide practice for prescribed strategies | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010712 | c. Incorporate systematic cumulative reviews of skills and information | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010713 | d. Include self-regulation strategies that promote on-task thinking and hard work | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010714 | e. Explicitly teach for transfer of skills and strategies | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010715 | f. Use validated forms of progress monitoring of student responsiveness to the instruction or intervention | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010716 | g. Apply validated decision-making rules with progress monitoring tools to determine when to revise the program | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| **PROGRAMMER BOX FOR A07B**  HYPERLINK THE WORDS **“validated forms of progress monitoring**” AND “**validated decision-making rules**” FOR A07B QUESTION TEXT WITH EACH HYPERLINK CONTAINING ONLY ITS CORRESPONDING DEFINITION  **Validated forms of progress monitoring** are tools and methods that have been found by research to relate to student performance on more in depth assessments and student outcomes. **Validated decision-making rules** have been tested by researchers and found to reliably indicate when a change is needed. |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8} |

A06. Do you teach mathematics to students who have IEPs?

7010600

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| If FE0A06=1, go to FE0A07;  Else, go to FE0A07C. |

A07. When teaching mathematics to students who have IEPs, how often do you use each of the following instructional strategies?

PROGRAMMER: CODE ONE PER ROW

*Select one per row.*

|  |  | Never | Once a month or less | Two or three times a month | Once or twice a week | Three or four times a week | Every day |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 7010701 | a. Have students discuss different ways to solve a problem | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010702 | b. Have students generate new strategies | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010703 | c. Have students work on an investigation, problem or project over an extended period of time | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010704 | d. Have students solve problems using multiple methods | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010705 | e. Begin instructional units with worked examples (explaining how work is completed, step by step, and what you think as you complete each step) | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010706 | f. Teach the most efficient solution strategy using simple, direct language | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010707 | g. Have students explain solutions in their own words | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010708 | h. Have students practice solution strategies that you taught | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 7010709 | i. Have students explain how taught strategies are efficient | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  | | --- | | [{IF A01 IS 1 or 2} |   A07C. When teaching transition and life skills, how often do you use the following instructional strategies:  PROGRAMMER: CODE ONE PER ROW  *Select one per row.*   |  |  | Never | Once a month or less | Two or three times a month | Once or twice a week | Three or four times a week | Every day | | --- | --- | --- | --- | --- | --- | --- | --- | | 7010721 | a. Time delay (e.g., constant, progressive) | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 | | 7010722 | b. Computer-assisted instruction | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 | | 7010723 | c. Community-based instruction | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 | | 7010724 | d. Video modeling | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 | | 7010725 | e. Prompting strategies | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 | | 7010726 | f. Mnemonic strategies | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 | | 7010727 | g. One-more-than (next dollar strategy) | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 | | 7010728 | h. Peer-mediated instruction | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 | | 7010729 | i. Visual displays | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 | | 7010730 | j. Self-management (self-monitoring, self-instruction) | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 | |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

A08. Please indicate the extent to which you agree or disagree with each of the following statements on teaching.

PROGRAMMER: CODE ONE PER ROW

*Select one per row.*

|  |  | Strongly disagree | Disagree | Neither disagree nor agree | Agree | Strongly agree | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 7010801 | a. I really enjoy my present job. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | |
| 7010802 | b. I am certain I am making a difference in the lives of the students I work with. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | |
| 7010803 | c. If I could start over, I would choose this career again. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | |
| 7010804 | d. I am satisfied with my class size/caseload. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | |
| 7010805 | e. I worry about the security of my job because of the performance of the students in my class(es) on state or local tests. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | |
| 7010806 | f. I get frustrated working with general education teachers. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | |
| 7010807 | g. I plan to continue to teach special education for at least the next five years. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | |
| 7010808 | h. The amount of paperwork that I need to complete for my students takes away from my ability to deliver high quality instruction. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | |
| SOFT CHECK: IF Q#=NO RESPONSE; see previous programmer note | | | | | | |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

A08A. Please indicate the extent to which you agree or disagree with each of the following statements:

PROGRAMMER: CODE ONE PER ROW

*Select one per row.*

|  |  | Strongly disagree | Disagree | Neither disagree nor agree | Agree | Strongly agree |
| --- | --- | --- | --- | --- | --- | --- |
| 7010821 | a. I have a team of professionals who support my work with students | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 7010822 | b. I have regular meetings with consultants | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 7010823 | c. I often feel isolated in my school | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

A08B. Please indicate the extent to which you agree or disagree with each of the following statements:

PROGRAMMER: CODE ONE PER ROW

*Select one per row.*

|  |  | Strongly disagree | Disagree | Neither disagree nor agree | Agree | Strongly agree |
| --- | --- | --- | --- | --- | --- | --- |
| 7010831 | a. I have adequate planning time. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 7010832 | b. I meet regularly with other special education professionals about how to meet the needs of the students that I serve. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 7010833 | c. I have adequate support from my colleagues. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 7010834 | d. It is difficult to motivate general education teachers to invest in the strategies that will help my students. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 7010835 | e. I check in every week with the general education teachers who are teaching my students. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 7010836 | f. The school supports inclusion in general education classrooms by accommodating the needs of special education students. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

A09. During this school year, how many students with IEPs have you worked with or provided services for, on average, each week?

7010900

Include students you work with directly, as well as students for whom you consult with the general education teacher and/or another special education teacher/service provider.

🔾 1-10 1

🔾 11-20 2

🔾 21-40 3

🔾 More than 40 4

🔾 Don’t know D

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see previous programmer note |

**B. BACKGROUND AND EDUCATION**

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

B01. The next several questions ask about your background and education.

What is your sex?

7020100

🔾 Male 1

🔾 Female 2

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see previous programmer note |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

B02. In what year were you born?

7020200

YEAR BORN

PROGRAMMER: CHANGE THIS TO A DROP DOWN BOX WITH 1925 – 1997 ONLY YEARS LISTED

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see previous programmer note |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

B03. Are you of Hispanic or Latino/Latina origin?

7020300

🔾 Yes 1

🔾 No 2

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| **PROGRAMMER BOX B03**  HYPERLINK THE WORDS “**Hispanic or Latino/Latina**” FOR B03 QUESTION TEXT:  **Hispanic or Latino/Latina**: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish cultures or origin (or descent), regardless of race. |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

B04. Which of the following best describes your race?

Select all that apply.

🞏 a. White 1

7020402

7020401

🞏 b. Black or African American 2

🞏 c. Asian 3

7020403

🞏 d. Native Hawaiian or other Pacific Islander 4

7020405

7020404

🞏 e. American Indian or Alaska Native 5

NO RESPONSE M

|  |
| --- |
| **PROGRAMMER BOX BO4**  HYPERLINK EACH OF THE RESPONSE OPTIONS OF B04 WITH EACH HYPERLINK CONTAINING ONLY ITS CORRESPONDING DEFINITION:  **White**: a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.  **Black or African American**: a person having origins in any of the black racial groups of Africa.  **Asian**: a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.  **Native Hawaiian or other Pacific Islander**: a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.  **American Indian or Alaska Native**: a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment. |

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

B05. What is the highest level of education you have completed?

7020500

🔾 Did not complete high school 1

🔾 High school diploma or equivalent/GED 2

🔾 Some college or technical or vocational school 3

🔾 Associate's degree 4

🔾 Bachelor's degree 5

🔾 Master's degree 6

🔾 Advanced professional degree beyond a master's degree (for example, Ph.D., Ed.D.) 7

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

B06. Which of the following credentials, licenses, or certificates do you have for working with students with disabilities?

Select all that apply.

7020601

🞏 a. Emergency credential 1

🞏 b. Provisional or temporary credential 2

7020609

7020603

7020602

7020613

7020606

7020611

🞏 c. Disability-specific credential or endorsement 3

🞏 d. Special education credential or endorsement (for more than one disability category) 4

7020604

🞏 e. General education credential 5

7020605

🞏 f. Speech/language therapy state license or certification 6

🞏 g. Physical therapy state license or certification 7

7020607

🞏 h. Occupational therapy state license or certification 8

7020608

🞏 i. Social work license or certification 9

🞏 j. School psychology license or certification 10

7020610

🞏 k. Clinical psychology license or certification 11

🞏 l. Certificate of Clinical Competence 12

7020612

🞏 m. Other professional license, credential, or endorsement (please specify) 13

Please specify (STRING 255 default)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

B07. Which of the following describes the teaching certificate you currently hold?

7020700

🔾 Regular or standard state certificate or advanced professional certificate 1

🔾 Certificate issued after satisfying all requirements except the completion of a probationary teaching period 2

🔾 Certificate that requires some additional coursework or passing a test 3

🔾 Certificate issued to persons who must complete a certification program in order to continue teaching 4

🔾 I do not hold any of these certifications 5

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |

|  |
| --- |
| {B07=1, 2, 3, 4} |

B08. In what subject(s) are you certified?

Select all that apply.

7020810

7020802

7020801

7020803

7020804

🞏 a. Early childhood or Pre-K, general 1

🞏 b. Elementary grades, general 2

🞏 c. Middle grades, general 3

🞏 d. Secondary grades, general 4

🞏 e. Special education, general 5

7020805

🞏 f. Specific area of disability (for example, autism, learning disabilities, etc.) 6

7020806

Please Specify (STRING (255 default))

7020807

🞏 g. Instruction for English Language Learners (e.g., English for Speakers of Other Languages or bilingual education: general) 7

🞏 h. Instruction for English Language Learners (e.g., English for Speakers of Other Languages or bilingual education: Spanish) 8

7020808

🞏 i. Instruction for English Language Learners (e.g., English for Speakers of Other Languages or bilingual education: other) 9

7020809

🞏 j. English/Language arts 10

🞏 k. Reading 11

7020811

🞏 l. Speech 12

7020813

7020812

🞏 m. Mathematics 13

🞏 n. Science (including general science, biology or life sciences, earth science, and other natural sciences) 14

7020814

🞏 o. Social studies (including history, government or civics, geography) 15

7020815

🞏 p. Social or behavioral science (including psychology, sociology, anthropology, and other social sciences) 16

7020816

🞏 q. Other (please specify) 99

7020817

Please Specify (STRING (255 default))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8} |

B09. Have you received any training related to Response to Intervention (RTI) from any of the following sources?

Select all that apply.

7020902

7020901

🞏 a. College courses 1

🞏 b. Professional development 2

7020903

🞏 c. Personal reading and study 3

🞏 d. I have not received any training on issues related to Response to Intervention 4

7020905

7020904

🞏 e. Other training (please specify) 99

Specify (STRING (255 default))

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| SOFT CHECK: IF (SPECIFY) = MISSING, “Please specify.” |

|  |
| --- |
| PROGRAMMER BOX B09  Please program so respondent can either select “I HAVE NOT RECEIVED ANY TRAINING ON ISSUES RELATED TO RESPONSE TO INTERVENTION” OR ANY OTHER RESPONSE CATEGORY BUT NOT BOTH |

C. PROFESSIONAL EXPERIENCE

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

C03. Next, we would like to ask about your years of experience. Counting this school year, how many total years (including part-time) have you been working with any students in any school? This would include both providing special education services as well as teaching in a regular classroom.

7030300

Enter the number of years.

If you have been working for less than one year, enter 1.

YEARS WORKED WITH STUDENTS

YEARS

(1-70)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C03 <1 or C03 > 45;  **Just to confirm, you answered [C03] YEARS WORKED WITH STUDENTS. Press “Edit” to return to this screen or press “Next” to continue.** |
| SOFT CHECK: IF Q#=NO RESPONSE: see earlier programmer note. |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

C02. Counting this school year, how many total years (including part-time) have you been working with students receiving special education or related services in any school?

7030200

Enter the number of years.

If you have been working for less than one year, enter 1.

YEARS WORKED WITH SPECIAL EDUCATION STUDENTS

YEARS

(1-70)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C02 <1 or C02 > 45;  **Just to confirm, you answered [C02] YEARS WORKED WITH SPECIAL EDUCATION STUDENTS. Press “Edit” to return to this screen or press “Next” to continue.** |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| HARD CHECK: If C03 < C02; **Your total years working with any students ([C03]) is inconsistent with the number of years you have worked with special education students ([C02]). Please change your response to this question or go back and change your response for years worked with any students.** |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

C04. Counting this school year, how many years of experience do you have teaching general education math classes to students (in any grades 6-12)?

7030400

Enter the number of years.

If you have been working for less than one year, enter 1.

YEARS WORKED TEACHING MATH 6-12

YEARS

(1-70)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C04 <1 or C04 > 45;  **Just to confirm, you answered [C04] YEARS WORKED TEACHING MATH 6-12. Press “Edit” to return to this screen or press “Next” to continue.** |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| HARD CHECK: If C03 < C04; **Your total years working with any students ([C03]) is inconsistent with the number of years you have taught math ([C04]). Please change your response to this question or go back and change your response for years worked with any students.** |

|  |
| --- |
| [{IF A01 IS NOT 4} and {A02 IS NOT 8}] |

C01.

7030100

Counting this school year, how many years have you worked in your current school, including part time?

Enter the number of years.

If you have been working for less than one year, enter 1.

YEARS WORKED IN CURRENT SCHOOL

YEARS

(1-70)

NO RESPONSE M

|  |
| --- |
| SOFT CHECK: IF C01 <1 or C01 > 45 **Just to confirm, you answered [C01] YEARS WORKED IN CURRENT SCHOOL. Press “Edit” to return to this screen or press “Next” to continue.** |
| SOFT CHECK: IF Q#=NO RESPONSE; see earlier programmer note. |
| HARD CHECK: If C03 < C01; **Your total years working with any students ([C03]) is inconsistent with the number of years you have worked in your current school ([C01]). Please change your response to this question or go back and change your response for years worked with any students.** |

|  |
| --- |
| ALL |

**INCENTADDR. To show our appreciation for completing the survey today, we would like to send you a [FILL CHECK AMOUNT] check. Please provide the address to which you would like the check mailed.**

**(Allow 4 weeks for delivery.)**

**Name:**

**Street Address:**

**ZIP Code:**

**City:**

**State:**

END1. Thank you for taking the time to answer our questions! Since we had some inaccurate information, we will send you a new user name and password with the updated information you provided.

That is all we have for you today. Click “End” to finish.

PROGRAMMER: SURVEY SHOULD CLOSE DOWN AND NOT PROCEED TO THANK YOU/SUBMIT PAGE. PROGRAM AN “END” BUTTON ON THE SCREEN: **The button will finalize answers and close down the interface in which the survey was displayed.**

PROGRAMMER: END1 should NOT have a header.

LOOP SCREEN: CONFIRM

CONFIRM. You have completed the questions for [STUDENT]. Thank you very much!

Please click the “Next” button to confirm you have finished rating [STUDENT]. If you want to make changes or review your responses, click the “Previous” button.

END:

You have completed the survey for all of your students that are in the study.

These are all the questions we have for you. We appreciate you taking the time to complete the survey.  
Thank you very much for participating in MGLS:2017!  
Press "Finish" to complete and close the survey.

## Appendix OFT1-U5. School Administrator Survey Specifications

|  |
| --- |
| *NCES is authorized to conduct MGLS:2017 by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543) and to collect students’ education records from education agencies or institutions for the purposes of evaluating federally supported education programs under the Family Educational Rights and Privacy Act (FERPA, 34 CFR §§ 99.31(a)(3)(iii) and 99.35).  The data are being collected for NCES by RTI International, a U.S.-based nonprofit research organization. All of the information you provide may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (20 U.S.C. §9573 and 6 U.S.C. §151). The collected information will be combined across respondents to produce statistical reports.*  *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 1850-0911. Approval expires 09/30/2018. The time required to complete this information collection is estimated to average approximately 40 minutes per response, including the time to review instructions, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate, suggestions for improving this survey, or any comments or concerns regarding the status of your individual submission of this survey, please write directly to: The Middle Grades Longitudinal Study of 2017-18 (MGLS:2017), National Center for Education Statistics, Potomac Center Plaza, 550 12th St, SW, Room 4002, Washington, DC 20202.* |

**A. INTRO**

|  |
| --- |
| All |

A01a. You have received an invitation to complete this questionnaire because you are an administrator in one of the schools participating in the MGLS:2017 field test.

To enhance the information we obtain from your students, their parents, and teachers we need your input. We are asking you to report on the characteristics and population of students in your school, courses offered, security measures, teachers, and your own personal background.

Taking part in the study is voluntary and you can skip questions you do not want to answer. We realize you are very busy, but urge you to complete this questionnaire as completely and accurately as possible.

Your answers are very important to the study’s success.

Please select an option below and then click Next.

Let's get started.

🔾 Continue 1 A01b

🔾 Come back later 2

|  |
| --- |
| HARD CHECK: IF A01a= NO RESPONSE; **Please provide an answer to this question and then click Next.** |

|  |
| --- |
| PROGRAMMER BOX A01a  if A01a = 2 “COME BACK LATER”, Please logout the respondent. the RESPONDENT should be able to log back in. |

|  |
| --- |
| A01a = 1 |

A01b. Thank you very much for participating! Gathering the following information in advance will help you complete the questionnaire more quickly:

1. For the current school year:

• Average daily attendance

• Math curriculum information

• Matriculation information

• Student body demographic information, including the number of students in sixth grade who are:

• Receiving free or reduced price lunch

• English language learners

• Alternative program attendees

• Students with disabilities/Individualized Education Program (IEP)

• Students in each racial/ethnic category

• School personnel counts such as the:

• Number of teachers by subject taught

• Number of security personnel

1. For the 2015-16 school year:

• Average state assessment scores by subject for sixth-graders

• Programs, services, and supports available for students with IEPs and the percentage of students who use them

Press Next to continue.

|  |
| --- |
| PROGRAMMER BOx A01b  Please add AN INFORMATION ICON to the bullet “English language learners” that links to the help text below:  **English language learners** (ELL): Students whose native language is one other than English and whose skills in listening, speaking, reading, or writing English are such that he or she has difficulty understanding school instruction in English.  Please add AN INFORMATION ICON to the bullet text “individualized education program (iep)” that links to the help text below:  **Individualized Education Program (IEP)**: A written statement of the educational program designed to meet the individual needs of a school-aged child with a disability that is judged to affect the child’s educational performance. Children who receive special education services under the Individuals with Disabilities Education Act (IDEA) are expected to have an IEP. |

|  |
| --- |
| All |

**A01c.** How to Complete the Survey:

• Please record your answers by checking the box next to the appropriate answer or entering information as directed. Answer each question as accurately as possible; if you need to estimate an answer that is okay.

* Press the “Next” button to move forward.
* Press the "Previous" button to go back.
* To jump to another section, click on the desired section in the progress bar at the top of the screen. You will be taken to the first question in the section.
* The progress bar is color coded to indicate if a section has not been viewed (white), is in progress (gray), partially completed (teal), or completed (green).
* Some questions have help text available. If you see an information icon [insert image

of icon] there is help text available. Click the icon to see the help text.

* The “Log out” button can be used to save your responses and finish later.
* In order to save your responses, you must press the "Next" button. To protect your answers, you will be logged off if you are idle for more than 20 minutes.

Press Next to begin.

|  |
| --- |
| ALL |

**A01d.** Please select the box next to the grade level(s) offered at your school.

*Select all that apply.*

8010101

🞏 a. Pre-K 1

8010102

🞏 b. Kindergarten 2

8010103

🞏 c. Grade 1 3

8010104

🞏 d. Grade 2 4

8010105

🞏 e. Grade 3 5

8010106

🞏 f. Grade 4 6

8010107

🞏 g. Grade 5 7

8010108

🞏 h. Grade 6 8

8010109

🞏 i. Grade 7 9

8010110

🞏 j. Grade 8 10

8010111

🞏 k. Grade 9 11

8010112

🞏 l. Grade 10 12

🞏 m. Grade 11 13

8010113

🞏 n. Grade 12 14

8010115

8010114

🞏 o. Ungraded 15

|  |
| --- |
| A01d = 8 |

**A02a.** Please confirm that you are a person at this school who is knowledgeable about sixth-grade students, teachers, programs, and services.

8010201

🔾 Yes 1 A03

🔾 No 2 A02c

|  |
| --- |
| HARD CHECK: IF A02a= NO RESPONSE; **Please provide an answer to this question and then click Next.** |

|  |
| --- |
| PROGRAMMER BOx A02a  Only respondents indicating at least grade 6 (A01d = 8) are eligible for this item, regardless of what other middle grade may be available at the school |

|  |
| --- |
| A01d NE 8 |

**A02b.** Please confirm that your school does not offer a sixth grade.

8010202

🔾 My school **does not** offer a sixth grade 1 END1

🔾 My school does offer a sixth grade. 0 A01d

|  |
| --- |
| HARD CHECK: IF A01a= NO RESPONSE; **Please provide an answer to this question and then click Next.** |

|  |
| --- |
| A02A = 2 |

**A02c.** Please provide the name and contact information for a person at your school who is knowledgeable about sixth-grade students, teachers, programs, and services. They will be notified to complete the survey.

First Name: (STRING 50)

Last Name: (STRING 50)

Title: (STRING 50)

Phone: (STRING 10)

Email: (STRING 50)

|  |
| --- |
| SOFT CHECK: IF A02c= NO RESPONSE; **Please provide an answer to this question and then click Next.** |

|  |
| --- |
| PROGRAMMER BOx A02c  PLEASE VALIDATE PHONE NUMBER BY AREA CODE AND EXCHANGE NUMBER.  PLEASE VALIDATE EMAIL ADDRESS. |

|  |
| --- |
| A02a=2 |
| If text entered at A02c, fill TITLE, FIRST NAME, and LAST NAME |

**A02d.** Thank you! The MGLS:2017 team will be in touch with [TITLE] [FIRST NAME] [LAST NAME] very soon.

*Press Next to close this survey.*

|  |
| --- |
| PROGRAMMER BOX a02d  PROGRAM A “next” BUTTON ON THE SCREEN. The button will close down the interface in which the survey was displayed. EXIT SURVEY. |

|  |
| --- |
| A02a = 1 |

A03. What is your title or position at this school?

8010300

*Select the one that best describes you.*

🔾 Principal/Administrator 1 B01

🔾 Vice Principal 2 B01

🔾 Counselor 3 B01

🔾 School administrative personnel 4 B01

🔾 Other (*Please specify*) 99 B01

Specify (STRING 250)

|  |
| --- |
| SOFT CHECK: IF A03= NO RESPONSE; **Please provide an answer to this question and then click Next.** |

|  |
| --- |
| PROGRAMMER BOX a03  If “other” is selected and no response is entered in the text box, please use a Soft check with the following text:  Please specify your title or position at this school. |

**B. SCHOOL CHARACTERISTICS**

|  |
| --- |
| all |

The following questions ask about characteristics of your school.

**B01.** Which of the following best describes your school?

8020100

🔾 Regular public school 1 B02

🔾 Public school that has a magnet program for some of the students 2 B02

🔾 Public school that is exclusively a magnet school 3 B02

🔾 Charter school 4 B02

🔾 Private school 5 B02

🔾 Other *(Please* s*pecify)* 99 B02

Specify (STRING 250)

|  |
| --- |
| PROGRAMMER BOX B01  If “other” is selected and no response is entered in the text box, please Use a Soft check with the following text:  Please describe your school. |

|  |
| --- |
| All |

B02. What is the Average Daily Attendance (ADA) for your school this year? Please report as a number or a percent.

8020300

(NUMBER OF STUDENTS RANGE 0-9999) (PERCENT OF STUDENTS RANGE 0-100)

🔾 Number of students 1 B03

🔾 Percent of students 2 B03

|  |
| --- |
| SOFT CHECK: IF A NUMERICAL RESPONSE IS ENTERED AND NO UNIT IS SELECTED; **Please indicate if your answer is a number or percent, then click Next to move on. To skip the question, click the Next button.** |

|  |
| --- |
| B01=5 OR 99 |

B03. What is the maximum yearly tuition to attend your school? Enter "0" if school does not charge tuition.

8020400

(RANGE 0-50000)

|  |
| --- |
| B03 > 0 |

**B04.** What percentage of your students pay the maximum yearly tuition?

8020500

🔾 0 – 25 percent 1 B05

🔾 26 - 50 percent 2 B05

🔾 51 - 75 percent 3 B05

🔾 76 - 100 percent 4 B05

|  |
| --- |
| B01=5 OR 99 |
|  |

The next set of questions is about your student population.

**B05.** Please indicate the percentages of students at your school that are male and female.

PROGRAMMER: RANGE FOR GRID IS 0-100

8020602

8020601

|  |  |
| --- | --- |
|  | Percent male students |
|  | Percent female students |

|  |
| --- |
| SOFT CHECK: IF PERCENT MALE + PERCENT FEMALE NE 99,100, or 101; **Please make sure your answers add to 100 percent.** |

|  |
| --- |
| All |

**B06.** What percentage of the total student body in your school…

PROGRAMMER: RANGE FOR GRID IS 0-100

8020703

8020702

8020701

|  | Percentage |
| --- | --- |
| 1. Receives free or reduced-price lunch? | percent |
| 1. Are English language learners (ELL)? | percent |
| 1. Are enrolled in an alternative program either at your school or off-site? | percent |

|  |
| --- |
| PROGRAMMER box b06  Do not allow nonnumeric response for this item (i.e., alphabetic or symbol responses).  Range of percentages can be 0-100.  PLEASE ADD AN INFORMATION ICON TO THE ROW HEADER“English language learners (ell)” that links TO THE HELP TEXT BELOW:  **English language learners (ELL)**: Students whose native language is one other than English and whose skills in listening, speaking, reading, or writing English are such that he or she has difficulty understanding school instruction in English. |

|  |
| --- |
| All |

These next questions only ask about sixth grade at your school.

**B07.** What type of daily schedule is typically used for the sixth-grade level at your school?

8020201100

🔾 Self-contained classrooms 1 B08

🔾 Daily periods uniform in length 2 B08

🔾 Daily periods of varying length 3 B08

🔾 Flexible schedule for teams 4 B08

🔾 Other *(Please specify)* 99 B08

Specify (STRING 250)

|  |
| --- |
| PROGRAMMER BOX B07  If “other” is selected and no response is entered in the text box, please Use a Soft check with the following text:  Please describe the daily schedule for the sixth grade.  Other (*Please specify*)  (STRING 8000) |

|  |
| --- |
| All |

The next set of questions asks about additional supports your school provides for struggling students.

**B08.** Which of the following steps does this school take for sixth-grade students who need extra assistance?

*Select all that apply.*

8020801

🞏 a. The school provides tutoring during the regular school day 1 B09

🞏 b. The school provides extra assistance to classroom teachers by school staff 2 B09

8020802

🞏 c. The school provides pull-out instruction during the regular school day 3 B09

8020803

🞏 d. The school provides a homework assistance program to students 4 B09

8020804

🞏 e. The school provides additional support outside the regular school day 5 B09

8020805

🞏 f. The school takes other steps to assist struggling students 6 B09

8020806

*(Please specify)* (STRING 8000)

🞏 g. The school does not have any programs for students who need extra assistance 7 B09

8020807

|  |
| --- |
| PROGRAMMER box B08  Please add an information icon next to “additional support outside the regular school day” that LINKs TO THE HELP TEXT BELOW:  By **additional support outside the regular school day** we mean, for example, before school or afterschool tutoring or special programs, weekend programs, or summer school programs.  IF “School does not have any programs for students who need extra assistance” IS SELECTED, PLEASE DESELECT AND GRAY OUT ALL OTHER RESPONSES.  Please program so respondent can NOt select the response option “your school does not have any programs for students who need extra Assistance” if other Responses are selected. if “your school does not have any programs for students who need extra Assistance” is selected, then do not allow other response options to be checked and Deselect all previously selected responses.  If “School takes other steps to assist struggling students” is selected and no response is entered in the text box, please Use a SOFT check with the following text:  Please specify other steps taken to assist struggling students. |

|  |
| --- |
| All |

**B09.** Does your school offer any of the following programs to assist sixth-grade students who are struggling academically?

*Select all that apply.*

🞏 a. Summer program prior to entry into the next grade that provides supplemental instruction in reading and math 1 B10

8020901

🞏 b. Small learning communities for over‐aged students who have not met promotion criteria 2 B10

8020902

🞏 c. Small sixth-grade learning communities separate from the rest of the school 3 B10

8020903

🞏 d. Block scheduling, also called double‐block or extended‐block scheduling, for struggling sixth-graders 4 B10

8020904

🞏 e. Catch‐up courses or “double‐dosing” of classes 5 B10

8020905

🞏 f. Specific professional development, coaches, or technical assistance for teachers working with struggling sixth-graders 6 B10

8020907

8020906

🞏 g. Tutoring 7 B10

🞏 h. Another program (*Please specify*) 8 B10

8020908

(STRING 8000)

🞏 i. There are no programs to assist sixth graders who are struggling academically. 9 B10

8020909

|  |
| --- |
| PROGRAMMER box B09  IF “There are no programs to assist sixth-grade students who are struggling academically” IS SELECTED, PLEASE DESELECT AND GRAY OUT ALL OTHER RESPONSES.  Please program so respondent can NOt select the response option “There are no programs to assist sixth-grade students who are struggling academically” if other Responses are selected. if “There are no programs to assist [sixth-]grade students who are struggling academically” is selected, then do not allow other response options to be checked and Deselect all previously selected responses.  If “Another Program” is selected and no response is entered in the text box, please Use a Soft check with the following text:  :  Please specify another program offered to assist students who are struggling academically. |

|  |
| --- |
| B01 NE 5 |

The next set of items is about state assessment scores.

**B10-B12.**Based on 2015-16 state assessments, please indicate the percentage(s) of sixth-grade students in your school who scored at or above "proficient" in the following subjects.

🞏 Check this box if your school was **not** required to take the state assessment because it **does not accept Title I funds** 1 B13

8021001

|  | Percentage of students at or above “proficient” |
| --- | --- |
| ***Grade 6 students*** |  |
| a. Reading or verbal skills | 8021002  percent |
| b. Mathematics | 8021004  percent |
| PROGRAMMER BOX B10-B12  Range of percent can be 0-100.  Please program so that no other responses can be selected if “Check this box if your school was **not** required to take the state assessment because it **does not accept Title I funds”** is checked. If it is checked please deselect all previous responses. | |

|  |
| --- |
| All |

The next set of questions is about **instructional programs** at your school.

**B13-B15.**Approximately what percentage(s) of your sixth-grade students are in each of the following instructional programs?

*If the program is available but no students currently receive it, enter 0 for that program.*

|  |  |  |
| --- | --- | --- |
|  | Percentage of students | Check here if program is  **not** available |
| ***Grade 6 students*** |  |  |
| a. Programs that focus on developing students’ literacy solely in English | percent  8021301 | 8021302  🞏 |
| b. Programs that focus on developing students’ literacy in two languages | percent  8021303 | 🞏  8021304 |
| c. Special education | 8021305  percent | 🞏  8021306 |

|  |
| --- |
|  |

|  |
| --- |
| PROGRAMMER BOX B13–B15  grade level should be 6.  Range of percent can be 0-100.  PLEASE add AN INFORMATION ICON to the row header “Special education” that links TO THE HELP TEXT BELOW:  By **special education** we mean programs in which the student receives services with an Individualized Education Program (IEP). An Individualized Education Program (IEP) is a written statement of the educational program designed to meet the individual needs of a school-aged child with a disability that is judged to affect the child’s educational performance. Children who receive special education services under the Individuals with Disabilities Education Act (IDEA) are expected to have an IEP.  Please program so respondent can either enter a percentage or check the “Service not available” box, but not both answers. if the respondent enters a response and checks the box, the following CONSISTENcy check should pop up:  You selected “Service not available” and entered in a percentage greater than 0. This creates conflicting information. Please change your response(s) to be consistent. |

**C. SUPPORTS FOR STUDENTS**

|  |
| --- |
| All |

The next set of questions asks about **Individualized Education Program (IEP)** placement options.

**C01.** What **percentage of students with IEPs** at your school are served by each of the following placement options?

*If the service is available but no students currently receive it, enter 0 for that service.*

*If the service is not available at your school, check the column labeled "Service not available."*

PROGRAMMER: RANGE FOR GRID IS 0 -100

|  | Percentage of students  with IEPs | Service **not**  available |
| --- | --- | --- |
| a. General education with services or supports | 8030101  percent | 🞏  8030102 |
| b. Classes co-taught by general and special education teachers | percent  8030103 | 🞏  8030104 |
| c. Part-time resource room for special education students | 8030105  percent | 🞏  8030106 |
| d. Self-contained special education classrooms | 8030107  percent | 8030108  🞏 |
| e. Individual instruction such as home school or a residential, off site, incarceration or hospital program | 8030109  percent | 8030110  🞏 |
| f. Other *(Please specify)* | 8030111  percent | 8030112  🞏 |

Specify (STRING 8000)

|  |
| --- |
|  |

|  |
| --- |
| PROGRAMMER BOX C01  Range of percent can be 0-100.  PLEASE add AN INFORMATION ICON the question texT “individualized education program (iep)” that links TO THE HELP TEXT BELOW:  **Individualized Education Program (IEP)**: A written statement of the educational program designed to meet the individual needs of a school-aged child with a disability that is judged to affect the child’s educational performance. Children who receive special education services under the Individuals with Disabilities Education Act (IDEA) are expected to have an IEP.  PLEASE add AN INFORMATION ICON to the row header “Special education” that links TO THE HELP TEXT BELOW:  By **special education** we mean programs in which the student receives services with an Individualized Education Program (IEP). An Individualized Education Program (IEP) is a written statement of the educational program designed to meet the individual needs of a school-aged child with a disability that is judged to affect the child’s educational performance. Children who receive special education services under the Individuals with Disabilities Education Act (IDEA) are expected to have an IEP.  By **co-taught** we mean, for example, when both the teacher and special education teacher (or related services provider) are in the classroom together, but trade off instruction.  Please program so respondent can either enter a percentage or check the “Service not available” box, but not both answers. If the “Service not available” box is selected, please gray out percentage box and remove any percentage entered.  If “other (Please specify)” is selected and no response is entered in the text box, please Use a SOFT check with the following text:  Please specify other placement options for students with IEPs. |

|  |
| --- |
| All |

The next questions are about **services and supports** schools can offer **to teachers** of students with IEPs.

**C02.** Are the following **available to general education teachers** in this school when students with IEPs are included in their classes?

🞏 Check this box if students with IEPs are **not included** in general education classrooms at your school 1 C03

8030201

| *Select one answer for each row.* | Yes | No |
| --- | --- | --- |
| a. Consultation with or technical assistance from special education or other staff with general special education training, not specific to child's disability  8030202 | 1 🔾 | 2 🔾 |
| b. Special equipment or materials  8030203 | 1 🔾 | 2 🔾 |
| c. Professional development  8030204 | 1 🔾 | 2 🔾 |
| d. Teacher aides, instructional assistants, paraprofessionals, or aides for individual students  8030205 | 1 🔾 | 2 🔾 |
| e. Smaller student load or class size  8030206 | 1 🔾 | 2 🔾 |
| f. Co-teaching with a special education teacher or related services provider  8030207 | 1 🔾 | 2 🔾 |
| g. Team teaching with a special education teacher or related services provider  8030208 | 1 🔾 | 2 🔾 |
| h. Team planning  8030209 | 1 🔾 | 2 🔾 |
| i. Other *(Please specify)*  8030210 | 1 🔾 | 2 🔾 |

Specify (STRING 8000)

|  |
| --- |
| PROGRAMMER BOX C02  C02a-c02i should not be able to be answered if the box for “Check this box if students with IEPs are **not included** in general education classrooms at your school” is checked. please skip to c03.  IF “Check this box if students with IEPs are **not included** in general education classrooms at your school” is checked, then deselect any previously selected responses.  PLEASE add AN INFORMATION ICON NEXT to the text in the row header “special education or other staff” that links TO THE HELP TEXT BELOW:  By **special education or other staff** we mean, for example, a school psychologist or teacher trained in a related disability area.  PLEASE ADD AND INFORMATION ICON TO the row header “Co-teaching” THAT LINKS TO THE HELP TEXT BELOW:  By **co-teaching** we mean, for example, when both the teacher and special education teacher (or related services provider) are in the classroom together, but tradeoff instruction.  PLEASE ADD AN INFORMATION ICON TO THE ROW HEADER“team teaching” that links TO THE HELP TEXT BELOW:  By **team teaching** we mean, for example, when both teachers are NOT in classroom together, but alternate instruction and are responsible for teaching the same set of students.  PLEASE add a information icon to the question text “Iep” that links TO THE HELP TEXT BELOW:  **Individualized Education Program (IEP)**: A written statement of the educational program designed to meet the individual needs of a school-aged child with a disability that is judged to affect the child’s educational performance. Children who receive special education services under the Individuals with Disabilities Education Act (IDEA) are expected to have an IEP.  If “other (Please specify)” is selected and no response is entered in the text box, please Use a Soft check with the following text:  Please specify other services and supports your school offers to teachers of students with IEPs. |

|  |
| --- |
| All |

The next questions are about **programs and supports** schools can offer **to students with IEPs.**

**C03.** For each of the following programs and supports, please indicate what percentage of students with IEPs in your school receive this program or support during the current school year. Please include programs provided by alternate service providers.

*If a program or support is available but no students currently receive it, enter 0 in the “Percentage of students with IEPs” column.*

*If a program and supports are not available at your school, check the box in the "Program and supports not available" column.*

PROGRAMMER: RANGE FOR GRID IS 0-100

|  | Percentage of students  with IEPs | Program and supports  **not** available |
| --- | --- | --- |
| a. Referrals to vocational rehabilitation services | 8030301  percent | 8030302  🞏 |
| b. Help developing capability to dress, clean, care for self | 8030303  percent | 8030304  🞏 |
| c. Learning self-determination and self-advocacy skills | 8030305  percent | 🞏  8030306 |
| d. Peer buddy program | 8030307  percent | 8030308  🞏 |
| e. Alternative placements for students who are expelled and/or suspended | 8030309  percent | 8030310  🞏 |
| f. Helping students connect to outside transition services, supports, and activities | 8030311  percent | 8030312  🞏 |
| g. Helping students connect to adult residential providers and day services | 8030313  percent | 8030314  🞏 |
| h. Information bank for parents or guardians with materials and resources relating to independent living | 8030315  percent | 8030316  🞏 |
| i. Instruction for parents or guardians on youth’s rights and responsibilities under disability-related laws | 8030317  percent | 8030318  🞏 |
| j. Other *(Please specify)* | 8030319  percent | 8030320  🞏 |

(STRING 8000)

|  |
| --- |
| PROGRAMMER BOX C03  RANGE OF PERCENT CAN BE 0-100.  PLEASE add an information icon to the row header “Helping students connect to outside transition services, supports, and activities” that links TO THE HELP TEXT BELOW:  By **helping students connect to outside transition services, supports, and activities** we mean, for example, tutoring, mentoring, transportation, assistive technology, and networking.  PLEASE add an information icon to the question text “Iep” THAT LINKS TO THE HELP TEXT BELOW:  **Individualized Education Program (IEP)**: A written statement of the educational program designed to meet the individual needs of a school-aged child with a disability that is judged to affect the child’s educational performance. Children who receive special education services under the Individuals with Disabilities Education Act (IDEA) are expected to have an IEP.  Please program so respondent can either enter a percentage or check the “Program or Service not available” box, but not both answers. If the “program or Service not available” box is selected, please gray out percentage box and remove any percentage entered.  You selected “Program or service not available” and entered in a percentage greater than 0. This creates conflicting information. Please change your response(s) to be consistent.  If “other (Please specify)” is selected and no response is entered in the text box, please Use a Soft check with the following text:  Please specify other programs and supports your school offers to students with IEPs. |

**D. SCHOOL PROGRAMS**

|  |
| --- |
| all |

The following questions ask about programs and practices aimed at serving all students at your school.

**D01.** Does your school use interdisciplinary team teaching in sixth grade?

8040101

🔾 Yes 1 D02

🔾 No 2 D08

NO RESPONSE M D08

|  |
| --- |
| PROGRAMMER BOX D01  PLEASE add an information icon to the question text “interdisciplinary team teaching” THAT LINKS to the help text below:  By **interdisciplinary team teaching** we mean a group of two or more teachers from different subject areas who have a common group of students and who work together to coordinate and integrate curriculum and instruction on a regular basis.  if D01 = 2 (no) or m (no response) (i.e., interdisciplinary team teaching is not used in grade 6, skip respondent to D08. |

|  |
| --- |
| D01 = 1 |

**D02.** When did your school begin using interdisciplinary team teaching in sixth grade?

8040102

🔾 Before 2008-09 01 D03

🔾 2009-10 02 D03

🔾 2010-11 03 D03

🔾 2011-12 04 D03

🔾 2012-13 05 D03

🔾 2013-14 06 D03

🔾 2014-15 07 D03

🔾 2015-16 08 D03

🔾 Current school year 09 D03

🔾 Don’t know 10 D03

|  |
| --- |
| PROGRAMMER BOX D02  PLEASE add an information icon to the question text “interdisciplinary team teaching” that linksto the help text below:  By **interdisciplinary team teaching or interdisciplinary teams** we mean a group of two or more teachers from different subject areas who have a common group of students and who work together to coordinate and integrate curriculum and instruction on a regular basis. |

|  |
| --- |
| D01 = 1 |

**D03.** For sixth grade , please indicate the number of interdisciplinary teams, average number of teachers per team, and average number of students per team. Your best estimate is fine.

|  | a. Number of interdisciplinary teams |  | b. Average number of **teachers**  per team | |  | c. Average number of **students**  per team | |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 8040301 | Teams… | 8040302 | | Teachers… | 8040303 | | Students… |

|  |
| --- |
| PROGRAMMER BOX D03  PLEASE add an information icon to the question text “interdisciplinary teams” that links to the help text below:  By **interdisciplinary team teaching or interdisciplinary teams** we mean a group of two or more teachers from different subject areas who have a common group of students and who work together to coordinate and integrate curriculum and instruction on a regular basis.  Please add an information icon to the question text “teacher” that links to the help text below:  Please include full-time and part-time teachers in your counts of average number of teachers per interdisciplinary team. If a teacher teaches across teams, please count that person as one teacher for each team.  Please program dropdown box for number of interdisciplinary teams to have the default as “teams…” with the following options (note, do not include “1.” these are just for classification purposes):   1. 1 2. 2 3. 3 4. 4 5. 5 or more   Please program dropdown box for number of teacher to have the default as “teachers…” with the following options (note, do not include “1.” these are just for classification purposes):   1. 2 2. 3 3. 4 4. 5 5. 6 6. 7 or more   Please program dropdown box for number of students to have the default as “students…” with the following options (note, do not include “1.” these are just for classification purposes):   1. Less than 60 2. 61-90 3. 91-120 4. 121-150 5. 151-180 6. 181-210 7. 211 or more |

|  |
| --- |
| D01 = 1 |

**D04.** Please indicate whether the following subject areas are part of your typical interdisciplinary teaching team for sixth grade by checking the box.

|  |  | *Select all that apply on each row.* |
| --- | --- | --- |
| 8040413 | 🞏 | 1. English/Language arts |
| 8040414 | 🞏 | 1. Mathematics |
| 8040415 | 🞏 | 1. Science |
| 8040416 | 🞏 | 1. Social studies/civics |
| 8040417 | 🞏 | 1. Health |
| 8040418 | 🞏 | 1. Art |
| 8040419 | 🞏 | 1. Music |
| 8040420 | 🞏 | 1. Technology/computer science |
| 8040421 | 🞏 | 1. Foreign language |
| 8040422 | 🞏 | 1. Physical education (P.E.) |
| 8040423 | 🞏 | 1. Special education |
| 8040424 | 🞏 | 1. Other (*Please specify*) |

Specify (STRING 250)

|  |
| --- |
| PROGRAMMER BOX d04  PLEASE add an information icon to the question text “interdisciplinary teaching teams” that links to the help text below:  By **interdisciplinary team teaching or interdisciplinary teams** we mean a group of two or more teachers from different subject areas who have a common group of students and who work together to coordinate and integrate curriculum and instruction on a regular basis.  Please add an information icon to the row text “Other (Please specify)” that links to the help text below:  If there are other subject areas typically part of your interdisciplinary teaching team, please describe the other subject areas in the text box provided.  If “other” is selected and no response is entered in the text box, please Use a SOFT check with the following text:  Please specify other subject areas that are part of your typical interdisciplinary teaching team. |

|  |
| --- |
| D01 = 1 |

**D05.** For sixth grade, on average, how much common planning time is regularly scheduled each week for interdisciplinary teaching teams? Your best estimate is fine.

| *Select one answer.* | Average common planning time **per week** | Don’t know |
| --- | --- | --- |
| 8040501 | Please select… | 🞏  8040502 |

|  |
| --- |
| PROGRAMMER BOX D05  PLEASE add an information icon to the question text “interdisciplinary teaching teams” that linksto the help text below:  By **interdisciplinary team teaching or interdisciplinary teams** we mean a group of two or more teachers from different subject areas who have a common group of students and who work together to coordinate and integrate curriculum and instruction on a regular basis.  Please program dropdown box to have the default as “please select…” with the following options (note, do not include “1.” these are just for classification purposes):   1. None 2. Less than 30 minutes 3. 30-60 minutes 4. 61-120 minutes 5. 121-180 minutes 6. More than 180 minutes   Please program so respondent can either select from dropdown or check the “don’t know” box, but not both answers. if the respondent selects and answer and checks the box, the following SOFT check should pop up:  You selected an amount of time and checked “Don’t know”. Please only choose one or the other. If you are unsure of the exact amount of time, your best estimate if fine. |

|  |
| --- |
| D05a>= 2 |

**D06.** In a typical common planning time period for an interdisciplinary teaching team, how often do you estimate teachers engage in the following activities? Your best estimate is fine.

| *Select one answer for each row.* | Never | Rarely | Sometimes | Often | Very often |
| --- | --- | --- | --- | --- | --- |
| 1. Teachers collaboratively develop or revise curriculum.   8040601 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Teachers work collaboratively to coordinate and/or develop assignments.   8040602 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Teachers work collaboratively to coordinate and/or develop assessments.   8040603 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Teachers discuss individual students (e.g., issues accomplishments, problems).   8040604 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Teachers discuss activities related to parent involvement or communicate with parents.   8040605 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Teachers decide common themes and related topics for instruction.   8040606 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Teachers arrange assemblies, trips, or other team activities.   8040607 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Teachers work on their own lessons, tests, grades, etc.   8040608 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Other (*Please specify*)   8040609 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

Specify (STRING 8000)

|  |
| --- |
| PROGRAMMER BOX D06  PLEASE add an information icon to the question text “interdisciplinary teaching team” that links to the help text below:  By **interdisciplinary team teaching or interdisciplinary teams** we mean a group of two or more teachers from different subject areas who have a common group of students and who work together to coordinate and integrate curriculum and instruction on a regular basis.  Please add an information icon to the row text “Other (Please specify)” that links to the help text below:  If there are other activities that your interdisciplinary teaching team typically engages in, please indicate how often they engage in it, and describe the other activities in the text box provided.  If “other” is selected and no response is entered in the text box, please Use a Soft check with the following text:  Please specify other activities teachers engage in during a typical common planning time period for an interdisciplinary teaching team. |

|  |
| --- |
| D01a = 1 |

**D07.** Please indicate the extent to which you agree or disagree with each of the following statements regarding the interdisciplinary teaching teams at your school.

| *Select one answer for each row.* | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly Agree |
| --- | --- | --- | --- | --- | --- |
| 1. Teachers are sufficiently trained in the team approach   8040701 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Teachers identify with the team   8040702 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Teachers collaborate and provide professional support   8040703 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Teachers use integrated curriculum across subjects   8040704 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. The school schedule has flexibility to regroup students or vary time for different subjects   8040705 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Students identify with the team   8040706 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 1. Individual student problems are recognized quickly   8040707 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| PROGRAMMER BOX D07  PLEASE ADD AN INFORMATION ICON TO the question text “interdisciplinary teaching team teaching” THAT LINKS TO THE help text below:  By **interdisciplinary teaching teams** we mean a group of two or more teachers from different subject areas who have a common group of students and who work together to coordinate and integrate curriculum and instruction on a regular basis. |

|  |
| --- |
| all |

**D08.** Please indicate whether the following programs or practices have never been used, are currently used, are not currently used but have been in the past, or are not currently being used but will likely be implemented in the future at your school.

| *Select one answer for each row.* | Never been used | Currently used | Used in the past, no longer in use | Not currently used, plan to use in future |
| --- | --- | --- | --- | --- |
| 1. Minimum competency tests for promotion to next grade   8040801 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 1. Common academic curriculum for all students in the same grade   8040802 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 1. Classes organized for cooperative learning   8040803 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 1. Exploratory mini courses for all students in all grades   8040804 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 1. Students from more than one grade level assigned together to the same academic classes   8040805 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 1. Information on how to help children with homework and skills provided to parents   8040806 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| 1. Extracurricular activities for all students   8040807 | 1 🔾 | 2 🔾 | 3 🔾 | 1. 🔾 |
| 1. Schools-within-a-school with their own administrative staffs   8040808 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |

|  |
| --- |
| all |

D09. The following questions are about math courses at your school.

Which of the following math courses are offered to sixth gradersby your school?

| *Select one answer for each row.* | Yes, offered in a traditional classroom setting | Yes, offered at a neighboring school | Yes, offered virtually | No, the course is not offered |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| a. Remedial math  8040902 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| b. General math  8040903 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| c. Honors math  8040904 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| ***Other math*** |  |  |  |  |
| d. Introduction to Algebra/Prealgebra  8040914 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| e. Algebra 1, part 1  8040915 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| f. Algebra 1, part 2  8040916 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| g. Algebra I  8040917 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| h. Algebra II  8040918 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| i. Geometry  8040919 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| j. Trigonometry  8040920 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| k. Precalculus  8040921 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| l. Calculus  8040922 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| m. Other (*Please specify*)  8040923 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |

Specify (STRING 250)

|  |
| --- |
| SOFT CHECK: IF D09a-m = NO RESPONSE; **Please provide an answer to this question and then click “Next”. To continue without providing a response, click the “Next” button.** |

|  |
| --- |
| PROGRAMMER box d09  IF d09 = no response skip to d11  if all rows =4 skip to d11  please gray out other specify box is do9m = 4  If D09m= 1, 2, or 3 and no response is entered in the text box, please Use a SOFT check with the following text:  Please specify other math courses offered by your school. |

|  |
| --- |
| If any row in d09 = 1, 2, or 3 |
| [D09mOS] INSERT TEXT FROM D090S |

**D10.** Are there enough slots available for the following course or courses so that sixth-grade students who have the necessary prerequisites and interest can enroll?

| *Select one answer for each row.* | Yes | No |
| --- | --- | --- |
|  |  |  |
| a. Remedial math  8041001 | 1 🔾 | 2 🔾 |
| b. General math  8041002 | 1 🔾 | 2 🔾 |
| c. Honors math  8041003 | 1 🔾 | 2 🔾 |
| ***Other math*** |  |  |
| d. Introduction to Algebra/Prealgebra  8041010 | 1 🔾 | 2 🔾 |
| e. Algebra 1, part 1  8041011 | 1 🔾 | 2 🔾 |
| f. Algebra 1, part 2  8041012 | 1 🔾 | 2 🔾 |
| g. Algebra I  8041013 | 1 🔾 | 2 🔾 |
| h. Algebra II  8041014 | 1 🔾 | 2 🔾 |
| i. Geometry  8041015 | 1 🔾 | 2 🔾 |
| j. Trigonometry  8041016 | 1 🔾 | 2 🔾 |
| k. Precalculus  8041017 | 1 🔾 | 2 🔾 |
| l. Calculus  8041018 | 1 🔾 | 2 🔾 |
| m. [D09OS]  8041019 | 1 🔾 | 2 🔾 |

|  |
| --- |
| PROGRAMMER Box D10  PLEASE note: table should be populated based on responses to D09. if D09a-m = 1, 2 or, 3, then the corresponding row should appear in this table, otherwise row should be removed.  please note: despite subselection of rows from D09 table, all lettering should remain the same, rather than being adjusted to reflect the subset of math courses that may have been selected.  Please populate M with text from D09os. |

|  |
| --- |
| A01d = 8 |

D11. Please estimate the percentage of sixth-grade students repeating the level of mathematics they took in fifth grade.

8041100

*If your school uses a semester or block course system, please indicate the percentage of sixth-grade students repeating the last course section they took in fifth grade.*

🔾 Less than 1 percent 1

🔾 1 - 5 percent 2

🔾 6 - 10 percent 3

🔾 11 - 25 percent 4

🔾 More than 25 percent 5

🔾 Students are not grouped by ability 6

🔾 Do not know 7

|  |
| --- |
| A01d = 8 |

**D13.** Please estimate the percentage of students demoted to a previous level in mathematics between **sixth** and **seventh grade**.

8041300

🔾 Less than 1 percent 1

🔾 1 - 5 percent 2

🔾 6 - 10 percent 3

🔾 11 - 25 percent 4

🔾 More than 25 percent 5

🔾 Students are not grouped by ability 6

🔾 Do not know 7

|  |
| --- |
| ALL |

**D15a**. Thinking about students who are performing **below** grade level in math, what is the sequence of courses they would take starting in sixth grade?

8041504

8041503

8041502

8041501

| Grade 6 | Grade 7 | Grade 8 | Grade 9 |
| --- | --- | --- | --- |
| Select course… | Select course… | Select course… | Select course… |

|  |
| --- |
| PROGRAMMER BOX D15A  “SelEct course…” is a dropdown menu that will list all mathematics courses offered by the school and all courses under “other math” category including respondent specified courses. in addition the option “not sure” should be added at the end of the list  if all rows in D09=4 OR D09 = No Response, then skip D15a.  if all rows D09 = No Response, please program the following soft check to appear at the beginning of the question:  Please go back and complete item D09 before answering this item. To skip the question, click the Next button.  If no response if provided after soft check is triggered at d15a, then skip to d17. |

|  |
| --- |
| ALL |

**D15b**. Thinking about students who are performing **at** grade level in math, what is the sequence of courses they would take starting in sixth grade?

8041508

8041507

8041506

8041505

8041508

8041507

8041506

8041505

| Grade 6 | Grade 7 | Grade 8 | Grade 9 |
| --- | --- | --- | --- |
| Select course… | Select course… | Select course… | Select course… |

PROGRAMMER BOX D15b

“SelEct course…” is a dropdown menu that will list all mathematics courses offered by the school and all courses under “other math” category including respondent specified courses. in addition the option “not sure” should be added at the end of the list

if all rows in D09=4 D09 = No Response, then skip D15B.

|  |
| --- |
| ALL |

**D15c**. Thinking about students who are performing **above** grade level in math, what is the sequence of courses they would take starting in sixth grade?

8041512

8041511

8041510

8041509

| Grade 6 | | Grade 7 | Grade 8 | | Grade 9 |
| --- | --- | --- | --- | --- | --- |
| Select course… | | Select course… | Select course… | | Select course… |
|  | |  |  | |  |
| PROGRAMMER BOX D15c  “SelEct course…” is a dropdown menu that will list all mathematics courses offered by the school and all courses under “other math” category including respondent specified courses. in addition the option “not sure” should be added at the end of the list  if all rows in D09=4 D09 = No Response, then skip D15c. | | |

|  |
| --- |
| A01d = 8 |

**D17**. The next questions are about courses other than math at your school.

Approximately what percentage of your sixth-grade students are in each of the following instructional programs?

|  | Percentage of  **sixth-grade** students | Instructional program  **not** available at this grade |
| --- | --- | --- |
| a. Reading instruction for students performing below grade level in reading | 8041701  percent | 🞏  8041702 |
| b. Additional instruction for students performing below grade level in other areas of English language arts | 8041703  percent | 8041704  🞏 |
| c. Instruction for students performing below grade level in mathematics | 8041705  percent | 8041706  🞏 |
| d. Gifted and talented or International Baccalaureate® (IB) | 8041707  percent | 🞏  8041708 |

|  |
| --- |
| PROGRAMMER BOX D17  RANGE OF PERCENT CAN BE 0 – 100.  Please program so respondent can either enter a percentage or check the “Instructional program not available” box, but not both answers. IF “Instructional program not available at this grade” IS SELECTED, PLEASE DESELECT AND GRAY OUT ALL OTHER RESPONSES. |

|  |
| --- |
| All |

The next questions are about assisting students in the transition from one grade to the next.

D20. Does your school organize the transition from fifth grade to sixth grade in any of the following ways?

*Select all that apply*

8042001 🞏 a. Sixth-grade students share information with the fifth-grade students 1 D21

8042002 🞏 b. Fifth-grade students visit an assembly of sixth-grade students 2 D21

8042003 🞏 c. Fifth-grade students attend regular sixth grade courses 3 D21

8042004 🞏 d. Buddy programs that pair new students with an older student in the fall 4 D21

8042005 🞏 e. Parents visit the school or sixth-grade section while students are still in fifth-grade 5 D21

8042006 🞏 f. Parents can attend an orientation in the fall after students start sixth grade 6 D21

8042007 🞏 g. Meetings for fifth-grade students during the summer prior to beginning the sixth grade 7 D21

8042008 🞏 h. Sixth-grade and fifth-grade teachers meet together on courses and requirements 8 D21

8042009 🞏 i. sixth-grade and fifth-grade administrators meet together on articulation and programs 9 D21

8042010 🞏 j. Fifth-grade counselors meet with sixth-grade counselors or staff 10 D21

8042011 🞏 k. Sixth-grade counselors meet with students while they are still in fifth-grade 11 D21

8042012 🞏 l. Sixth-grade counselors meet with individual fifth-grade students and assist them with selecting sixth-gradecourses while they are still in fifth grade 12 D21

8042013 🞏 m. Fifth-grade counselors present information to fifth-grade students’ parents or guardians about sixth-grade courses and registration 13 D21

8042014 🞏 n. Fifth-grade counselors place fifth-grade students into sixth-grade courses based on school or district placement policies 14 D21

8042015 🞏 o. Fifth-grade counselors present information to fifth-grade students about sixth-grade courses and registration 15 D21

8042016 🞏 p. No special activities until students enter sixth grade 16 D21

8042017 🞏 q. Other *(Please specify.)* 99 D21

Specify (STRING 8000)

8042018 🞏 r. No transition – sixth grade seamlessly continues directly from fifth grade 17 D21

|  |
| --- |
| PROGRAMMER BOX D20  PLEASE note: first autofill [AF1] in the question stem is determined by the lowest grade level offered by school provided at a01d . Second autofill [AF2] in the question stem is determined by the lowest grade level offered by school of the three grade levels provided in the fill plus one (E.G. if lowest grade offered is sixth grade, then second autofill is seventh grade)  Please note: once AF1 and AF2 are determined for the question stem, those values should be used for each subsequent occurrence of [af1] and [af2] appear in the text of the item.  Please note: for the oft, af1=fifth grade and af2=sixth grade  Please add an information icon next to “counselor” that LINKs TO THE HELP TEXT BELOW:  A **counselor** is an educator who works in schools to provide academic, career, college readiness, and personal/social competencies to all students through a school counseling program.  If “other” is selected and no response is entered in the text box, please Use a SOFT check with the following text:  Please specify other ways your school organizes the transition from [AF1] grade to [AF2] grade.  IF “No transition – [AF2] grade seamlessly continues directly from [AF1] grade” IS SELECTED, PLEASE DESELECT AND GRAY OUT ALL OTHER RESPONSES. |

**D21.** Does your school provide additional assistance with the transition from fifth grade to sixth grade for students with disabilities?

8042100

🞏 Yes 1 D22

(STRING 8000)

🞏 No. 2 D22

|  |
| --- |
| PROGRAMMER BOX D21  PLEASE note: first autofill (AF1) and Second autofill (AF2) are same as D20.  If “Yes” is selected and no response is entered in the text box, please Use a Soft check with the following text:  Please specify other ways your school organizes the transition from [AF1] grade to [AF2] grade. |

|  |
| --- |
| all |

D22. Does your school organize the transition from sixth grade to seventh grade in any of the following ways?

*Select all that apply*.

🞏 a. Seventh-grade students share information with the sixth-grade students 3 D23

8042203

🞏 b. Sixth -grade students visit an assembly of seventh- grade students 4 D23

8042204

🞏 c. Sixth -grade students attend regular seventh-grade courses 5 D23

8042205

🞏 d. Buddy programs that pair new students with an older student in the fall 6 D23

8042206

🞏 e. Parents visit the school or seventh-grade section while students are still in sixth grade 7 D23

8042207

🞏 f. Parents can attend an orientation in the fall after students start seventh grade 8 D23

8042208

🞏 g. Meetings for sixth -grade students during the summer prior to beginning the seventh grade 9 D23

8042209

🞏 h. Seventh-grade and sixth-grade teachers meet together on courses and requirements 10 D23

8042210

🞏 i. Seventh-grade and sixth-grade administrators meet together on articulation and programs 11 D23

8042211

🞏 j. Sixth -grade counselors meet with seventh-grade counselors or staff 12 D23

8042212

🞏 k. Seventh -grade counselors meet with students while they are still in sixth grade 13 D23

8042214

8042213

🞏 l. Seventh-grade counselors meet with individual sixth -grade students and assist them with selecting seventh-grade courses while they are still in sixth grade 14 D23

🞏 m. Sixth-grade counselors present information to sixth -grade students’ parents or guardians about seventh-grade courses and registration 15 D23

8042215

🞏 n. Sixth-grade counselors place sixth-grade students into seventh-grade courses based on school or district placement policies 16 D23

8042216

🞏o. Sixth-grade counselors present information to sixth -grade students about seventh-grade courses and registration 17 D23

8042217

🞏 p. No special activities until students enter seventh grade 2 D23

8042202

🞏 q. Other *(Please specify.)* 99 D23

8042218

Specify (STRING 8000)

🞏 r. No transition— seventh grade seamlessly continues directly from sixth grade 1 D23

8042201

|  |
| --- |
| PROGRAMMER Box d22  PLEASE note: first autofill [AF3] in the question stem is selected by HIGHEST grade level offered by school of at A01d. Second autofill [AF4] in the question stem is determined as the value from first autofill plus 1 (e.g., if highest grade offered by school is eighth grade, then the [AF3] autofill is “Eighth” and the second autofill [af4] autofill is “ninth”).  Please note: once AF3 and AF4 are determined for the question stem, those values should be used for each subsequent occurrence of [AF3] and [AF4] appear in the text of the item.  please note: for the oft, af3=sixth grade, af4=seventh grade  Please add an information icon next to “counselor” That LINKs TO THE HELP TEXT BELOW:  A **counselor** is an educator who works in schools to provide academic, career, college readiness, and personal/social competencies to all students through a school counseling program.  If “other” is selected and no response is entered in the text box, please Use a Soft check with the following text:  Please specify other ways your school organizes the transition from [AF3] grade to [AF4] grade.  IF “No transition—[AF4] grade seamlessly continues directly from [AF3]] grade ” IS SELECTED, PLEASE DESELECT AND GRAY OUT ALL OTHER RESPONSES. |

|  |
| --- |
| All |

**D23.** Does your school provide additional assistance with the transition from sixth -grade to seventh-grade for students with disabilities?

8042300

🞏 Yes 1 D24

OTHER ASSISTANCE

(STRING 8000)

🞏 No. 2 D24

|  |
| --- |
| PROGRAMMER BOX D23  PLEASE note: first autofill (AF3) and Second autofill (AF4) are same as D22.  If “Yes” is selected and no response is entered in the text box, please Use a Soft check with the following text:  Please specify other ways your school organizes the transition from [AF3] grade to [AF4] grade. |

|  |
| --- |
| all |

**D24.** Does your school have an advisory program in the sixth grade?

|  |  |  |
| --- | --- | --- |
| 8042401 | Yes | 🔾 1 |
|  | No | 🔾 2 |

|  |
| --- |
| PROGRAMMER BOX d24  PLEASE ADD AN INFORMATION ICON TO the question text “advisory program” THAT LINKS TO THE HELP TEXT BELOW:  By **advisory program** we mean a guidance effort that provides every student with one adult advisor who serves as an advocate and small group leader. The group meets on a regular basis and typically focuses on educational advisement, study skills, personal and social development, schoolwide communication, or homeschool community relations.  if d24 = 2 (i.e., advisory program is not used in any of the middle grades offered by the school), skip respondent to D28. |

|  |
| --- |
| D24 = 1 |

**D25.** Which of the following best describes the way your school schedules time for the advisory program in sixth grade?

8042501

🔾 We have a separate class period for advising 1 D26

🔾 Advising is part of our homeroom period 2 D26

🔾 We integrate advisory activities within our teams and/or classrooms 3 D26

🔾 Other (*Please specify*) 99 D26

Specify (STRING 8000)

|  |
| --- |
| PROGRAMMER BOX D25  PLEASE ADD AN INFORMATION ICON TO the question text “advisory program” THAT LINKS TO THE HELP TEXT BELOW:  By **advisory program** we mean a guidance effort that provides every student with one adult advisor who serves as an advocate and small group leader. The group meets on a regular basis and typically focuses on educational advisement, study skills, personal and social development, schoolwide communication, or homeschool community relations.  If “other” is selected and no response is entered in the text box, please Use a SOFT check with the following text:  Please specify other ways your school schedules time for the [D24] grade advisory program. |

|  |
| --- |
| D24 = 1 |

**D26.** When did your school begin using an advisory program in the sixth grade?

| *Select one answer.* | School year started using advisory program | Don’t know |
| --- | --- | --- |
| 8042601 | Select school year… | 🞏  8042602 |

|  |
| --- |
| PROGRAMMER BOX D26  PLEASE ADD AN INFORMATION ICON TO the question text “advisory program” THAT LINKS TO THE HELP TEXT BELOW:  By **advisory program** we mean a guidance effort that provides every student with one adult advisor who serves as an advocate and small group leader. The group meets on a regular basis and typically focuses on educational advisement, study skills, personal and social development, schoolwide communication, or homeschool community relations.  Please program dropdown box to have the default as “select school year…” with the following options (note, do not include “1.” these are just for classification purposes):  1. Before 2008-09  2. 2009-10  3. 2010-11  4. 2011-12  5. 2012-13  6. 2013-14  7. 2014-15  8. 2015-16  9. Current school year  Please program so respondent can either select from dropdown or check the “don’t know” box, but not both answers. if the respondent selects an answer and checks the box, the following SOFT check should pop up:  You selected a school year and checked “Don’t know”. Please only choose one. If you are unsure of the exact school year, your best estimate is fine. |
|  |

|  |
| --- |
| D24 = 1 |

**D27.** On average, how much time do teachers regularly meet with sixth-gradestudents for advising? Your best estimate is fine.

| *Select one answer.* | Average advising  time **per week** | Don’t know |
| --- | --- | --- |
| 8042701 | Please select… | 🞏  8042702 |

|  |
| --- |
| PROGRAMMER BOX D27  PLEASE ADD AN INFORMATION ICON TO the question text “advisory program” THAT LINKS TO THE HELP TEXT BELOW:  By **advisory program** we mean a guidance effort that provides every student with one adult advisor who serves as an advocate and small group leader. The group meets on a regular basis and typically focuses on educational advisement, study skills, personal and social development, schoolwide communication, or homeschool community relations.  Please program dropdown box to have the default as “please select…” with the following options (note, do not include “1.” these are just for classification purposes):   1. None 2. Less than 30 minutes 3. 30-60 minutes 4. 61-120 minutes 5. 121-180 minutes 6. More than 180 minutes   Please program so respondent can either select from dropdown or check the “don’t know” box, but not both answers. if the respondent selects an answer and checks the box, the following soft check should pop up:  You selected an amount of time and checked “Don’t know”. Please only choose one. If you are unsure of the exact amount of time, your best estimate is fine. |

|  |
| --- |
| **ALL** |

The next questions are about health instruction at your school.

**D28.** Are sixth-grade students offered instruction on…

*Select all that apply.*

|  |  |  |  |
| --- | --- | --- | --- |
| 8042801 | 🞏 | a. Nutrition and dietary behavior? |  |
| 8042802 | 🞏 | b. Physical activity and fitness that is classroom instruction, not a physical education period? |  |
| 8042803 | 🞏 | c. Alcohol or other drug use prevention? |  |
| 8042804 | 🞏 | d. Tobacco use prevention? |  |
| 8042805 | 🞏 | e. HIV (human immunodeficiency virus) prevention? |  |
| 8042806 | 🞏 | f. STD (sexually transmitted disease) prevention? |  |
| 8042807 | 🞏 | g. Sexual health education? |  |
| 8042808 | 🞏 | h. Instruction was not offered for any of the topics listed. |  |

|  |
| --- |
| PROGRAMMER box D28  IF “Instruction was not offered for any of the topics listed.” IS SELECTED, PLEASE DESELECT AND GRAY OUT ALL OTHER RESPONSES. |

**E. SCHOOL ENVIRONMENT**

|  |
| --- |
| all |

The following questions are about problems you may experience at your school.

**E01.** To what degree is each of the following a problem at your school?

PROGRAMMER: CODE ONE PER ROW

| *Select one answer for each row.* | Not a problem | Minor problem | Moderate problem | Serious problem |
| --- | --- | --- | --- | --- |
| a. School tardiness  8050101 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| b. School absenteeism  8050102 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| c. Student class cutting  8050103 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| d. Teacher absenteeism  8050104 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| e. Students dropping out  8050105 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| f. Student apathy  8050106 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| g. Lack of parental involvement  8050107 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| h. Students coming to school unprepared to learn  8050108 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| i. Poor student health  8050109 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| j. Lack of resources and materials  8050110 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |
| k. Student mobility  8050111 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 |

|  |
| --- |
| all |

**E02.** To the best of your knowledge, how often did the following types of problems occur in your school in the last month?

PROGRAMMER: CODE ONE PER ROW

| *Select one answer for each row.* | Never | Rarely | Sometimes | Often | Very often |
| --- | --- | --- | --- | --- | --- |
| a. Conflicts resulting from student racial/ethnic tensions  8050201 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| b. Student bullying  8050202 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| c. Student sexual harassment of other students  8050203 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| d. Student harassment of other students based on sexual orientation or gender identity  8050204 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| e. Widespread disorder in classrooms  8050205 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| f. Students yelling and screaming at teachers  8050206 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| g. Student acts of disrespect for teachers other than verbal abuse  8050207 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| h. Gang activities  8050208 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| i. Cult or extremist group activities  8050209 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| PROGRAMMER BOX E02  PLEASE MAKe the response option text “Sexual orientation or gender identity” THAT LINKS TO THE HELP TEXT BELOW:  By **sexual orientation or gender identity** we mean, for example, harassment toward students who might be lesbian, gay, bisexual, transgender, and/or questioning. |

|  |
| --- |
| all |

The next questions are about school-level security at your school.

**E03.** During this school year, is it a practice of your school to do the following?

*If your school changed its practices during the school year, please answer regarding your most recent practice.*

PROGRAMMER: CODE ONE PER ROW

|  | *Select all that apply.* | |  |
| --- | --- | --- | --- |
| 8050301 | 🞏 | a. Require visitors to sign or check in |  |
| 8050302 | 🞏 | b. Control access to school buildings during school hours |  |
| 8050303 | 🞏 | c. Control access to school grounds during school hours |  |
| 8050304 | 🞏 | d. Require students to pass through metal detectors each day |  |
| 8050305 | 🞏 | e. Require students to wear uniforms |  |
| 8050306 | 🞏 | f. Enforce a strict dress code |  |
| 8050307 | 🞏 | g. Perform one or more random sweeps for contraband, including dog sniffs |  |
| 8050308 | 🞏 | h. Provide school lockers to students |  |
| 8050309 | 🞏 | i. Require clear book bags or ban book bags on school grounds |  |
| 8050310 | 🞏 | j. Require students to wear badges or picture IDs |  |
| 8050311 | 🞏 | k. Require faculty and staff to wear badges or picture IDs |  |
| 8050312 | 🞏 | l. Use one or more security cameras to monitor the school |  |
| 8050313 | 🞏 | m. Limit access to social networking websites from school computers |  |
| 8050314 | 🞏 | n. Prohibit use of cell phones, smart phones, and text messaging devices during school hours |  |

|  |
| --- |
| PROGRAMMER BOX E03  PLEASE MAKe the response option text “Control access to school buildings” THAT LINKS TO THE HELP TEXT BELOW:  By **control access to school buildings** we mean, for example, having locked or monitored doors.  PLEASE MAKe the response option text “Control access to school grounds” THAT LINKS TO THE HELP TEXT BELOW:  By **control access to school grounds** we mean, for example, having locked or monitored gates.  PLEASE MAKe the response option text “contraband” THAT LINKS TO THE HELP TEXT BELOW:  By **contraband** we mean, for example, drugs or weapons.  PLEASE MAKe the response option text “social networking websites” THAT LINKS TO THE HELP TEXT BELOW:  By **social networking websites** we mean web-based services that allow people to create a personal profile and to connect with other people who share similar interests, activities, backgrounds or real-life connections. For example, Facebook and Twitter. |

|  |
| --- |
| All |

**E04.** During this school year, have you had any security guards, security personnel, school resource officers or sworn law enforcement officers present at your school at least once a week?

8050400

🔾 Yes 1 E05

🔾 No 2

|  |
| --- |
| PROGRAMMER BOX E04  PLEASE ADD AN INFORMATION ICON TO the question text “security guard, security personnel” THAT LINKS TO THE HELP TEXT BELOW:  **Security guard or security personnel** are not official law enforcement.  PLEASE MAKe the row text “school resource officer” THAT LINKS TO THE HELP TEXT BELOW:  For **school resource officer** please include all career law enforcement officers with arrest authority, who have specialized training and are assigned to work in collaboration with school organizations.  PLEASE ADD AN INFORMATION ICON TO the question text “sworn law enforcement officer” THAT LINKS TO THE HELP TEXT BELOW:  For **sworn law enforcement officer** please include sworn law enforcement officers who are not school resource officers. |

|  |
| --- |
| E04=1 |

**E05.** Are these security guards, security personnel, school resource officers, or sworn law enforcement officers used at least once a week in or around your school at the following times?

*Select all that apply.*

🞏 At any time during school hours 1 E06

8050501

🞏 While students are arriving or leaving 2 E06

8050502

🞏 At selected school activities 3 E06

8050503

🞏 When school activities are not occurring 4 E06

8050504

|  |
| --- |
| PROGRAMMER BOX E05  PLEASE ADD AN INFORMATION ICON TO the question text “security guard, security personnel” THAT LINKS TO THE HELP TEXT BELOW:  **Security guard or security personnel** are not official law enforcement.  PLEASE MAKe the row text “school resource officer” THAT LINKS TO THE HELP TEXT BELOW:  For **school resource officer** please include all career law enforcement officers with arrest authority, who have specialized training and are assigned to work in collaboration with school organizations.  PLEASE ADD AN INFORMATION ICON TO the question text “sworn law enforcement officer” THAT LINKS TO THE HELP TEXT BELOW:  For **sworn law enforcement officer** please include sworn law enforcement officers who are not school resource officers.  Please add an information icon next to “school activities” that LINKs TO THE HELP TEXT BELOW:  By **school activities** we mean, for example, athletic and social events, open houses, or science fairs. |

|  |
| --- |
| E04=1 |

E06-E08.How many full-time equivalent (FTE) of the following personnel are present in your school during a typical week?

PROGRAMMER: RANGE FOR GRID IS 0-50

|  | Number of full-time equivalent (FTE) | |
| --- | --- | --- |
| a. Security guard or security personnel  8050601 |  | FTE |
| b. School resource officer  8050701 |  | FTE |
| c. Sworn law enforcement officer  8050801 |  | FTE |

|  |
| --- |
| PROGRAMMER BOX E06-E08  Please limit the text box to accept numeric responses only, with the exception of the use of the period symbol (“.”).  PLEASE MAKe the Column Header text “number of full-time equivalent” THAT LINKS TO THE HELP TEXT BELOW:  One full-time personnel at your school should be counted as 1.0 full-time equivalent (FTE) and one part-time personnel should be counted as 0.5 full-time equivalent (FTE).  If a personnel works full-time across multiple schools in the district, please count this person as “part-time” for your school (i.e., 0.5 FTE).  PLEASE MAKe the row text “security guard or security personnel” THAT LINKS TO THE HELP TEXT BELOW:  **Security guard or security personnel** are not official law enforcement.  PLEASE MAKe the row text “school resource officer” THAT LINKS TO THE HELP TEXT BELOW:  For **school resource officer** please include all career law enforcement officers with arrest authority, who have specialized training and are assigned to work in collaboration with school organizations.  PLEASE MAKe the row text “sworn law enforcement officer” THAT LINKS TO THE HELP TEXT BELOW:  For **sworn law enforcement officer** please include sworn law enforcement officers who are not school resource officers. |

|  |
| --- |
|  |

The following question is about the community around your school.

|  |
| --- |
| All |

E09b. How would you describe the crime level in the area where your school is located?

8050902

🔾 High level of crime 1 F01

🔾 Moderate level of crime 2 F01

🔾 Low level of crime 3 F01

**F. SCHOOL’S TEACHERS**

|  |
| --- |
| all |

The following questions are about teachers at your school.

**F01.** Please indicate the number of full-time equivalent (FTE) sixth-grade teachers by subject area. Please give your best estimate.

PROGRAMMER: RANGE FOR GRID IS 0-100

|  | Number of full-time equivalent (FTE) | |
| --- | --- | --- |
|  |  | |
| a. Mathematics  8060102 |  | FTE |
| b. English/Language arts  8060103 |  | FTE |
| c. Science  8060104 |  | FTE |

|  |
| --- |
| PROGRAMMER BOX F01  Please limit the text box to accept numeric responses only, with the exception of the use of the period symbol (“.”).  PLEASE ADD AN INFORMATION ICON TO the question text “full-time equivalent (FTE)” THAT LINKS TO THE HELP TEXT BELOW:  A full-time teacher at your school should be counted as 1.0 **full-time equivalent (FTE)** and a part-time teacher should be counted as 0.5 FTE.  If a teacher works full-time in your school, but divides his or her time between subject areas or across grades, consider that teacher as part-time in each subject area or grade. |

|  |
| --- |
| All |

**F02.** Thinking of all the subjects offered in your school, how many classroom teachers are currently working at your school? Your best estimate is fine.

8060200

*Please include full-time and part-time teachers, and only include onsite teachers.*

*Please exclude staff who work at the school but are not classroom teachers, or classroom teachers that do not teach onsite (e.g., online course instructors).*

Classrooms teachers F03

(RANGE 0-1000)

NO RESPONSE M F03

|  |
| --- |
| SOFT CHECK: IF ENTRY IS NON-NUMERIC; **Please enter only numbers in your response.** |
| SOFT CHECK: IF ENTRY CONTAINS VALUES OUTSIDE OF THE RANGE OF 0-1000; **Please enter a number between 0 and 1000.** |

|  |
| --- |
| PROGRAMMER BOX f02  Please limit the text box to accept numeric responses only, with the exception of the use of the period symbol (“.”). |

|  |
| --- |
| all |

**F03.** How many classroom teachers in your school have the following certifications? Your best estimate is fine.

*Please include provisionally certified teachers in your counts.*

PROGRAMMER: RANGE FOR GRID IS 0-1000

|  | Number of classroom teachers |
| --- | --- |
| a. Elementary certification  8060301 |  |
| b. Secondary subject matter certification  8060302 |  |
| c. Middle grades endorsement  8060303 |  |
| d. Specific middle grades certification  8060304 |  |
| e. Special education certification  8060305 |  |
|  |  |
| SOFT CHECK: IF ENTRY IS NON-NUMERIC; **Please enter only numbers in your response.** | |
| SOFT CHECK: IF ENTRY CONTAINS VALUES OUTSIDE OF THE RANGE OF 0-1000; **Please enter a number between 0 and 1000.** | |
|  | |

|  |  |
| --- | --- |
| PROGRAMMER BOX F03  Please limit the text box to accept numeric responses only, with the exception of the use of the period symbol (“.”).  PLEASE MAKe the ROW text “middle grades endorsement” THAT LINKS TO THE HELP TEXT BELOW:  By **middle grades endorsement** we mean an add-on to elementary or secondary certification.  PLEASE MAKe the ROW text “Specific middle grades certification” THAT LINKS TO THE HELP TEXT BELOW:  By **specific middle grades certification** we mean a certification separate from elementary or secondary. | |
| All | |

The following questions ask about teacher preparedness to teach specific subjects.

**F04.** To what extent do you disagree or agree with the following statements?

PROGRAMMER: CODE ONE PER ROW

| *Select one answer for each row.* | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree | Subject not taught at this school |
| --- | --- | --- | --- | --- | --- | --- |
| a. English/Language Arts teachers at your school are adequately prepared to teach English/Language Arts.  8060401 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5🔾 | 6 🔾 |
| b. General mathematics teachers at your school are adequately prepared to teach general mathematics.  8060402 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5🔾 | 6 🔾 |
| c. Algebra teachers at your school are adequately prepared to teach Algebra.  8060403 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5🔾 | 6 🔾 |
| d. Algebra II teachers at your school are adequately prepared to teach Algebra II.  8060404 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5🔾 | 6 🔾 |

|  |
| --- |
| **ALL** |

**F05. How often do you do the following?**

| *Select one answer for each row.* | Not at all | Once or twice a year | Once per reporting period | Monthly | Weekly | More than weekly |
| --- | --- | --- | --- | --- | --- | --- |
| a. Participate in meetings about challenges that students are having  8060601 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5🔾 | 6 🔾 |
| b. Discuss instructional strategies with teachers  8060602 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5🔾 | 6 🔾 |
| c. Summarize and share data with teachers  8060603 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5🔾 | 6 🔾 |
| d. Interpret data for or with teachers  8060604 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5🔾 | 6 🔾 |
| e. Press teachers to raise learning standards  8060605 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5🔾 | 6 🔾 |

|  |
| --- |
| All |

The next questions ask about teacher preparedness to assist students who are experiencing difficulties in specific subjects.

**F06.** To what extent do you disagree or agree with the following statements?

PROGRAMMER: CODE ONE PER ROW

| *Select one answer for each row.* | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree | Subject not taught at this school |
| --- | --- | --- | --- | --- | --- | --- |
| a. General mathematics teachers at your school are adequately prepared to assist students who are experiencing difficulties in general mathematics.  8060501 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5🔾 | 6 🔾 |
| b. Algebra I teachers at your school are adequately prepared to assist students who are experiencing difficulties in Algebra I.  8060502 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5🔾 | 6 🔾 |
| c. Algebra II teachers at your school are adequately prepared to assist students who are experiencing difficulties in Algebra II.  8060503 | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5🔾 | 6 🔾 |

**G. ADMINISTRATOR’S BACKGROUND**

|  |
| --- |
| All |

The next set of questions are about your background and experience.

G01. What is your sex?

8070100

*Select the one that best describes you.*

🔾 Male 1 G02

🔾 Female 2 G02

NO RESPONSE M G02

|  |
| --- |
| All |

G02. Are you Hispanic or Latino/Latina?

8070200

*Select the one that best describes you*.

🔾 Yes 1 G03

🔾 No 2 G03

NO RESPONSE M G03

|  |
| --- |
| SOFT CHECK: IF G02 = NO RESPONSE; **Please provide an answer to this question and then click “Next”. To continue without providing a response, click the “Next” button.** |

|  |
| --- |
| PROGRAMMER BOX G02  HYPER LINK THE WORDS **“Hispanic or Latino/Latina”** FOR G02 QUESTION TEXT:  **Hispanic or Latino/Latina**: a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish cultures or origin (or descent), regardless of race. |

|  |
| --- |
| all |

G03. Which of the following best describes your race? You may choose more than one.

*Select all that apply.*

🞏 a. White 1 G04

8070301

🞏 b. Black or African American 2 G04

8070302

🞏 c. Asian 3 G04

8070303

🞏 d. Native Hawaiian or other Pacific Islander 4 G04

8070304

🞏 e. American Indian or Alaska Native 5 G04

8070305

NO RESPONSE M G04

|  |
| --- |
| SOFT CHECK: IF G03 = NO RESPONSE; **Please provide an answer to this question and then click “Next”. To continue without providing a response, click the “Next” button.** |

|  |
| --- |
| PROGRAMMER BOX G03  Please add an information icon next to each of these response categories which would be the link to the help text but not activate the check box. If they clicked the information icon , it would take them to the help text but will not automatically check the response:  **White**: a person having origins in any of the original peoples of Europe, the Middle East, or North Africa.   **Black or African American**: a person having origins in any of the black racial groups of Africa.   **Asian**: a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.   **Native Hawaiian or other Pacific Islander**: a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.   **American Indian or Alaska Native**: a person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment. |

|  |
| --- |
| all |

G04. What is the highest degree you have earned?

8070400

🔾 Associate's degree 1 G05

🔾 Bachelor’s degree 2 G05

🔾 Master’s degree 3 G05

🔾 Educational Specialist degree 4 G05

🔾 Ph.D.,Ed.D., M.D., law degree, or other high level professional degree 5 G05

🔾 You do not have a degree 6 G06

|  |
| --- |
| SOFT CHECK: IF G04 = NO RESPONSE; **Please provide an answer to this question and then click “Next”. To continue without providing a response, click the “Next” button.** |

|  |
| --- |
| G04 NE 6 or g04 is missing |
| FILL RESPONSE FROM G04 |

G05. What was your major(s) or field(s) of study for your [G04]?

8070500

(STRING 250)

|  |
| --- |
| PROGRAMMER BOX G05  AUTOFILL FOR g05 BASED ON RESPONSE TO G04>=1 AND G04<=5. IF G04 = MISSING AUTOFILL SHOULD READ “HIGHEST DEGREE EARNED” |

|  |
| --- |
| all |

G06. What teaching certification(s) have you ever held?

*Select all that apply.*

🞏 a. Middle grades certification 1 G07

8070601

🞏 b. Elementary certification 2 G07

8070602

🞏 c. Secondary subject matter certification 3 G07

8070603

🞏 d. Special education certification 4 G07

8070604

🞏 e. Other (*Please specify*) 99 G07

8070605

Specify (STRING 250)

|  |
| --- |
| PROGRAMMER BOX G06  Please add an information icon next to “Middle grades” That links to the following text:  By **middle grades** we mean a certification that is separate from elementary or secondary certification.  If “other” is selected and no response is entered in the text box, please Use a hard check with the following text:  Please specify the other teaching certification(s) you have ever held. |

|  |
| --- |
| all |

G07. Have you received any specialized training in the instructional and organizational needs of a middle school?

*Select all that apply.*

🞏 a. Preservice coursework 1 G08

8070701

🞏 b. Certification coursework 2 G08

8070702

🞏 c. Professional development 3 G08

8070703

🞏 d. Master’s degree 4 G08

8070704

🞏 e. Doctoral degree 5 G08

8070705

🞏 f. Other (*Please specify*) 99 G08

8070706

Specify (STRING 250)

🞏 g. Never received any specialized training 6 G08

8070707

|  |
| --- |
| PROGRAMMER BOX G07  If “other” is selected and no response is entered in the text box, please Use a hard check with the following text:  Please specify any other specialized training in the instructional and organizational needs of a middle school you have received.  IF “Never received any specialized training.” IS SELECTED, PLEASE DESELECT AND GRAY OUT ALL OTHER RESPONSES. |

|  |
| --- |
| all |

G08. What other experiences in education have you had in the past?

*Select all that apply.*

🞏 a. Principal/school administrator of another elementary school 1 G09

8070801

🞏 b. Principal/school administrator of another middle school or junior high school 2 G09

8070802

🞏 c. Principal/school administrator of another high school 3 G09

8070803

🞏 d. Assistant principal 4 G09

8070804

🞏 e. Elementary school teacher 5 G09

8070806

8070805

🞏 f. Middle school or junior high school teacher 6 G09

8070807

🞏 g. High school teacher 7 G09

8070808

🞏 h. Coach/Group sponsor 8 G09

8070809

🞏 i. Other (*Please specify*) 99 G09

Specify (STRING 250)

|  |
| --- |
| PROGRAMMER BOX G08  If “other” is selected and no response is entered in the text box, please Use a hard check with the following text:  Please specify other experiences in education you have had in the past. |

|  |
| --- |
| All |

Finally, we would like to ask you about your years of experience.

**G09.**Including this school year…

PROGRAMMER: RANGE FOR GRID IS 0-99

|  | Number of years | |
| --- | --- | --- |
| a. How many years have you served [as the [A03]] at **any school**?  8070901 |  | Year(s) |
| b. How many years have you served [as the [A03]] at your **current school**?  8070902 |  | Year(s) |
| c. How many years have you taught sixth, seventh, or eighth grade?  8070903 |  | Year(s) |

|  |
| --- |
| SOFT CHECK: IF ENTRY IS NON-NUMERIC; **Please enter only numbers in your response.** |
| SOFT CHECK: IF ENTRY CONTAINS VALUES OUTSIDE OF THE RANGE OF 0-99; **Please enter a value between 0 and 99.** |
| CONSISTENCY CHECK: If number of years entered at G9b is > G09a; **You entered a number greater than the number of years you have served at any school. This creates conflicting information. Please change your response(s) to be consistent.** |

|  |
| --- |
| PROGRAMMER BOX G09  Please limit the text box to accept numeric responses only, with the exception of the use of the period symbol (“.”).  AUTOFILL FOR G09A/G09B BASED ON RESPONSE TO A03>0 AND A03<=4. IF A03 = 99, AUTOFILL FOR G09A/G09B BASED ON RESPONSE TO A03OS. IF A03 = MISSING, MODIFY G09A/G09B TEXT TO replace “as the [A03]” with “at the current position you have”  HYPER LINK THE QUESTION TEXT “SCHOOL YEAR” TO HAVE THE FOLLOWING HELP TEXT:  If this is your first year in your current position, please count it as “1” even if you have not finished an entire year. |

|  |
| --- |
| ALl |

**Section Review.**These are all the questions we have for you. We appreciate you taking the time to complete the survey.

Your responses are very important to this study!  
  
The following sections of your survey have not yet been fully completed:  
  
IntroSchool CharacteristicsSchool ProgramsSchool EnvironmentSchool's TeachersAdministrator Background

Please use the navigation bar at the top of this page or follow the link(s) above  
to return to the incomplete sections to provide any missing responses.

|  |
| --- |
| PROGRAMMER BOX Section Review  Please populate hyperlinked section list Based on the sections that are incomplete when the respondent reaches this question. Clicking on the hyperlink will take the user back to the corresponding section that is not completed.  For Section A: INTRO to be complete  Questions: A01a, A01b, A01c, A01d, A02a, A03 must all have responses for every item on the screen.  If A02a = 2, THEN A02b, A02c, and A02d must have a response, but otherwise A02b, A02c, and A02d can be blank.  For Section B: SCHOOL CHARACTERISTICS to be complete  Questions: B01, B02, B03, B06, B07, B08, B09, B13-15 must all have responses for every item on the screen.  If B01 = 2 or 99 THEN B03 must have a response, but otherwise B03 can be blank.  If B01 = 5 or 99 THEN B05 must have a response, but otherwise B04 can be blank.  If B03 > 0, THEN B04 must have a response, but otherwise B05 can be blank.  If B01 = 5 or 99 AND B03 > 0 THEN B05 must have a response, but otherwise B05 can be blank.  If B01 NE 5, THEN B10, B11, and B12 must have a response, but otherwise B10, B11, and B12 can be blank.  For Section C: SUPPORTS FOR STUDENTS to be complete  Questions: C01, C02, C03 must all have responses for every item on the screen.  For Section D: SCHOOL PROGRAMS to be complete  Questions: D01, D08, D09, D10, D20, D21, D22, D23, D24, D28 must all have responses for every item on the screen.  If D01 =1, THEN D02, D03, D04, D05, D06, and D07 must have a response, but otherwise D02, D03, D04, D05, D06, and D07 can be left blank.  If A01d = 8, THEN D17 must have a response, but otherwise D17 can be left blank.  If A01d = 9, THEN D11, D13, D15a, D15b, D15c must have a response, but otherwise D11, D13, D15a, D15b, D15ccan be left blank.  If D24 = 1, THEN D25, D26, and D27 must have a response, but otherwise, D25, D26, and D27 can be left blank.  For Section E: SCHOOL ENVIRONMENT to be complete  Questions: E01, E02, E03, E04, E09b must all have responses for every item on the screen.  If E04 = 1, THEN E05, E06, E07, and E08 must have a response, but otherwise E05, E06, E07, and E08 can be blank.  For Section F: SCHOOL’S TEACHERS to be complete  Questions: F01, F02, F03, F04, F05, F06 must all have responses for every item on the screen.  For Section G; ADMINISTRATOR’S BACKGROUND to be complete  Questions: G01, G02, G03, G04, G06. G07, G08 G09, must all have responses for every item on the screen.  If G04 NE 6, THEN G05 must have a response, but otherwise G05 can be blank. |

|  |
| --- |
| ALl |

END. These are all the questions we have for you. We appreciate you taking the time to complete the survey.

Thank you very much for participating in MGLS:2017!

Press "Submit" to complete and close the survey.

|  |
| --- |
| PROGRAMMER BOX END  PROGRAM A “Submit” BUTTON ON THE SCREEN. The button will finalize answers, and close down the interface in which the survey was displayed. EXIT SURVEY. |

|  |
| --- |
| a02b = 1 |

END1. Thank you for your time.

Press “Submit” to finish.

|  |
| --- |
| PROGRAMMER BOX END1  PROGRAM A “Submit” BUTTON ON THE SCREEN. The button will finalize answers, and close down the interface in which the survey was displayed. EXIT SURVEY. |

## Appendix OFT1-V. Facilities Checklist Specifications

The Facilities Checklist will be completed by data collection contractor study team member staff.

**Facilities Checklist**

AA. School structure

The following question is about the features at the school.

AA1. Please indicate all features you observed at this school

|  | *Select one answer for each row* | Observed | Not observed |
| --- | --- | --- | --- |
| 9000102 | 1. Auditorium/Performing Arts | 1 🔾 | 2 🔾 |
| 9000103 | 1. Art Facilities | 1 🔾 | 2 🔾 |
| 9000104 | 1. Cafeteria (separate from auditorium and gym) | 1 🔾 | 2 🔾 |
| 9000106 | 1. Common areas/courtyards | 1 🔾 | 2 🔾 |
| 9000107 | 1. Computer lab | 1 🔾 | 2 🔾 |
| 9000108 | 1. Gymnasium | 1 🔾 | 2 🔾 |
| 9000109 | 1. Health Services room | 1 🔾 | 2 🔾 |
| 9000110 | 1. Library or media center | 1 🔾 | 2 🔾 |
| 9000113 | 1. Music Education room | 1 🔾 | 2 🔾 |
| 9000115 | 1. Science room, set-up as a lab space | 1 🔾 | 2 🔾 |
| 9000117 | 1. Building(s) with more than one floor (multiple stories) | 1 🔾 | 2 🔾 |
| 9000118 | 1. Campus with more than one building | 1 🔾 | 2 🔾 |
| 9000119 | 1. Each grade housed in different areas of the school | 1 🔾 | 2 🔾 |
| 9000120 | 1. Elevators | 1 🔾 | 2 🔾 |
| 9000121 | 1. Trailers (for classrooms or offices) | 1 🔾 | 2 🔾 |

A0. Please note the time of day that you observed the items below:

9010100

A. General Condition of Neighborhood/Area Around School

The following questions are about the condition of the immediate neighborhood/area around the school.

A1. While you are standing outside of the school (near the entrance where most visitors arrive), look at the neighborhood/area surrounding the school. Please indicate the extent to which you notice the following factors in the neighborhood/area surrounding this school.

|  | *Select one answer for each row* | Not at all | A little | Some | A lot | No opportunity to observe |
| --- | --- | --- | --- | --- | --- | --- |
| 9010101 | 1. Litter or trash | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9010102 | 1. Graffiti | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9010103 | 1. Boarded up buildings | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9010104 | 1. People congregating on streets | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9010105 | 1. Student(s) loitering | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

B. General Upkeep-Main Entrance and Hallways and Displays at the School

B0. Please note the time of day that you observed the items below:

9020100

The next questions are about the general upkeep of the entrance and the hallways and displays at the school.

B1. Observe the school's main entrance (near the entrance where most visitors arrive) and the hallway(s) and displays during a time when most students are in class (i.e., a class period). Take as much time as necessary to observe the hallway(s). Please indicate to what degree you notice the following factors about the general upkeep and displays at the school.

|  | *Select one answer for each row* | Not at all | A little | Some | A lot | No opportunity to observe |
| --- | --- | --- | --- | --- | --- | --- |
|  | **General Upkeep** |  |  |  |  |  |
| 9020101 | a. Trash on the floors | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9020102 | b. Trash overflowing from trash cans | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9020103 | c. Broken lights | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9020104 | d. Graffiti on the walls, doors, or ceilings | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9020105 | e. Graffiti on the lockers | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9020106 | f. Visible fire alarms or emergency alarms | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9020107 | g. Chipped paint on the walls, doors, or ceilings | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9020108 | h. Ceiling in disrepair (e.g., falling in, water damage, missing tiles, or plaster) | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9020109 | i. Visible exit signs | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
|  | Displays |  |  |  |  |  |
| 9030104 | j. School identity is visible (e.g., mascot, logo, colors, slogan) | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9030105 | k. Accomplishments of the school are noted | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9030101 | l. Displays of the works or accomplishments of students on walls or lockers | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9030106 | m. Student academic work displayed | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9030107 | n. Expectations for student behavior displayed | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9030103 | o. Displays of posters encouraging positive behavior choices and well being, such as conflict resolution guidance or healthy food choices | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9030102 | p. Displays of student activities and opportunities for involvement, such as student government, yearbook, or school event committees | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9030108 | q. Learning resources for students are displayed, for example, formulas, abbreviations, steps for reviewing. | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| **K. School accomplishments** include award display cases that highlight both sports and/or academic accomplishments, individual student success may be highlighted such as student of the month, caught being good, banners announcing exemplary programming and school awards and designations.  **L. Individual accomplishments** might be displayed on walls or on lockers. For example, behavioral and academic recognition, such as perfect attendance, most cooperative, strong effort, most improved, high achievement.  **Q. Learning resources** include displays of information such as how to find circumference, how to edit an essay, abbreviations for measurements such as ounce, pound, inch, foot, and their equivalents [ex: 16 oz = 1 lb] |

B2. For each item listed, please indicate the extent to whichyou notice the following factors in school displays.

In the questions below, by “team” we mean for example in some schools students are put into separate groups with common teaching teams, and these students share homeroom with their groups.

|  |  |  | | | |  | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | *Select one answer for each row* | Not at all | A little | Some | A lot | | No opportunity to observe |
| 9030109 | 1. Team identification is visible (e.g., team name, team mascots, team slogans) | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | | 5 🔾 |
| 9030110 | 1. Team expectations and team rules are posted | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | | 5 🔾 |
| 9030111 | 1. Team calendars are displayed | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | | 5 🔾 |
| 9030112 | 1. Student recognition is noted with the team (e.g., student or team-centered celebrations, random acts of kindness, team most improved or student of the week) | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | | 5 🔾 |

B3. For each item listed, indicate the extent to which you notice the following.

|  |  |  | | | |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | *Select one answer for each row* | Not at all | A little | Some | A lot | No opportunity to observe |
| 9030118 | 1. Student social spaces (e.g., open space, outside of the classroom, teaching team pod areas) | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9030119 | 1. Teachers are at classroom doors during passing periods | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9030115 | 1. Data walls are visible | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

|  |
| --- |
| **Data walls** are displays of student performance and/or progress in different areas related to behavior (for example, attendance) or academics (for example, graphs of scores on tests of different objectives). May show performance and/or progress for a single month or compare current performance and/or progress to that of prior months. |

D. Classrooms

The next questions are about the general upkeep of classrooms.

D.1 During a change in classes or other time when classes are not in session, enter at least one classroom in which students in grade 6 are taught. For each item listed, indicate the extent to which you notice the following factors in the classroom.

Note: If no windows available, mark as No opportunity to observe.

|  | *Select one answer for each row* | Not at all | A little | Some | A lot | No opportunity to observe |
| --- | --- | --- | --- | --- | --- | --- |
| 9040101 | 1. Locks controlled from inside of door | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040102 | 1. Ceiling in disrepair (e.g., falling in, water damage, missing tiles or plaster) | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040103 | 1. Broken lights | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040104 | 1. Graffiti on the walls, doors, or ceilings | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040105 | 1. Graffiti on desks | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040106 | 1. Trash on the floors | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040107 | 1. Trash overflowing from trash cans | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040108 | 1. Floors and walls appear clean | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040109 | 1. Posters or other materials on glass windows | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040110 | 1. Bars on windows | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040111 | 1. Broken windows | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

The next questions are about the classroom set up.

D2. For each item listed, indicate the extent to which you notice the following factors in the classroom set up.

|  | |  | *Select one answer for each row* | | | |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | | Not at all | A little | Some | A lot | No opportunity to observe |
| 9040112 | 1. Desks are clustered or small tables available in classrooms so that they allow for small group work | | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040114 | 1. Desks are set up in rows in classrooms | | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040115 | 1. Class rules and responsibilities are displayed | | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040116 | 1. Colorful and engaging materials that support learning and/or character development are displayed | | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040117 | 1. Standards and learning guides are posted | | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040118 | 1. Multimedia is visible, e.g., smartboards, computers or tablets, calculators | | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040119 | 1. Weekly or daily assignments are posted | | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9040120 | 1. Student work is displayed | | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

E. General Upkeep - Restrooms

The following questions are about the general upkeep of the school restrooms.

E.1 During a time when most students are in class (i.e., a class period), enter any student restroom appropriate for your sex. For each item listed, please indicate to what degree you notice the following factors in the general upkeep of the school restrooms.

|  | *Select one answer for each row* | Not at all | A little | Some | A lot | No opportunity to observe |
| --- | --- | --- | --- | --- | --- | --- |
| 9050101 | 1. Graffiti on walls and ceilings | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9050102 | 1. Graffiti on restroom stall doors or walls | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9050103 | 1. Trash on the floors | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9050104 | 1. Trash overflowing from trash cans | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9050105 | 1. Doors on all stalls | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9050106 | 1. Student(s) loitering | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9050107 | 1. Student(s) smoking | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

F. Security

The next questions are about security measures at the school.

F.1 Indicate the extent to which you observed the presence of the following security measures today.

|  | *Select one answer for each row* | Not at all | A little | Some | A lot | No opportunity to observe |
| --- | --- | --- | --- | --- | --- | --- |
| 9060101 | 1. Security guard | 1🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060102 | 1. Metal detectors | 1🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060103 | 1. Security cameras | 1🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060104 | 1. Fencing around the entire school | 1🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060105 | 1. Sign-in policies being followed | 1🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060106 | 1. Visitors greeted and directed by an adult to sign in at office | 1🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060107 | 1. Fire alarms | 1🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060108 | 1. Fire extinguishers | 1🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060109 | 1. Fire sprinklers | 1🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060110 | 1. Exterior lights | 1🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060111 | 1. Student uniforms | 1🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060112 | 1. Signs at exterior doors stating alarm will go off if door is opened | 1🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

F.2 The next questions are about signs that may be posted at or near the main entrance of the school (near the entrance where most visitors arrive) and can be inside and/or outside the building.

|  |  | Not at all | A little | Some | A lot | No opportunity to observe |
| --- | --- | --- | --- | --- | --- | --- |
|  | *Select one answer for each row* |
| 9060201 | 1. Signs providing directions to the front office or stating that visitors must proceed to the front office | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060202 | 1. Signs conveying the message "no drugs" | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060203 | 1. Signs conveying the message "no trespassing" | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060204 | 1. Signs conveying the message "no weapons" | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060205 | 1. Where to get assistance (e.g., school support services such as Counselor, Social Worker, Media Specialist, Nurse, or Health Care Assistant) | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060206 | 1. Conflict resolution and peer mediation | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060207 | 1. Healthy choices | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060208 | 1. Cell phone use | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060209 | 1. Anti-bullying messages | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060210 | 1. Anti-drug messages | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |
| 9060211 | 1. Anti-smoking messages | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 |

F.3 Do a majority of the following individuals wear identification cards/badges?

|  | *Select one answer for each row* | Not at all | A little | Some | A lot | No opportunity to observe | Not required |
| --- | --- | --- | --- | --- | --- | --- | --- |
| 9060301 | 1. Students | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 9060302 | 1. Teachers | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 9060303 | 1. Other personnel | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |
| 9060304 | 1. Visitors | 1 🔾 | 2 🔾 | 3 🔾 | 4 🔾 | 5 🔾 | 6 🔾 |

G. Facilities for Students with Disabilities

The next set of questions is about accessibility inside the building.

G.1 For each of the following, please indicate if it is observed in the building.

|  | *Select one answer for each row* | Yes | No |  |
| --- | --- | --- | --- | --- |
| 9070101 | 1. Are all areas of the school accessible to students with disabilities? (For example, are there routes that do not have stairs? If the building is multi-level, are there ramps, elevators, or lifts available?) | 1 🔾 | 2 🔾 |  |
| 9070102 | 1. Inside the building, are signs posted to help people with disabilities navigate the building? (For example, directional and informational signs containing Braille with raised characters, pictograms, arrows, etc.) | 1 🔾 | 2 🔾 |  |
| 9070103 | 1. Would students with mobility problems be able to sit with other students in the cafeteria? (For example, a cafeteria with all bench seats means they may not.) | 1 🔾 | 2 🔾 |  |
| 9070104 | 1. Would students with mobility problems be able to work with other students in the library? (For example, are group work areas accessible to students with disabilities?) | 1 🔾 | 2 🔾 |  |
| 9070105 | 1. In general, do students with mobility problems have access to social spaces within the school? | 1 🔾 | 2 🔾 |  |
| 9070200 | 1. If there is a resource room, is the resource room in a location accessible to all students? | 1 🔾 | 2 🔾 | Not applicable  🔾 |

**Accessibility** might include an elevator, ramp, or lift to access that level to a social space or resource room.

**Mobility problems** include difficulty moving around, such as a need for use of walkers or wheelchairs.

H. Observer Access

H1. What percentage of the campus did you observe?

9080101

🔾 Less than or equal to 25% 1

🔾 More than 25% but less than or equal to 50% 2

🔾 More than 50% but less than or equal to 75% 3

🔾 More than 75% but less than 100% 4

🔾 100% 5

Appendix MS1-T. Student Rostering Form

Appendix T includes the student rostering form referenced in Appendix S.

**Appendix T - Rostering Form**

**Main Study**

**Instructions:** For each student currently enrolled in grade 6 in your school, please provide the below information.

Please be certain to include **all** children in each grade.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **General Student information** | | | | | | | | **Race/Ethnicity (Y/N all that apply)** | | | | | | **IEP** | **ELL** | **Disability Code** | **Parent Contact information** | | | | | | | | | **Student's Math Teacher** | | | | | **Student's Special Education Teacher, if applicable** | | |
| **StudentID** | **FirstName** | **Does student have IEP? (Y/N)** | **LastName** | **Suffix** | **Grade** | **Date of birth MM/DD/YY** | **Sex(M/F)** | **White** | **Black or African American** | **Asian** | **Native Hawaiian or Pacific Islander** | **American Indian or Alaska Native** | **Hispanic (Y/N)** | **IEP status (disability codes)** | **Student ELL Status?** | **If student has an IEP, please enter the disability code. Disability Code(s): (1) Specific Learning Disability (2) Autism (3) Emotional Disturbance (4) Other** | **Parent's First Name** | **Parent's Last Name** | **Parent's Address** | **Parent City** | **Parent State** | **Parent Zip** | **Parent's Email** | **Parent's Home Phone** | **Parent's Cell Phone** | **MathTeacherFirstName** | **MathTeacherLastName** | **MathTeacherEmail** | **Math Course Name** | **Math Course Period/Section** | **SpecialEDTeacherFirstName** | **SpecialEDTeacherLastName** | **SpecialEDTeacherEmail** |

*NCES is authorized to conduct MGLS:2017 by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543) and to collect students’ education records from education agencies or institutions for the purposes of evaluating federally supported education programs under the Family Educational Rights and Privacy Act (FERPA, 34 CFR §§ 99.31(a)(3)(iii) and 99.35).  The data are being collected for NCES by RTI International, a U.S.-based nonprofit research organization. All of the information you provide may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (20 U.S.C. §9573 and 6 U.S.C. §151). The collected information will be combined across respondents to produce statistical reports.*

*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 1850-0911. Approval expires 09/30/2018. The time required to complete this information collection is estimated to average approximately 5 minutes per row, including the time to review instructions, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate, suggestions for improving this survey, or any comments or concerns regarding the status of your individual submission of this survey, please write directly to: The Middle Grades Longitudinal Study of 2017-18 (MGLS:2017), National Center for Education Statistics, Potomac Center Plaza, 550 12th St, SW, Room 4002, Washington, DC 20202.*