

National Teacher and Principal Survey of 2020–2021 (NTPS 2020–21)

OMB# 1850-0598 v.31

Appendix B NTPS 2020-21 Questionnaires

**National Center for Education Statistics (NCES)
U.S. Department of Education**

**December 2019
revised April 2020**

Appendix B: 2020-21 NTPS Questionnaires

The following questionnaire materials are contained in this document:

1. 2020-21 NTPS Teacher Listing Form (NTPS-1)
Note: This is the traditional Teacher Listing Form (TLF).
2. 2020-21 NTPS Teacher Listing Form, prepopulated version (NTPS-1P)
Note: This is the version of the TLF that will be prepopulated with vendor data.
3. 2020-21 NTPS Teacher Listing Form, short version (NTPS-1S)
Note: This is the shortened version of the traditional TLF (NTPS-1). This version will be used for data collection for Amish and Mennonite Private Schools.
4. 2020-21 NTPS Principal Questionnaire (NTPS-2A)
5. 2020-21 NTPS Private School Principal Questionnaire (NTPS-2B)
6. 2020-21 NTPS School Questionnaire (NTPS-3A)
7. 2020-21 NTPS Private School Questionnaire (NTPS-3B)
8. 2020-21 NTPS Teacher Questionnaire (NTPS-4A)
9. 2020-21 NTPS Private School Teacher Questionnaire (NTPS-4B)

Note: The content included in these questionnaires is considered final at this time. Forthcoming formatting changes (for example, questionnaire colors, style of grid lines, etc.) are likely but will not substantively impact questionnaire content or item wording.

TEACHER LISTING FORM

NATIONAL TEACHER AND PRINCIPAL SURVEY

2020-21 SCHOOL YEAR



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

THIS SURVEY HAS BEEN ENDORSED BY:

Please return your completed questionnaire in the pre-addressed, postage-paid envelope or mail it to:

**U.S. CENSUS BUREAU
ATTN: TLF, SPB/SMS, BUILDING 64E
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

The National Center for Education Statistics (NCES), within the U.S. Department of Education, is authorized to conduct this survey by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543).

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this voluntary information collection is 1850-0598. The time required to complete this information collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, 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 collection, or comments or concerns about the contents or the status of your individual submission of this questionnaire, please e-mail: ntps@census.gov, or write directly to: National Teacher and Principal Survey (NTPS), National Center for Education Statistics, Potomac Center Plaza, 550 12th Street, SW, Room 4035, Washington, DC 20202.

Please return your completed form in the enclosed pre-addressed, postage-paid envelope or mail it to:

**U.S. CENSUS BUREAU
ATTN: TLF, SPB/SMS, BUILDING 64E
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

▶ **Why does the National Center for Education Statistics (NCES) conduct the National Teacher and Principal Survey (NTPS)?**

- 🍏 The NTPS is designed to measure critical aspects of schooling and teaching, the composition of the principal and teacher work force, and conditions in schools.

▶ **What do you need from my school?**

- 🍏 A list of all of the full-time and part-time teachers who teach at this school.
- 🍏 **Please see the removable reference card on the reverse side for important information about the listing form.**

▶ **What happens to the information I report?**

- 🍏 A sample of teachers will be selected for the Teacher Survey component of NTPS. The selected teachers will receive the Teacher Questionnaire which asks for information on their educational background, work experience, and attitudes toward teaching.

▶ **Why is my school's participation important?**

- 🍏 This survey is a primary source of information about what is happening in K–12 schools across the United States from the perspective of administrators and teachers. Only a small percentage of schools are selected to participate; therefore, your school is important for the success of this survey.



How does NCES protect the confidentiality of the information I provide?

- 🍏 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).

Thank you for your assistance.

REFERENCE CARD

Please use this guide when listing teachers.

INCLUDE ON THE TEACHER LIST

- 🍏 *Regular classroom teachers*
 - Chemistry, English, math, physical education, history, etc.
- 🍏 *Special education teachers*
 - Teach special education classes to students with disabilities.
- 🍏 *General elementary teachers*
 - Teach self-contained classes in any of grades K–8, i.e., teach the same class of students all or most of the day, unless they teach special education students, in which case see the category above.
 - Team-teaching, i.e., two or more teachers collaborate in teaching multiple subjects to the same class of students.
 - Include kindergarten teachers.
- 🍏 *Career, technical, or vocational education teachers*
 - Teach keyboarding, business, agriculture, life skills, family or consumer economics as well as any other vocational or technical classes.
- 🍏 *Teaching principals, teaching guidance counselors, teaching librarians, teaching school nurses*
 - Include any staff members who teach at least one regularly scheduled class per week.
For example:
If a librarian teaches a regularly scheduled class in math once a week, include her in the "Math" category, but if she only teaches groups of students library skills or how to use the library, do NOT include her on the form.
- 🍏 *Teachers of ungraded students*
- 🍏 *Itinerant, co-op, traveling, and satellite teachers*
 - Teach at more than one school and may OR may not be supervised by someone at your school.
- 🍏 *Current long-term substitute teachers*
 - Currently filling the role of a regular teacher for 4 or more continuous weeks.
- 🍏 *Other teachers who teach students in any of grades K–12*
 - If a teacher teaches pre-kindergarten and any other grade between K–12, answer the questions ONLY for the time the teacher spends teaching any grades K–12.

EXCLUDE FROM THE TEACHER LIST

- 🍏 *Prekindergarten teachers who teach ONLY prekindergarten students*
- 🍏 *Adult education and postsecondary teachers*
 - If they teach ONLY adult education or students beyond grade 12.
- 🍏 *Short-term substitute teachers*
 - Fill the role of a regular teacher for less than 4 continuous weeks.
- 🍏 *Student teachers*
- 🍏 *Daycare aides*
- 🍏 *Teacher aides*
- 🍏 *Librarians who teach ONLY library skills or how to use the library*

Please tear off this reference card to use while completing the survey.

1. In case we have questions about any of your responses, please print your name, title, and work telephone number on the lines below.

NAME

TITLE

WORK TELEPHONE NUMBER

AREA CODE TELEPHONE NUMBER

<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
----------------------	---	----------------------	---	----------------------

2. How much time did it take to complete this form, not counting interruptions?

Minutes

🍏 Please see page 4 for important information.



Call 1-888-595-1338 toll free if you need assistance filling out the rest of this form.
The office hours are 8:00 AM – 8:00 PM Eastern Time.

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school. *Line Ex. is an example of a full-time art teacher. FIRST MI LAST SUFFIX	Teacher's E-mail Address Please list each teacher's e-mail address.	Subject Matter Taught Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects. 1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
*Ex.	<i>Andrew M Shaffer</i>	<i>ams@place.com</i>	8
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught
	FIRST	MI	LAST	SUFFIX		
	Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.				Please list each teacher's e-mail address.	Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects. 1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught
	Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.				Please list each teacher's e-mail address.	Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects. 1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
	FIRST	MI	LAST	SUFFIX		
36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
51						
52						
53						

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught
	FIRST	MI	LAST	SUFFIX		
	Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.				Please list each teacher's e-mail address.	Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects. 1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
54						
55						
56						
57						
58						
59						
60						
61						
62						
63						
64						
65						
66						
67						
68						
69						
70						
71						

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught
	Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.				Please list each teacher's e-mail address.	Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects. 1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
	FIRST	MI	LAST	SUFFIX		
72						
73						
74						
75						
76						
77						
78						
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught
	Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.				Please list each teacher's e-mail address.	Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects.
	FIRST	MI	LAST	SUFFIX		1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
101						
102						
103						
104						
105						
106						
107						

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught
	Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.				Please list each teacher's e-mail address.	Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects. 1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
	FIRST	MI	LAST	SUFFIX		
108						
109						
110						
111						
112						
113						
114						
115						
116						
117						
118						
119						
120						
121						
122						
123						
124						
125						

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught
	Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.				Please list each teacher's e-mail address.	Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects. 1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
	FIRST	MI	LAST	SUFFIX		
126						
127						
128						
129						
130						
131						
132						
133						
134						
135						
136						
137						
138						
139						
140						
141						
142						
143						

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught
	Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.				Please list each teacher's e-mail address.	Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects. 1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
	FIRST	MI	LAST	SUFFIX		
144						
145						
146						
147						
148						
149						
150						
151						
152						
153						
154						
155						
156						
157						
158						
159						
160						
161						

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught
	Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.				Please list each teacher's e-mail address.	Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects.
	FIRST	MI	LAST	SUFFIX		1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
162						
163						
164						
165						
166						
167						
168						
169						
170						
171						
172						
173						
174						
175						
176						
177						
178						
179						

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught
	Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.				Please list each teacher's e-mail address.	Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects.
	FIRST	MI	LAST	SUFFIX		1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
180						
181						
182						
183						
184						
185						
186						
187						
188						
189						
190						
191						
192						
193						
194						
195						
196						
197						

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.	Teacher's E-mail Address Please list each teacher's e-mail address.	Subject Matter Taught Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects. 1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
	FIRST MI LAST SUFFIX		
198			
199			
200			
201			
202			
203			
204			
205			
206			
207			
208			
209			
210			
211			
212			
213			
214			
215			

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught
	Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.				Please list each teacher's e-mail address.	Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects. 1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
	FIRST	MI	LAST	SUFFIX		
216						
217						
218						
219						
220						
221						
222						
223						
224						
225						
226						
227						
228						
229						
230						
231						
232						
233						

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.	Teacher's E-mail Address Please list each teacher's e-mail address.	Subject Matter Taught Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects. 1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
	FIRST MI LAST SUFFIX		
234			
235			
236			
237			
238			
239			
240			
241			
242			
243			
244			
245			
246			
247			
248			
249			
250			
251			

Thank you very much for your participation in this survey. If you have any questions, please contact us, toll-free, at: 1-888-595-1338 or by e-mail at: ntps@census.gov.

To learn more about this survey and to access reports from earlier collections, see the National Teacher and Principal Survey (NTPS) website at: <http://nces.ed.gov/surveys/ntps>

Additional data collected by the National Center for Education Statistics (NCES) on a variety of topics in elementary, secondary, postsecondary, and international education are available from NCES' website at: <http://nces.ed.gov>

For additional data collected by various Federal agencies, including the Department of Education, visit the Federal Statistics clearinghouse at: <https://www.usa.gov/statistics>

TEACHER LISTING VERIFICATION FORM

NATIONAL TEACHER AND PRINCIPAL SURVEY

2020-21 SCHOOL YEAR



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

THIS SURVEY HAS BEEN ENDORSED BY:

Please return your completed questionnaire in the pre-addressed, postage-paid envelope or mail it to:

**U.S. CENSUS BUREAU
ATTN: TLF, SPB/SMS, BUILDING 64E
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

The National Center for Education Statistics (NCES), within the U.S. Department of Education, is authorized to conduct this survey by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543).

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this voluntary information collection is 1850-0598. The time required to complete this information collection is estimated to average 15 minutes per response, including the time to review instructions, search existing data resources, 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 collection, or comments or concerns about the contents or the status of your individual submission of this questionnaire, please e-mail: ntps@census.gov, or write directly to: National Teacher and Principal Survey (NTPS), National Center for Education Statistics, Potomac Center Plaza, 550 12th Street, SW, Room 4035, Washington, DC 20202.

Please return your completed form in the enclosed pre-addressed, postage-paid envelope or mail it to:

**U.S. CENSUS BUREAU
ATTN: TLF, SPB/SMS, BUILDING 64E
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

► **Why does the National Center for Education Statistics (NCES) conduct the National Teacher and Principal Survey (NTPS)?**

- 🍏 The NTPS is designed to measure critical aspects of schooling and teaching, the composition of the principal and teacher work force, and conditions in schools.

► **What do you need from my school?**

- 🍏 A list of all of the full-time and part-time teachers who teach at this school. In order to reduce the burden on your school, we populated your school's TLF with a list of teachers from publicly-available sources. We are now asking you to verify the accuracy of the teacher data.
- 🍏 **Please see the removable reference card on the reverse side for important information about the listing form.**

► **What happens to the information I report?**

- 🍏 A sample of teachers will be selected for the Teacher Survey component of NTPS. The selected teachers will receive the Teacher Questionnaire which asks for information on their educational background, work experience, and attitudes toward teaching.

► **Why is my school's participation important?**

- 🍏 This survey is a primary source of information about what is happening in K–12 schools across the United States from the perspective of administrators and teachers. Only a small percentage of schools are selected to participate; therefore, your school is important for the success of this survey.

► **How does NCES protect the confidentiality of the information I provide?**

- 🍏 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).

Thank you for your assistance.

REFERENCE CARD

Please use this guide when verifying teachers.

INCLUDE ON THE TEACHER LIST

- 🍏 *Regular classroom teachers*
 - Chemistry, English, math, physical education, history, etc.
- 🍏 *Special education teachers*
 - Teach special education classes to students with disabilities.
- 🍏 *General elementary teachers*
 - Teach self-contained classes in any of grades K–8, i.e., teach the same class of students all or most of the day, unless they teach special education students, in which case see the category above.
 - Team-teaching, i.e., two or more teachers collaborate in teaching multiple subjects to the same class of students.
 - Include kindergarten teachers.
- 🍏 *Career, technical, or vocational education teachers*
 - Teach keyboarding, business, agriculture, life skills, family or consumer economics as well as any other vocational or technical classes.
- 🍏 *Teaching principals, teaching guidance counselors, teaching librarians, teaching school nurses*
 - Include any staff members who teach at least one regularly scheduled class per week.
For example:
If a librarian teaches a regularly scheduled class in math once a week, include her in the "Math" category, but if she only teaches groups of students library skills or how to use the library, do NOT include her on the form.
- 🍏 *Teachers of ungraded students*
- 🍏 *Itinerant, co-op, traveling, and satellite teachers*
 - Teach at more than one school and may OR may not be supervised by someone at your school.
- 🍏 *Current long-term substitute teachers*
 - Currently filling the role of a regular teacher for 4 or more continuous weeks.
- 🍏 *Other teachers who teach students in any of grades K–12*
 - If a teacher teaches pre-kindergarten and any other grade between K–12, answer the questions ONLY for the time the teacher spends teaching any grades K–12.

EXCLUDE FROM THE TEACHER LIST

- 🍏 *Prekindergarten teachers who teach ONLY prekindergarten students*
- 🍏 *Adult education and postsecondary teachers*
 - If they teach ONLY adult education or students beyond grade 12.
- 🍏 *Short-term substitute teachers*
 - Fill the role of a regular teacher for less than 4 continuous weeks.
- 🍏 *Student teachers*
- 🍏 *Daycare aides*
- 🍏 *Teacher aides*
- 🍏 *Librarians who teach ONLY library skills or how to use the library*

Please tear off this reference card to use while completing the survey.

INSTRUCTIONS

- a. Please review each teacher's information to ensure that it is accurate.
- b. If you need to make any corrections to the teacher's name or e-mail address, please line out the incorrect portion and enter the correction next to the preprinted information in pen.
- c. If the teacher's subject matter is incorrect, please line it out and enter the code for the correct subject matter(s). If the teacher teaches an additional subject matter, enter the code next to the preprinted subject matter.
- d. **Please see page 4 for important information on whom to include and exclude from the teacher list.** If the person listed is a teacher at your school, mark "yes" in the Teacher Status column. If the person listed is not a teacher or does not work at your school, mark "no."
- e. Please add any teachers who are missing from this list in the available rows.
- f. If you have any questions, call the U.S. Census Bureau at 1-888-595-1338. Someone will be available to take your call Monday through Friday, between 8:00 a.m. and 8:00 p.m. (Eastern Time). The U.S. Census Bureau is also available to answer your questions via e-mail at: ntps@census.gov.

- 1. In case we have questions about any of your responses, please print your name, title, and work telephone number on the lines below.**

NAME

TITLE

WORK TELEPHONE NUMBER

AREA CODE TELEPHONE NUMBER

	-		-	
--	---	--	---	--

- 2. How much time did it take to complete this form, not counting interruptions?**

Minutes

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL. Make any corrections to the teacher's name in pen. If teacher(s) are missing, add their information to this form. Each teacher should be listed only once. Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.	Teacher's E-mail Address Please review each teacher's e-mail address. Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.	Subject Matter Taught Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies. 1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)	Teacher's Status Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school. Is this person currently a teacher at this school?
	FIRST MI LAST SUFFIX			
*Ex. 1	Andrew M Schaffer ^{Schafer}	ams@place.com amshaffer@place.com	5-ELA 6	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
*Ex. 2	Elizabeth M Smith	ems@place.com	2-GE	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
*Ex. 3	Jessica L Jones	jlj@place.com	6	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
1				<input type="checkbox"/> Yes <input type="checkbox"/> No
2				<input type="checkbox"/> Yes <input type="checkbox"/> No
3				<input type="checkbox"/> Yes <input type="checkbox"/> No
4				<input type="checkbox"/> Yes <input type="checkbox"/> No
5				<input type="checkbox"/> Yes <input type="checkbox"/> No
6				<input type="checkbox"/> Yes <input type="checkbox"/> No
7				<input type="checkbox"/> Yes <input type="checkbox"/> No
8				<input type="checkbox"/> Yes <input type="checkbox"/> No
9				<input type="checkbox"/> Yes <input type="checkbox"/> No
10				<input type="checkbox"/> Yes <input type="checkbox"/> No
11				<input type="checkbox"/> Yes <input type="checkbox"/> No
12				<input type="checkbox"/> Yes <input type="checkbox"/> No
13				<input type="checkbox"/> Yes <input type="checkbox"/> No
14				<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	FIRST	MI	LAST	SUFFIX	<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
15							<input type="checkbox"/> Yes <input type="checkbox"/> No
16							<input type="checkbox"/> Yes <input type="checkbox"/> No
17							<input type="checkbox"/> Yes <input type="checkbox"/> No
18							<input type="checkbox"/> Yes <input type="checkbox"/> No
19							<input type="checkbox"/> Yes <input type="checkbox"/> No
20							<input type="checkbox"/> Yes <input type="checkbox"/> No
21							<input type="checkbox"/> Yes <input type="checkbox"/> No
22							<input type="checkbox"/> Yes <input type="checkbox"/> No
23							<input type="checkbox"/> Yes <input type="checkbox"/> No
24							<input type="checkbox"/> Yes <input type="checkbox"/> No
25							<input type="checkbox"/> Yes <input type="checkbox"/> No
26							<input type="checkbox"/> Yes <input type="checkbox"/> No
27							<input type="checkbox"/> Yes <input type="checkbox"/> No
28							<input type="checkbox"/> Yes <input type="checkbox"/> No
29							<input type="checkbox"/> Yes <input type="checkbox"/> No
30							<input type="checkbox"/> Yes <input type="checkbox"/> No
31							<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name	Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	<p>Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>Make any corrections to the teacher's name in pen.</p> <p>If teacher(s) are missing, add their information to this form. Each teacher should be listed only once.</p> <p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>	<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
	FIRST MI LAST SUFFIX			
32				<input type="checkbox"/> Yes <input type="checkbox"/> No
33				<input type="checkbox"/> Yes <input type="checkbox"/> No
34				<input type="checkbox"/> Yes <input type="checkbox"/> No
35				<input type="checkbox"/> Yes <input type="checkbox"/> No
36				<input type="checkbox"/> Yes <input type="checkbox"/> No
37				<input type="checkbox"/> Yes <input type="checkbox"/> No
38				<input type="checkbox"/> Yes <input type="checkbox"/> No
39				<input type="checkbox"/> Yes <input type="checkbox"/> No
40				<input type="checkbox"/> Yes <input type="checkbox"/> No
41				<input type="checkbox"/> Yes <input type="checkbox"/> No
42				<input type="checkbox"/> Yes <input type="checkbox"/> No
43				<input type="checkbox"/> Yes <input type="checkbox"/> No
44				<input type="checkbox"/> Yes <input type="checkbox"/> No
45				<input type="checkbox"/> Yes <input type="checkbox"/> No
46				<input type="checkbox"/> Yes <input type="checkbox"/> No
47				<input type="checkbox"/> Yes <input type="checkbox"/> No
48				<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	FIRST	MI	LAST	SUFFIX			
	<p>Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>Make any corrections to the teacher's name in pen.</p> <p>If teacher(s) are missing, add their information to this form. Each teacher should be listed only once.</p> <p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>				<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
49							<input type="checkbox"/> Yes <input type="checkbox"/> No
50							<input type="checkbox"/> Yes <input type="checkbox"/> No
51							<input type="checkbox"/> Yes <input type="checkbox"/> No
52							<input type="checkbox"/> Yes <input type="checkbox"/> No
53							<input type="checkbox"/> Yes <input type="checkbox"/> No
54							<input type="checkbox"/> Yes <input type="checkbox"/> No
55							<input type="checkbox"/> Yes <input type="checkbox"/> No
56							<input type="checkbox"/> Yes <input type="checkbox"/> No
57							<input type="checkbox"/> Yes <input type="checkbox"/> No
58							<input type="checkbox"/> Yes <input type="checkbox"/> No
59							<input type="checkbox"/> Yes <input type="checkbox"/> No
60							<input type="checkbox"/> Yes <input type="checkbox"/> No
61							<input type="checkbox"/> Yes <input type="checkbox"/> No
62							<input type="checkbox"/> Yes <input type="checkbox"/> No
63							<input type="checkbox"/> Yes <input type="checkbox"/> No
64							<input type="checkbox"/> Yes <input type="checkbox"/> No
65							<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	FIRST	MI	LAST	SUFFIX			
	<p>Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>Make any corrections to the teacher's name in pen.</p> <p>If teacher(s) are missing, add their information to this form. Each teacher should be listed only once.</p> <p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>				<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
66							<input type="checkbox"/> Yes <input type="checkbox"/> No
67							<input type="checkbox"/> Yes <input type="checkbox"/> No
68							<input type="checkbox"/> Yes <input type="checkbox"/> No
69							<input type="checkbox"/> Yes <input type="checkbox"/> No
70							<input type="checkbox"/> Yes <input type="checkbox"/> No
71							<input type="checkbox"/> Yes <input type="checkbox"/> No
72							<input type="checkbox"/> Yes <input type="checkbox"/> No
73							<input type="checkbox"/> Yes <input type="checkbox"/> No
74							<input type="checkbox"/> Yes <input type="checkbox"/> No
75							<input type="checkbox"/> Yes <input type="checkbox"/> No
76							<input type="checkbox"/> Yes <input type="checkbox"/> No
77							<input type="checkbox"/> Yes <input type="checkbox"/> No
78							<input type="checkbox"/> Yes <input type="checkbox"/> No
79							<input type="checkbox"/> Yes <input type="checkbox"/> No
80							<input type="checkbox"/> Yes <input type="checkbox"/> No
81							<input type="checkbox"/> Yes <input type="checkbox"/> No
82							<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	FIRST	MI	LAST	SUFFIX			
	<p>Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>Make any corrections to the teacher's name in pen.</p> <p>If teacher(s) are missing, add their information to this form. Each teacher should be listed only once.</p> <p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>				<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
83							<input type="checkbox"/> Yes <input type="checkbox"/> No
84							<input type="checkbox"/> Yes <input type="checkbox"/> No
85							<input type="checkbox"/> Yes <input type="checkbox"/> No
86							<input type="checkbox"/> Yes <input type="checkbox"/> No
87							<input type="checkbox"/> Yes <input type="checkbox"/> No
88							<input type="checkbox"/> Yes <input type="checkbox"/> No
89							<input type="checkbox"/> Yes <input type="checkbox"/> No
90							<input type="checkbox"/> Yes <input type="checkbox"/> No
91							<input type="checkbox"/> Yes <input type="checkbox"/> No
92							<input type="checkbox"/> Yes <input type="checkbox"/> No
93							<input type="checkbox"/> Yes <input type="checkbox"/> No
94							<input type="checkbox"/> Yes <input type="checkbox"/> No
95							<input type="checkbox"/> Yes <input type="checkbox"/> No
96							<input type="checkbox"/> Yes <input type="checkbox"/> No
97							<input type="checkbox"/> Yes <input type="checkbox"/> No
98							<input type="checkbox"/> Yes <input type="checkbox"/> No
99							<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	FIRST	MI	LAST	SUFFIX			
	<p>Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>Make any corrections to the teacher's name in pen.</p> <p>If teacher(s) are missing, add their information to this form. Each teacher should be listed only once.</p> <p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>				<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
100							<input type="checkbox"/> Yes <input type="checkbox"/> No
101							<input type="checkbox"/> Yes <input type="checkbox"/> No
102							<input type="checkbox"/> Yes <input type="checkbox"/> No
103							<input type="checkbox"/> Yes <input type="checkbox"/> No
104							<input type="checkbox"/> Yes <input type="checkbox"/> No
105							<input type="checkbox"/> Yes <input type="checkbox"/> No
106							<input type="checkbox"/> Yes <input type="checkbox"/> No
107							<input type="checkbox"/> Yes <input type="checkbox"/> No
108							<input type="checkbox"/> Yes <input type="checkbox"/> No
109							<input type="checkbox"/> Yes <input type="checkbox"/> No
110							<input type="checkbox"/> Yes <input type="checkbox"/> No
111							<input type="checkbox"/> Yes <input type="checkbox"/> No
112							<input type="checkbox"/> Yes <input type="checkbox"/> No
113							<input type="checkbox"/> Yes <input type="checkbox"/> No
114							<input type="checkbox"/> Yes <input type="checkbox"/> No
115							<input type="checkbox"/> Yes <input type="checkbox"/> No
116							<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name	Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	<p>Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>Make any corrections to the teacher's name in pen.</p> <p>If teacher(s) are missing, add their information to this form. Each teacher should be listed only once.</p> <p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>	<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
	<p>FIRST MI LAST SUFFIX</p>			
117				<input type="checkbox"/> Yes <input type="checkbox"/> No
118				<input type="checkbox"/> Yes <input type="checkbox"/> No
119				<input type="checkbox"/> Yes <input type="checkbox"/> No
120				<input type="checkbox"/> Yes <input type="checkbox"/> No
121				<input type="checkbox"/> Yes <input type="checkbox"/> No
122				<input type="checkbox"/> Yes <input type="checkbox"/> No
123				<input type="checkbox"/> Yes <input type="checkbox"/> No
124				<input type="checkbox"/> Yes <input type="checkbox"/> No
125				<input type="checkbox"/> Yes <input type="checkbox"/> No
126				<input type="checkbox"/> Yes <input type="checkbox"/> No
127				<input type="checkbox"/> Yes <input type="checkbox"/> No
128				<input type="checkbox"/> Yes <input type="checkbox"/> No
129				<input type="checkbox"/> Yes <input type="checkbox"/> No
130				<input type="checkbox"/> Yes <input type="checkbox"/> No
131				<input type="checkbox"/> Yes <input type="checkbox"/> No
132				<input type="checkbox"/> Yes <input type="checkbox"/> No
133				<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	FIRST	MI	LAST	SUFFIX			
	<p>Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>Make any corrections to the teacher's name in pen.</p> <p>If teacher(s) are missing, add their information to this form. Each teacher should be listed only once.</p> <p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>				<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
134							<input type="checkbox"/> Yes <input type="checkbox"/> No
135							<input type="checkbox"/> Yes <input type="checkbox"/> No
136							<input type="checkbox"/> Yes <input type="checkbox"/> No
137							<input type="checkbox"/> Yes <input type="checkbox"/> No
138							<input type="checkbox"/> Yes <input type="checkbox"/> No
139							<input type="checkbox"/> Yes <input type="checkbox"/> No
140							<input type="checkbox"/> Yes <input type="checkbox"/> No
141							<input type="checkbox"/> Yes <input type="checkbox"/> No
142							<input type="checkbox"/> Yes <input type="checkbox"/> No
143							<input type="checkbox"/> Yes <input type="checkbox"/> No
144							<input type="checkbox"/> Yes <input type="checkbox"/> No
145							<input type="checkbox"/> Yes <input type="checkbox"/> No
146							<input type="checkbox"/> Yes <input type="checkbox"/> No
147							<input type="checkbox"/> Yes <input type="checkbox"/> No
148							<input type="checkbox"/> Yes <input type="checkbox"/> No
149							<input type="checkbox"/> Yes <input type="checkbox"/> No
150							<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	FIRST	MI	LAST	SUFFIX			
	<p>Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>Make any corrections to the teacher's name in pen.</p> <p>If teacher(s) are missing, add their information to this form. Each teacher should be listed only once.</p> <p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>				<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
151							<input type="checkbox"/> Yes <input type="checkbox"/> No
152							<input type="checkbox"/> Yes <input type="checkbox"/> No
153							<input type="checkbox"/> Yes <input type="checkbox"/> No
154							<input type="checkbox"/> Yes <input type="checkbox"/> No
155							<input type="checkbox"/> Yes <input type="checkbox"/> No
156							<input type="checkbox"/> Yes <input type="checkbox"/> No
157							<input type="checkbox"/> Yes <input type="checkbox"/> No
158							<input type="checkbox"/> Yes <input type="checkbox"/> No
159							<input type="checkbox"/> Yes <input type="checkbox"/> No
160							<input type="checkbox"/> Yes <input type="checkbox"/> No
161							<input type="checkbox"/> Yes <input type="checkbox"/> No
162							<input type="checkbox"/> Yes <input type="checkbox"/> No
163							<input type="checkbox"/> Yes <input type="checkbox"/> No
164							<input type="checkbox"/> Yes <input type="checkbox"/> No
165							<input type="checkbox"/> Yes <input type="checkbox"/> No
166							<input type="checkbox"/> Yes <input type="checkbox"/> No
167							<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	FIRST	MI	LAST	SUFFIX			
	<p>Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>Make any corrections to the teacher's name in pen.</p> <p>If teacher(s) are missing, add their information to this form. Each teacher should be listed only once.</p> <p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>				<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
168							<input type="checkbox"/> Yes <input type="checkbox"/> No
169							<input type="checkbox"/> Yes <input type="checkbox"/> No
170							<input type="checkbox"/> Yes <input type="checkbox"/> No
171							<input type="checkbox"/> Yes <input type="checkbox"/> No
172							<input type="checkbox"/> Yes <input type="checkbox"/> No
173							<input type="checkbox"/> Yes <input type="checkbox"/> No
174							<input type="checkbox"/> Yes <input type="checkbox"/> No
175							<input type="checkbox"/> Yes <input type="checkbox"/> No
176							<input type="checkbox"/> Yes <input type="checkbox"/> No
177							<input type="checkbox"/> Yes <input type="checkbox"/> No
178							<input type="checkbox"/> Yes <input type="checkbox"/> No
179							<input type="checkbox"/> Yes <input type="checkbox"/> No
180							<input type="checkbox"/> Yes <input type="checkbox"/> No
181							<input type="checkbox"/> Yes <input type="checkbox"/> No
182							<input type="checkbox"/> Yes <input type="checkbox"/> No
183							<input type="checkbox"/> Yes <input type="checkbox"/> No
184							<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name	Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	<p>Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>Make any corrections to the teacher's name in pen.</p> <p>If teacher(s) are missing, add their information to this form. Each teacher should be listed only once.</p> <p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>	<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
	<p>FIRST MI LAST SUFFIX</p>			
185				<input type="checkbox"/> Yes <input type="checkbox"/> No
186				<input type="checkbox"/> Yes <input type="checkbox"/> No
187				<input type="checkbox"/> Yes <input type="checkbox"/> No
188				<input type="checkbox"/> Yes <input type="checkbox"/> No
189				<input type="checkbox"/> Yes <input type="checkbox"/> No
190				<input type="checkbox"/> Yes <input type="checkbox"/> No
191				<input type="checkbox"/> Yes <input type="checkbox"/> No
192				<input type="checkbox"/> Yes <input type="checkbox"/> No
193				<input type="checkbox"/> Yes <input type="checkbox"/> No
194				<input type="checkbox"/> Yes <input type="checkbox"/> No
195				<input type="checkbox"/> Yes <input type="checkbox"/> No
196				<input type="checkbox"/> Yes <input type="checkbox"/> No
197				<input type="checkbox"/> Yes <input type="checkbox"/> No
198				<input type="checkbox"/> Yes <input type="checkbox"/> No
199				<input type="checkbox"/> Yes <input type="checkbox"/> No
200				<input type="checkbox"/> Yes <input type="checkbox"/> No
201				<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	FIRST	MI	LAST	SUFFIX			
	<p>Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>Make any corrections to the teacher's name in pen.</p> <p>If teacher(s) are missing, add their information to this form. Each teacher should be listed only once.</p> <p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>				<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
202							<input type="checkbox"/> Yes <input type="checkbox"/> No
203							<input type="checkbox"/> Yes <input type="checkbox"/> No
204							<input type="checkbox"/> Yes <input type="checkbox"/> No
205							<input type="checkbox"/> Yes <input type="checkbox"/> No
206							<input type="checkbox"/> Yes <input type="checkbox"/> No
207							<input type="checkbox"/> Yes <input type="checkbox"/> No
208							<input type="checkbox"/> Yes <input type="checkbox"/> No
209							<input type="checkbox"/> Yes <input type="checkbox"/> No
210							<input type="checkbox"/> Yes <input type="checkbox"/> No
211							<input type="checkbox"/> Yes <input type="checkbox"/> No
212							<input type="checkbox"/> Yes <input type="checkbox"/> No
213							<input type="checkbox"/> Yes <input type="checkbox"/> No
214							<input type="checkbox"/> Yes <input type="checkbox"/> No
215							<input type="checkbox"/> Yes <input type="checkbox"/> No
216							<input type="checkbox"/> Yes <input type="checkbox"/> No
217							<input type="checkbox"/> Yes <input type="checkbox"/> No
218							<input type="checkbox"/> Yes <input type="checkbox"/> No

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught	Teacher's Status
	FIRST	MI	LAST	SUFFIX			
	<p>Please review the list of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>Make any corrections to the teacher's name in pen.</p> <p>If teacher(s) are missing, add their information to this form. Each teacher should be listed only once.</p> <p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>				<p>Please review each teacher's e-mail address.</p> <p>Make any corrections to the teacher's e-mail address in pen. If the e-mail address is missing, write it in this column.</p>	<p>Please review each teacher's subject matter. If the subject matter is <u>not</u> correct, enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies.</p> <p>1 - Special education (SE) 2 - General elementary (GE) 3 - Math 4 - Science 5 - English/Language arts (ELA) 6 - Social studies (SS) 7 - Vocational/Technical (VT) 8 - Other (e.g., art, music, foreign language, physical education, English as a second language, and any other remaining subjects)</p>	<p>Please see the reference card on page 4 for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p> <p>Is this person currently a teacher at this school?</p>
219							<input type="checkbox"/> Yes <input type="checkbox"/> No
220							<input type="checkbox"/> Yes <input type="checkbox"/> No
221							<input type="checkbox"/> Yes <input type="checkbox"/> No
222							<input type="checkbox"/> Yes <input type="checkbox"/> No
223							<input type="checkbox"/> Yes <input type="checkbox"/> No
224							<input type="checkbox"/> Yes <input type="checkbox"/> No
225							<input type="checkbox"/> Yes <input type="checkbox"/> No
226							<input type="checkbox"/> Yes <input type="checkbox"/> No
227							<input type="checkbox"/> Yes <input type="checkbox"/> No
228							<input type="checkbox"/> Yes <input type="checkbox"/> No
229							<input type="checkbox"/> Yes <input type="checkbox"/> No
230							<input type="checkbox"/> Yes <input type="checkbox"/> No
231							<input type="checkbox"/> Yes <input type="checkbox"/> No
232							<input type="checkbox"/> Yes <input type="checkbox"/> No
233							<input type="checkbox"/> Yes <input type="checkbox"/> No
234							<input type="checkbox"/> Yes <input type="checkbox"/> No
235							<input type="checkbox"/> Yes <input type="checkbox"/> No

Thank you very much for your participation in this survey. If you have any questions, please contact us, toll-free, at: 1-888-595-1338 or by e-mail at: ntps@census.gov.

To learn more about this survey and to access reports from earlier collections, see the National Teacher and Principal Survey (NTPS) website at: <http://nces.ed.gov/surveys/ntps>

Additional data collected by the National Center for Education Statistics (NCES) on a variety of topics in elementary, secondary, postsecondary, and international education are available from NCES' website at: <http://nces.ed.gov>

For additional data collected by various Federal agencies, including the Department of Education, visit the Federal Statistics clearinghouse at: <https://www.usa.gov/statistics>

TEACHER LISTING FORM

NATIONAL TEACHER AND PRINCIPAL SURVEY

2020-21 SCHOOL YEAR



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

THIS SURVEY HAS BEEN ENDORSED BY:

Please return your completed questionnaire in the pre-addressed, postage-paid envelope or mail it to:

**U.S. CENSUS BUREAU
ATTN: TLF, SPB/SMS, BUILDING 64E
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

The National Center for Education Statistics (NCES), within the U.S. Department of Education, is authorized to conduct this survey by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543).

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this voluntary information collection is 1850-0598. The time required to complete this information collection is estimated to average 15 minutes per response, including the time to review instructions, search existing data resources, 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 collection, or comments or concerns about the contents or the status of your individual submission of this questionnaire, please e-mail: ntps@census.gov, or write directly to: National Teacher and Principal Survey (NTPS), National Center for Education Statistics, Potomac Center Plaza, 550 12th Street, SW, Room 4035, Washington, DC 20202.

Please return your completed form in the enclosed pre-addressed, postage-paid envelope or mail it to:

**U.S. CENSUS BUREAU
ATTN: TLF, SPB/SMS, BUILDING 64E
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

▶ **Why does the National Center for Education Statistics (NCES) conduct the National Teacher and Principal Survey (NTPS)?**

- 🍏 The NTPS is designed to measure critical aspects of schooling and teaching, the composition of the principal and teacher work force, and conditions in schools.

▶ **What do you need from my school?**

- 🍏 A list of all of the full-time and part-time teachers who teach at this school.
- 🍏 **Please see the removable reference card on the reverse side for important information about the listing form.**

▶ **What happens to the information I report?**

- 🍏 A sample of teachers will be selected for the Teacher Survey component of NTPS. The selected teachers will receive the Teacher Questionnaire which asks for information on their educational background, work experience, and attitudes toward teaching.

▶ **Why is my school's participation important?**

- 🍏 This survey is a primary source of information about what is happening in K–12 schools across the United States from the perspective of administrators and teachers. Only a small percentage of schools are selected to participate; therefore, your school is important for the success of this survey.

▶ **How does NCES protect the confidentiality of the information I provide?**

- 🍏 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).

Thank you for your assistance.

REFERENCE CARD

Please use this guide when listing teachers.

INCLUDE ON THE TEACHER LIST

- 🍏 *Regular classroom teachers*
 - Chemistry, English, math, physical education, history, etc.
- 🍏 *Special education teachers*
 - Teach special education classes to students with disabilities.
- 🍏 *General elementary teachers*
 - Teach self-contained classes in any of grades K–8, i.e., teach the same class of students all or most of the day, unless they teach special education students, in which case see the category above.
 - Team-teaching, i.e., two or more teachers collaborate in teaching multiple subjects to the same class of students.
 - Include kindergarten teachers.
- 🍏 *Career, technical, or vocational education teachers*
 - Teach keyboarding, business, agriculture, life skills, family or consumer economics as well as any other vocational or technical classes.
- 🍏 *Teaching principals, teaching guidance counselors, teaching librarians, teaching school nurses*
 - Include any staff members who teach at least one regularly scheduled class per week.
For example:
If a librarian teaches a regularly scheduled class in math once a week, include her in the "Math" category, but if she only teaches groups of students library skills or how to use the library, do NOT include her on the form.
- 🍏 *Teachers of ungraded students*
- 🍏 *Itinerant, co-op, traveling, and satellite teachers*
 - Teach at more than one school and may OR may not be supervised by someone at your school.
- 🍏 *Current long-term substitute teachers*
 - Currently filling the role of a regular teacher for 4 or more continuous weeks.
- 🍏 *Other teachers who teach students in any of grades K–12*
 - If a teacher teaches pre-kindergarten and any other grade between K–12, answer the questions ONLY for the time the teacher spends teaching any grades K–12.

EXCLUDE FROM THE TEACHER LIST

- 🍏 *Prekindergarten teachers who teach ONLY prekindergarten students*
- 🍏 *Adult education and postsecondary teachers*
 - If they teach ONLY adult education or students beyond grade 12.
- 🍏 *Short-term substitute teachers*
 - Fill the role of a regular teacher for less than 4 continuous weeks.
- 🍏 *Student teachers*
- 🍏 *Daycare aides*
- 🍏 *Teacher aides*
- 🍏 *Librarians who teach ONLY library skills or how to use the library*

Please tear off this reference card to use while completing the survey.

1. In case we have questions about any of your responses, please print your name, title, and work telephone number on the lines below.

NAME

TITLE

WORK TELEPHONE NUMBER

AREA CODE TELEPHONE NUMBER

<input type="text"/>	-	<input type="text"/>	-	<input type="text"/>
----------------------	---	----------------------	---	----------------------

2. How much time did it take to complete this form, not counting interruptions?

Minutes

🍏 Please see page 4 for important information.



Call 1-888-595-1338 toll free if you need assistance filling out the rest of this form.
The office hours are 8:00 AM – 8:00 PM Eastern Time.

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school. *Line Ex. is an example of a full-time art teacher.	Teacher's E-mail Address Please list each teacher's e-mail address.	Subject Matter Taught Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects. 1 - Special education 2 - General elementary 3 - Math 4 - Science 5 - English/Language arts 6 - Social studies 7 - Vocational/Technical 8 - Other (e.g., art, music, etc.)
	FIRST MI LAST SUFFIX		
*Ex.	<i>Andrew M Shaffer</i>	<i>ams@place.com</i>	8
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			

PLEASE CONTINUE ON NEXT PAGE

PLEASE READ THE REFERENCE CARD BEFORE CONTINUING.
(A removable reference card is printed on page 4 of this booklet.)

Line Number	Teacher's Name				Teacher's E-mail Address	Subject Matter Taught
	Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL. List each teacher only once. List in the following order: First name, Middle initial (MI), Last name, suffix (if applicable). Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.				Please list each teacher's e-mail address.	Enter the numeric code that corresponds to the subject in which the teacher teaches the most classes. If the teacher teaches two or more subjects equally, enter each numeric code that applies . Enter the code for "Other" subject matter for teachers who teach art, foreign language, music, physical education, English as a second language, and any other remaining subjects.
	FIRST	MI	LAST	SUFFIX		
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						

Thank you very much for your participation in this survey. If you have any questions, please contact us, toll-free, at: 1-888-595-1338 or by e-mail at: ntps@census.gov.

To learn more about this survey and to access reports from earlier collections, see the National Teacher and Principal Survey (NTPS) website at: <http://nces.ed.gov/surveys/ntps>

Additional data collected by the National Center for Education Statistics (NCES) on a variety of topics in elementary, secondary, postsecondary, and international education are available from NCES' website at: <http://nces.ed.gov>

For additional data collected by various Federal agencies, including the Department of Education, visit the Federal Statistics clearinghouse at: <https://www.usa.gov/statistics>

Conducted by:
U.S. DEPARTMENT OF EDUCATION
NATIONAL CENTER FOR EDUCATION STATISTICS

OMB No. 1850-0598: Approval Expires 03/31/2023
Collected by:
U.S. DEPARTMENT OF COMMERCE
U.S. CENSUS BUREAU

PRINCIPAL QUESTIONNAIRE

NATIONAL TEACHER AND PRINCIPAL SURVEY

2020-21 SCHOOL YEAR



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

THIS SURVEY HAS BEEN ENDORSED BY:

Please return your completed questionnaire in the pre-addressed, postage-paid envelope or mail it to:

**U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

The National Center for Education Statistics (NCES), within the U.S. Department of Education, is authorized to conduct this survey by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543).



- **What is the average student-teacher ratio in the United States?**
- **What is the average salary of a beginning principal?**
- **Have teachers' views of their autonomy in the classroom changed over time?**
- **Have the characteristics of the principal and teacher workforces in the United States changed over time?**

The answers to these questions help school districts and policy makers at the state, federal, and local levels set education policy and improve teacher and principal working conditions.

Since 1988, the National Teacher and Principal Survey and its precursor, the Schools and Staffing Survey, have provided the answers to these and other important education questions from the perspective of Principals and Teachers.

By selecting a statistically representative sample of schools, and teachers in those schools, we are able to provide representative data for the United States without going to every school.

Your school has been selected to participate in the 2020-21 National Teacher and Principal Survey. You will represent thousands of other principals, so it is important that you respond to this survey.

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).

More information can be found on our website: <http://nces.ed.gov/surveys/ntps>

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this voluntary information collection is 1850-0598. The time required to complete this information collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, 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 collection, or comments or concerns about the contents or the status of your individual submission of this questionnaire, please e-mail: ntps@census.gov, or write directly to: National Teacher and Principal Survey (NTPS), National Center for Education Statistics, Potomac Center Plaza, 550 12th Street, SW, Room 4014, Washington, DC 20202.



INSTRUCTIONS

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

CORRECT marking example – (Use care to keep characters in their designated spaces.)	INCORRECT marking example –
<div data-bbox="521 422 649 491" style="border: 1px solid black; padding: 2px; display: inline-block;"> <input type="checkbox"/> 3 5 </div> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<div data-bbox="829 422 971 491" style="border: 1px solid black; padding: 2px; display: inline-block;"> <input type="checkbox"/> 35 </div> <div data-bbox="1078 422 1206 491" style="border: 1px solid black; padding: 2px; display: inline-block; margin-left: 20px;"> <input type="checkbox"/> 3 5 </div> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No OR <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

- a. It is important that this questionnaire be completed by the school PRINCIPAL, not by anyone else.
- b. Please do not write any comments by the answer boxes.
- c. If you are unsure about how to answer a question, please give the best answer you can rather than leaving it blank.
- d. If you have any questions, call the U.S. Census Bureau at 1-888-595-1338. Someone will be available to take your call Monday through Friday, between 8:00 a.m. and 8:00 p.m. (Eastern Time). The U.S. Census Bureau is also available to answer your questions via e-mail at: ntps@census.gov.



1. PRINCIPAL EXPERIENCE AND TRAINING

- 1-1. **BEFORE** you became a principal, how many years of elementary, middle, or secondary teaching experience did you have?

🍏 Count part of a year as 1 year.

🍏 Write '0' if you had no years of teaching experience before becoming a principal.

Year(s) of teaching before becoming a principal

- 1-2. **BEFORE** you became a principal, did you hold the position of assistant principal or program director, including temporary positions?

Yes

No

- 1-3. **BEFORE** you became a principal, did you have any management experience outside of the field of education?

Yes

No

- 1-4. **BEFORE** you became a principal, did you participate in any district or school training or development program for ASPIRING school principals?

Yes

No

- 1-5. **PRIOR** to this school year, how many years did you serve as the principal of THIS school?

🍏 Do NOT include any years you served as ASSISTANT principal.

🍏 Count part of a year as 1 year.

🍏 Write '0' if this is your first year serving as principal at THIS school.

Year(s) as principal of this school

- 1-6. **PRIOR** to this school year, how many years did you serve as the principal of THIS OR ANY OTHER school?

🍏 Entry in item 1-6 should be greater than or equal to entry in 1-5.

🍏 Do NOT include any years you served as ASSISTANT principal.

🍏 Count part of a year as 1 year.

🍏 Write '0' if this is your first year serving as principal of THIS OR ANY OTHER school.

Year(s) as principal of this or any other school



1-7. What is the highest degree you have earned?

🍏 *Mark (X) only one box.*

- Associate's degree
- Bachelor's degree (B.A., B.S., etc.)
- Master's degree (M.A., M.A.T., M.B.A., M.Ed., M.S., etc.)
- Educational specialist or professional diploma (at least one year beyond master's level)
- Doctorate or first professional degree (Ph.D., Ed.D., M.D., L.L.B., J.D., D.D.S.)
- Do not have a degree → [GO TO item 1-9 below.](#)

1-8. Was the highest degree you earned awarded by the College of Education, School of Education, or Department of Education within the college or university you attended?

- Yes
- No

1-9. Do you currently hold a license or certification in "school administration"?

- Yes
- No

1-10. While serving as a principal, have you REGULARLY TAUGHT one or more classes at the elementary, middle, or secondary level?

🍏 *Do not include time spent as a short-term substitute teacher.*

- Yes
- No → [GO TO Section 2 on page 6.](#)

1-11. While serving as a principal, how many years did you regularly TEACH at the elementary, middle, or secondary level?

🍏 *Count part of a year as 1 year.*

🍏 *Include the 2020-21 school year in this count, if applicable.*

🍏 *Write '0' if you did not regularly teach for any years while serving as a principal.*

YEAR(s) of teaching while serving as a principal

1-12. In addition to serving as principal, are you CURRENTLY teaching in THIS school?

🍏 *Do not include time spent as a short-term substitute teacher.*

- Yes
- No



2. GOALS AND DECISION MAKING

2-1. We are interested in the importance you place on various educational goals. From the following ten goals, which do you consider the most important, the second most important, and the third most important?

- 1 - Building basic literacy skills (reading, math, writing, speaking)
- 2 - Encouraging academic excellence
- 3 - Preparing students for postsecondary education
- 4 - Promoting occupational or vocational skills
- 5 - Promoting good work habits and self-discipline
- 6 - Promoting personal growth (self-esteem, self-knowledge, etc.)
- 7 - Promoting human relations skills
- 8 - Promoting specific moral values
- 9 - Promoting multicultural awareness or understanding
- 10 - Fostering religious or spiritual development



Most important



Second most important



Third most important

2-2. How much ACTUAL influence do you think you have as a principal on decisions concerning the following activities at this school?

☛ Mark (X) one box on each line.

	No influence	Minor influence	Moderate influence	Major influence	Not applicable
a. Setting performance standards for students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Establishing curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Determining the content of in-service professional development programs for teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Evaluating teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Hiring new full-time teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Setting discipline policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Deciding how your school budget will be spent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



3. SCHOOL CLIMATE AND SAFETY

3-1. Did the COVID-19 pandemic affect how instruction was delivered in this school during the 2019-20 school year?

- Yes
- No

**3-2. To what extent do you agree or disagree with the following statement:
I had the support and resources I needed to be effective as the principal of this school during the COVID-19 pandemic in the 2019-20 school year.**

- Strongly disagree
- Somewhat disagree
- Somewhat agree
- Strongly agree
- I was not the principal at this school during the 2019-20 school year

3-3 BEFORE the COVID-19 pandemic in the 2019-20 school year, did this school assign a computer or digital device to each student?

- Yes
- No

3-4. During the COVID-19 pandemic in the 2019-20 school year, did you distribute computers or digital devices to students to take home?

- Yes, we distributed computers or digital devices to all students to take home
- Yes, we distributed computers or digital devices to students who did not have access to one at home
- No, we did not distribute any computers or digital devices to any students

3-5. During the COVID-19 pandemic in the 2019-20 school year, how did this school help students who had no internet access at home?

🍏 *Mark (X) for all that apply.*

- All of the students at this school already had internet access at home
- We worked with internet providers to help students access the internet at home
- We sent home hotspots or other devices to help students access the internet at home
- We offered spaces where students could safely access free Wi-Fi internet (in the school parking lot, parked school buses with hot spots, etc.)
- We did not take any steps to help students access the internet because of COVID-19
- Other - please specify →



3-6. LAST school year (2019-20), to the best of your knowledge, how often did the following types of problems occur at this school?

(At this school is defined as activities happening in school buildings, on school grounds, on school buses, and at places that hold school-sponsored events or activities. Unless otherwise specified, this refers to normal school hours or to times when school activities/events are in session.)

🍏 Mark (X) one box on each line.

	Never	Rarely	At least once a month	At least once a week	Daily
a. Physical conflicts among students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Robbery or theft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Vandalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Student use of alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Student use of illegal drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Student possession of weapons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Physical abuse of teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Student racial tensions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Student bullying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Student verbal abuse of teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Widespread disorder in classrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Student acts of disrespect toward teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Gang activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



3-7. LAST school year (2019-20), what percentage of students had at least one parent or guardian participating in the following activities?

🍏 Mark (X) one box on each line.

	0-25%	26-50%	51-75%	76-100%	Not applicable
a. All regularly scheduled schoolwide parent-teacher conferences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Open house or back-to-school night	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Special subject-area events (e.g., science fair, concerts)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Parent education workshops or courses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Volunteer in the school as needed or on a regular basis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Involvement in school instructional issues (e.g., planning classroom learning activities, providing feedback on curriculum)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Involvement in governance (e.g., PTA or PTO meetings, school board, parent booster clubs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Signing of a school-parent compact (A <i>school-parent compact</i> is an agreement between school community members [e.g., parents, principals, teachers, and students] that acknowledges the shared responsibility for student learning and/or the school's policies.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Involvement in budget decisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3-8a. Are teachers at this school REQUIRED to help students with academic needs OUTSIDE of students' regular school hours?

Yes

No

b. Are teachers at this school REQUIRED to help students with their social and emotional needs OUTSIDE of students' regular school hours?

Yes

No

3-9. Are BEGINNING teachers at this school who are in their first or second year of teaching enrolled in a formal schoolwide or districtwide program aimed to enhance teachers' effectiveness by providing systematic support (sometimes called a teacher induction program)?

Yes

No



4. WORKING CONDITIONS AND PRINCIPAL PERCEPTIONS

- 4-1. Including hours spent during the school day, before and after school, and on the weekends, how many hours do you spend on ALL school-related activities during a typical FULL WEEK at THIS school?

Total WEEKLY hours spent on school-related activities

- 4-2. On average throughout the school year, what percentage of time do you estimate that you spend on the following tasks in this school?

🍏 Please write a percentage in each row. Write '0' if no time was spent on this task.

🍏 Responses should add up to 100%.

	% of Time
a. Internal administrative tasks, including human resource/personnel issues, regulations, reports, school budget	<input type="text" value="000"/> %
b. Curriculum and teaching-related tasks, including teaching, lesson preparation, classroom observations, mentoring teachers	<input type="text" value="000"/> %
c. Student interactions, including discipline and academic guidance	<input type="text" value="000"/> %
d. Parent interactions, including formal and informal interactions	<input type="text" value="000"/> %
e. Other – please specify → <input type="text"/>	<input type="text" value="000"/> %
f. Total	<input type="text" value="100"/> %

- 4-3. How many months per year are you required to work under your current contract?

Months per contract year

- 4-4. Are you represented by a meet-and-confer agreement or a collective bargaining agreement?

(Meet-and-confer discussions are for the purpose of reaching non-legally-binding agreements. Collective bargaining agreements are legally-binding agreements.)

🍏 Mark (X) only one box.

- Meet-and-confer agreement
- Collective bargaining agreement
- Neither



4-5. To what extent do you agree or disagree with each of the following statements?

🍏 *Mark (X) one box on each line.*

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. The stress and disappointments involved in being a principal at this school aren't really worth it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I am generally satisfied with being principal at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. If I could get a higher paying job I'd leave this job as soon as possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I think about transferring to another school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I don't seem to have as much enthusiasm now as I did when I began this job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I think about staying home from school because I'm just too tired to go.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4-6. Which statement best describes how long you plan to remain a principal?

🍏 *Mark (X) only one box.*

- As long as I am able
- Until I am eligible for retirement benefits from this job
- Until I am eligible for retirement benefits from a previous job
- Until I am eligible for Social Security benefits
- Until a specific life event occurs (e.g., children graduate from college, relocation)
- Until a more desirable job opportunity comes along
- Definitely plan to leave as soon as I can
- Undecided at this time



5. PRINCIPAL DEMOGRAPHIC INFORMATION


5-1. Are you male or female?

- Male
- Female

5-2. Are you of Hispanic or Latino origin?

- Yes
- No


5-3. What is your race?


 Mark (X) one or more races to indicate what you consider yourself to be.

- White
- Black or African-American
- Asian
- Native Hawaiian or Other Pacific Islander
- American Indian or Alaska Native

5-4. What is your year of birth?

5-5. What is your current ANNUAL salary for your position in this school before taxes and deductions?

 If your position includes multiple duties (e.g., you teach a class and serve as principal at this school), please include your entire salary before taxes and deductions.

 Please report in whole dollars.

\$.00 per year



6. CONTACT INFORMATION

6-1. Please enter the date you completed this questionnaire.

MM

DD

YYYY

6-2. Please indicate how much time it took you to complete this form, not counting interruptions.

🕒 Please record the time in minutes, e.g., 50 minutes, 65 minutes, etc.

Minutes



6-3. Please PRINT your name, your home address, your work, cell, and home telephone numbers, and your work and home e-mail addresses. This information would only be used in the event that we need to contact you for follow-up. 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).

a. First name

Middle name

Last name

Suffix

b. Street address

c. City

d. State

e. ZIP Code

f. Work phone number

Area code Number

g. Cell phone number

Area code Number

I consent to receive text messages for follow-up purposes only.

h. Home phone number

Area code Number

i. Work e-mail address

j. Home e-mail address



**Thank you very much for your participation
in this survey. If you have any questions,
please contact us, toll-free, at: 1-888-595-1338
or by e-mail at: ntps@census.gov.**

**Please return your completed questionnaire
in the enclosed pre-addressed, postage-paid
envelope or mail it to:**

**U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**



To learn more about this survey and to access reports from earlier collections, see the National Teacher and Principal Survey (NTPS) website at: <http://nces.ed.gov/surveys/ntps>

Additional data collected by the National Center for Education Statistics (NCES) on a variety of topics in elementary, secondary, postsecondary, and international education are available from NCES' website at: <http://nces.ed.gov>

For additional data collected by various Federal agencies, including the Department of Education, visit the Federal Statistics clearinghouse at: <https://www.usa.gov/statistics>



Conducted by:
U.S. DEPARTMENT OF EDUCATION
NATIONAL CENTER FOR EDUCATION STATISTICS

OMB No. 1850-0598: Approval Expires 03/31/2023

Collected by:
U.S. DEPARTMENT OF COMMERCE
U.S. CENSUS BUREAU

PRIVATE PRINCIPAL QUESTIONNAIRE NATIONAL TEACHER AND PRINCIPAL SURVEY 2020-21 SCHOOL YEAR



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

THIS SURVEY HAS BEEN ENDORSED BY:

Please return your completed questionnaire in the pre-addressed, postage-paid envelope or mail it to:

**U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

The National Center for Education Statistics (NCES), within the U.S. Department of Education, is authorized to conduct this survey by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543).



- **What is the average student-teacher ratio in the United States?**
- **What is the average salary of a beginning principal?**
- **Have teachers' views of their autonomy in the classroom changed over time?**
- **Have the characteristics of the principal and teacher workforces in the United States changed over time?**

The answers to these questions help schools and policy makers set education-policy and improve teacher and principal working conditions.

Since 1988, the National Teacher and Principal Survey and its precursor, the Schools and Staffing Survey, have provided the answers to these and other important education questions from the perspective of Principals and Teachers.

By selecting a statistically representative sample of schools, and teachers in those schools, we are able to provide representative data for the United States without going to every school.

Your school has been selected to participate in the 2020-21 National Teacher and Principal Survey. You will represent thousands of other principals, so it is important that you respond to this survey.

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).

More information can be found on our website: <http://nces.ed.gov/surveys/ntps>

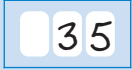

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this voluntary information collection is 1850-0598. The time required to complete this information collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, 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 collection, or comments or concerns about the contents or the status of your individual submission of this questionnaire, please e-mail: ntps@census.gov, or write directly to: National Teacher and Principal Survey (NTPS), National Center for Education Statistics, Potomac Center Plaza, 550 12th Street, SW, Room 4014, Washington, DC 20202.



INSTRUCTIONS

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

<p>CORRECT marking example – (Use care to keep characters in their designated spaces.)</p>	<p>INCORRECT marking example –</p>
	
<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p style="text-align: center;">OR</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>

- a. It is important that this questionnaire be completed by the school PRINCIPAL or SCHOOL HEAD, not by anyone else.
- b. Please do not write any comments by the answer boxes.
- c. If you are unsure about how to answer a question, please give the best answer you can rather than leaving it blank.
- d. If you have any questions, call the U.S. Census Bureau at 1-888-595-1338. Someone will be available to take your call Monday through Friday, between 8:00 a.m. and 8:00 p.m. (Eastern Time). The U.S. Census Bureau is also available to answer your questions via e-mail at: ntps@census.gov.



1. PRINCIPAL OR SCHOOL HEAD EXPERIENCE AND TRAINING

- 1-1. **BEFORE** you became a principal or school head, how many years of elementary, middle, or secondary teaching experience did you have?

🍏 Count part of a year as 1 year.

🍏 Write '0' if you had no years of teaching experience before becoming a principal or school head.

Year(s) of teaching before becoming a principal or school head

- 1-2. **BEFORE** you became a principal or school head, did you hold the position of assistant principal or program director, including temporary positions?

Yes

No

- 1-3. **BEFORE** you became a principal or school head, did you have any management experience outside of the field of education?

Yes

No

- 1-4. **BEFORE** you became a principal or school head, did you participate in any district or school training or development program for ASPIRING school principals or school heads?

Yes

No

- 1-5. **PRIOR** to this school year, how many years did you serve as the principal or school head of **THIS** school?

🍏 Do NOT include any years you served as ASSISTANT principal or school head.

🍏 Count part of a year as 1 year.

🍏 Write '0' if this is your first year serving as principal or school head at THIS school.

Year(s) as principal or school head of this school

- 1-6. **PRIOR** to this school year, how many years did you serve as the principal or school head of **THIS OR ANY OTHER** school?

🍏 Entry in item 1-6 should be greater than or equal to entry in 1-5.

🍏 Do NOT include any years you served as ASSISTANT principal.

🍏 Count part of a year as 1 year.

🍏 Write '0' if this is your first year serving as principal or school head of THIS OR ANY OTHER school.

Year(s) as principal or school head of this or any other school



1-7. What is the highest degree you have earned?

🍏 *Mark (X) only one box.*

- Associate's degree
- Bachelor's degree (B.A., B.S., etc.)
- Master's degree (M.A., M.A.T., M.B.A., M.Ed., M.S., etc.)
- Educational specialist or professional diploma (at least one year beyond master's level)
- Doctorate or first professional degree (Ph.D., Ed.D., M.D., L.L.B., J.D., D.D.S.)
- Do not have a degree → [GO TO item 1-9 below.](#)

1-8. Was the highest degree you earned awarded by the College of Education, School of Education, or Department of Education within the college or university you attended?

- Yes
- No

1-9. Do you currently hold a license or certification in "school administration"?

- Yes
- No

1-10. While serving as a principal or school head, have you REGULARLY TAUGHT one or more classes at the elementary, middle, or secondary level?

🍏 *Do not include time spent as a short-term substitute teacher.*

- Yes
- No → [GO TO Section 2 on page 6.](#)

1-11. While serving as a principal or school head, how many years did you regularly TEACH at the elementary, middle, or secondary level?

🍏 *Count part of a year as 1 year.*

🍏 *Include the 2020-21 school year in this count, if applicable.*

🍏 *Write '0' if you did not regularly teach for any years while serving as a principal or school head.*

YEAR(s) of teaching while serving as a principal or school head

1-12. In addition to serving as principal or school head, are you CURRENTLY teaching in THIS school?

🍏 *Do not include time spent as a short-term substitute teacher.*

- Yes
- No



2. GOALS AND DECISION MAKING

2-1. We are interested in the importance you place on various educational goals. From the following ten goals, which do you consider the most important, the second most important, and the third most important?

- 1 - Building basic literacy skills (reading, math, writing, speaking)
- 2 - Encouraging academic excellence
- 3 - Preparing students for postsecondary education
- 4 - Promoting occupational or vocational skills
- 5 - Promoting good work habits and self-discipline
- 6 - Promoting personal growth (self-esteem, self-knowledge, etc.)
- 7 - Promoting human relations skills
- 8 - Promoting specific moral values
- 9 - Promoting multicultural awareness or understanding
- 10 - Fostering religious or spiritual development



Most important



Second most important



Third most important

2-2. How much ACTUAL influence do you think you have as a principal or school head on decisions concerning the following activities at this school?

☛ Mark (X) one box on each line.

	No influence	Minor influence	Moderate influence	Major influence	Not applicable
a. Setting performance standards for students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Establishing curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Determining the content of in-service professional development programs for teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Evaluating teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Hiring new full-time teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Setting discipline policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Deciding how your school budget will be spent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



3. SCHOOL CLIMATE AND SAFETY

3-1. Did the COVID-19 pandemic affect how instruction was delivered in this school during the 2019-20 school year?

Yes

No

3-2. To what extent do you agree or disagree with the following statement: I had the support and resources I needed to be effective as the principal or school head of this school during the COVID-19 pandemic in the 2019-20 school year.

Strongly disagree

Somewhat disagree

Somewhat agree

Strongly agree

I was not the principal or school head at this school during the 2019-20 school year

3-3 BEFORE the COVID-19 pandemic in the 2019-20 school year, did this school assign a computer or digital device to each student?

Yes

No

3-4. During the COVID-19 pandemic in the 2019-20 school year, did you distribute computers or digital devices to students to take home?

Yes, we distributed computers or digital devices to all students to take home

Yes, we distributed computers or digital devices to students who did not have access to one at home

No, we did not distribute any computers or digital devices to any students

3-5. During the COVID-19 pandemic in the 2019-20 school year, how did this school help students who had no internet access at home?

🍏 *Mark (X) for all that apply.*

All of the students at this school already had internet access at home

We worked with internet providers to help students access the internet at home

We sent home hotspots or other devices to help students access the internet at home

We offered spaces where students could safely access free Wi-Fi internet (in the school parking lot, parked school buses with hot spots, etc.)

We did not take any steps to help students access the internet because of COVID-19

Other - please specify →



3-6. LAST school year (2019-20), to the best of your knowledge, how often did the following types of problems occur at this school?

(At this school is defined as activities happening in school buildings, on school grounds, on school buses, and at places that hold school-sponsored events or activities. Unless otherwise specified, this refers to normal school hours or to times when school activities/events are in session.)

🍏 Mark (X) one box on each line.

	Never	Rarely	At least once a month	At least once a week	Daily
a. Physical conflicts among students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Robbery or theft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Vandalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Student use of alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Student use of illegal drugs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Student possession of weapons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Physical abuse of teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Student racial tensions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Student bullying	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Student verbal abuse of teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Widespread disorder in classrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Student acts of disrespect toward teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Gang activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



3-7. LAST school year (2019-20), what percentage of students had at least one parent or guardian participating in the following activities?

🍏 Mark (X) one box on each line.

	0-25%	26-50%	51-75%	76-100%	Not applicable
a. All regularly scheduled schoolwide parent-teacher conferences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Open house or back-to-school night	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Special subject-area events (e.g., science fair, concerts)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Parent education workshops or courses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Volunteer in the school as needed or on a regular basis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Involvement in school instructional issues (e.g., planning classroom learning activities, providing feedback on curriculum)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Involvement in governance (e.g., PTA or PTO meetings, school board, parent booster clubs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Signing of a school-parent compact (A <i>school-parent compact</i> is an agreement between school community members [e.g., parents, principals or school heads, teachers, and students] that acknowledges the shared responsibility for student learning and/or the school's policies.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Involvement in budget decisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3-8a. Are teachers at this school REQUIRED to help students with academic needs OUTSIDE of students' regular school hours?

Yes

No

b. Are teachers at this school REQUIRED to help students with their social and emotional needs OUTSIDE of students' regular school hours?

Yes

No

3-9. Are BEGINNING teachers at this school who are in their first or second year of teaching enrolled in a formal schoolwide program aimed to enhance teachers' effectiveness by providing systematic support (sometimes called a teacher induction program)?

Yes

No



4. WORKING CONDITIONS AND PRINCIPAL OR SCHOOL HEAD PERCEPTIONS

4-1. Including hours spent during the school day, before and after school, and on the weekends, how many hours do you spend on ALL school-related activities during a typical FULL WEEK at THIS school?

Total WEEKLY hours spent on school-related activities

4-2. On average throughout the school year, what percentage of time do you estimate that you spend on the following tasks in this school?

🍏 Please write a percentage in each row. Write '0' if no time was spent on this task.

🍏 Responses should add up to 100%.

	% of Time
a. Internal administrative tasks, including human resource/personnel issues, regulations, reports, school budget	<input type="text" value="000"/> %
b. Curriculum and teaching-related tasks, including teaching, lesson preparation, classroom observations, mentoring teachers	<input type="text" value="000"/> %
c. Student interactions, including discipline and academic guidance	<input type="text" value="000"/> %
d. Parent interactions, including formal and informal interactions	<input type="text" value="000"/> %
e. Other – please specify → <input type="text"/>	<input type="text" value="000"/> %
f. Total	<input type="text" value="100"/> %

4-3. How many months per year are you required to work under your current contract?

Months per contract year

4-4. Are you represented by a meet-and-confer agreement or a collective bargaining agreement?

(Meet-and-confer discussions are for the purpose of reaching non-legally-binding agreements. Collective bargaining agreements are legally-binding agreements.)

🍏 Mark (X) only one box.

- Meet-and-confer agreement
- Collective bargaining agreement
- Neither



4-5. To what extent do you agree or disagree with each of the following statements?

🍏 *Mark (X) one box on each line.*

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. The stress and disappointments involved in being a principal or school head at this school aren't really worth it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I am generally satisfied with being principal or school head at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. If I could get a higher paying job I'd leave this job as soon as possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I think about transferring to another school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I don't seem to have as much enthusiasm now as I did when I began this job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I think about staying home from school because I'm just too tired to go.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4-6. Which statement best describes how long you plan to remain a principal or school head?

🍏 *Mark (X) only one box.*

- As long as I am able
- Until I am eligible for retirement benefits from this job
- Until I am eligible for retirement benefits from a previous job
- Until I am eligible for Social Security benefits
- Until a specific life event occurs (e.g., children graduate from college, relocation)
- Until a more desirable job opportunity comes along
- Definitely plan to leave as soon as I can
- Undecided at this time



5. PRINCIPAL OR SCHOOL HEAD DEMOGRAPHIC INFORMATION

5-1. Are you male or female?

- Male
- Female

5-2. Are you of Hispanic or Latino origin?

- Yes
- No

5-3. What is your race?

Mark (X) one or more races to indicate what you consider yourself to be.

- White
- Black or African-American
- Asian
- Native Hawaiian or Other Pacific Islander
- American Indian or Alaska Native

5-4. What is your year of birth?

5-5. What is your current ANNUAL salary for your position in this school before taxes and deductions?

- If your position includes multiple duties (e.g., you teach a class and serve as principal or school head at this school), please include your entire salary before taxes and deductions.*
- Please report in whole dollars.*

 per year


6. CONTACT INFORMATION

6-1. Please enter the date you completed this questionnaire.

MM

DD

YYYY

6-2. Please indicate how much time it took you to complete this form, not counting interruptions.

🍏 Please record the time in minutes, e.g., 50 minutes, 65 minutes, etc.

Minutes



6-3. Please PRINT your name, your home address, your work, cell, and home telephone numbers, and your work and home e-mail addresses. This information would only be used in the event that we need to contact you for follow-up. 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).

a. First name

Middle name

Last name

Suffix

b. Street address

c. City

d. State

e. ZIP Code

f. Work phone number

Area code Number

g. Cell phone number

Area code Number

I consent to receive text messages for follow-up purposes only.

h. Home phone number

Area code Number

i. Work e-mail address

j. Home e-mail address



**Thank you very much for your participation
in this survey. If you have any questions,
please contact us, toll-free, at: 1-888-595-1338
or by e-mail at: ntps@census.gov.**

**Please return your completed questionnaire
in the enclosed pre-addressed, postage-paid
envelope or mail it to:**

**U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**



To learn more about this survey and to access reports from earlier collections, see the National Teacher and Principal Survey (NTPS) website at: <http://nces.ed.gov/surveys/ntps>

Additional data collected by the National Center for Education Statistics (NCES) on a variety of topics in elementary, secondary, postsecondary, and international education are available from NCES' website at: <http://nces.ed.gov>

For additional data collected by various Federal agencies, including the Department of Education, visit the Federal Statistics clearinghouse at: <https://www.usa.gov/statistics>



Conducted by:
U.S. DEPARTMENT OF EDUCATION
NATIONAL CENTER FOR EDUCATION STATISTICS

OMB No. 1850-0598: Approval Expires 03/31/2023

Collected by:
U.S. DEPARTMENT OF COMMERCE
U.S. CENSUS BUREAU

SCHOOL QUESTIONNAIRE

NATIONAL TEACHER AND PRINCIPAL SURVEY

2020-21 SCHOOL YEAR



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

THIS SURVEY HAS BEEN ENDORSED BY:

Please return your completed questionnaire in the pre-addressed, postage-paid envelope or mail it to:

**U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

The National Center for Education Statistics (NCES), within the U.S. Department of Education, is authorized to conduct this survey by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543).



- **What is the average student-teacher ratio in the United States?**
- **What is the average salary of a beginning principal?**
- **Have teachers' views of their autonomy in the classroom changed over time?**
- **Have the characteristics of the principal and teacher workforces in the United States changed over time?**

The answers to these questions help school districts and policy makers at the state, federal, and local levels set education policy and improve teacher and principal working conditions.

Since 1988, the National Teacher and Principal Survey and its precursor, the Schools and Staffing Survey, have provided the answers to these and other important education questions from the perspective of Principals and Teachers.

By selecting a statistically representative sample of schools, and teachers in those schools, we are able to provide representative data for the United States without going to every school.

Your school has been selected to participate in the 2020-21 National Teacher and Principal Survey. You will represent thousands of other schools, so it is important that you respond to this survey.

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).

More information can be found on our website: <http://nces.ed.gov/surveys/ntps>

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this voluntary information collection is 1850-0598. The time required to complete this information collection is estimated to average 35 minutes per response, including the time to review instructions, search existing data resources, 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 collection, or comments or concerns about the contents or the status of your individual submission of this questionnaire, please e-mail: ntps@census.gov, or write directly to: National Teacher and Principal Survey (NTPS), National Center for Education Statistics, Potomac Center Plaza, 550 12th Street, SW, Room 4014, Washington, DC 20202.



INSTRUCTIONS

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

CORRECT marking example – (Use care to keep characters in their designated spaces.)	INCORRECT marking example –
<div style="border: 1px solid black; padding: 5px; display: inline-block; margin-bottom: 10px;"> <input type="checkbox"/> 3 5 </div> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; padding: 5px; display: inline-block; margin-right: 20px;"> <input type="checkbox"/> 35 </div> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <input type="checkbox"/> 3 5 </div> </div> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No OR <input type="checkbox"/> Yes <input type="checkbox"/> No

- a. This questionnaire may be completed by any staff member who has access to the school's records.
- b. Please do not write any comments by the answer boxes.
- c. If you are unsure about how to answer a question, please give the best answer you can rather than leaving it blank.
- d. If you have any questions, call the U.S. Census Bureau at 1-888-595-1338. Someone will be available to take your call Monday through Friday, between 8:00 a.m. and 8:00 p.m. (Eastern Time). The U.S. Census Bureau is also available to answer your questions via e-mail at: ntps@census.gov.



1. GENERAL INFORMATION ABOUT THIS SCHOOL

Please report for the school listed on the cover.

1-1. Which of the following grades does this school offer?

🍏 Please mark (X) for all that apply.

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

1-2. Excluding prekindergarten, postsecondary, and adult education students, around October 1, 2020, how many students were enrolled in this school?

, Enrolled Students

1-3. For this school year (2020-21), what is the Average Daily Attendance (ADA) percentage at this school?

🍏 Round to the nearest whole PERCENT.

% Average Daily Attendance



1-4. What is the official start and end time for MOST students at this school?

🍏 If the start and end times vary by day, record the start and end time for the longest day of the week.

🍏 Do NOT include prekindergarten or transitional first grade programs.

Start time	End time
<input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> : <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> : <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> : <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/>	<input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> : <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> : <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/> : <input style="width: 30px; height: 30px; border: 1px solid black;" type="text"/>
<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.	<input type="checkbox"/> a.m. <input type="checkbox"/> p.m.

1-5. How many days are in a TYPICAL SCHOOL WEEK for students in this school?

🍏 Do NOT include prekindergarten or transitional first grade programs.

Days per TYPICAL SCHOOL WEEK

1-6. How many days are in the SCHOOL YEAR for students in this school?

Days per SCHOOL YEAR

1-7. Which of the following best describes this school?

🍏 Mark (X) only one box.

- REGULAR school – elementary or secondary
- SPECIAL PROGRAM EMPHASIS school – such as a science or math school, performing arts school, talented or gifted school, foreign language immersion school, etc.
- SPECIAL EDUCATION school – primarily serves students with disabilities
- CAREER/TECHNICAL/VOCATIONAL school – primarily serves students being trained for occupations
- ALTERNATIVE/OTHER school – offers a curriculum designed to provide alternative or nontraditional education; does not specifically fall into the categories of regular, special program emphasis, special education, or vocational school. Please specify ↴

1-8. Is this school a public CHARTER school?

(A charter school is a public school that, in accordance with an enabling state statute, has been granted a charter exempting it from selected state or local rules and regulations. A charter school may be a newly created school or it may previously have been a public or private school.)

- Yes
- No → GO TO item 1-10a on page 6.

1-9. Which of the following best describes the governance structure of this public charter school?

🍏 Mark (X) only one box.

- An independent or stand-alone charter school
- Part of a non-profit charter management organization or network of schools that are managed by a central agency
- Part of a for-profit charter management organization or network of schools that are managed by a central agency
- Part of a traditional public school district
- Other – Please specify ↴



1-10a. Does this school currently have any students enrolled in kindergarten?

🍏 Please include regular kindergarten as well as transitional (or readiness) kindergarten and transitional first (or pre-first) grade students, if enrolled.

 Yes

 No → GO TO item 1-11 below.
**b. How long is the school day for a kindergarten, transitional kindergarten, or transitional first grade student?**

🍏 Mark (X) only one box.

 Full day (4 hours or more per day)

 Half day (less than 4 hours per day)

 Both full-day and half-day programs are offered
c. How many days are in a TYPICAL SCHOOL WEEK for kindergarten, transitional kindergarten, or transitional first grade students in this school?

🍏 If the number of days per week varies, record the most days that a student would attend in a week.

Days per TYPICAL SCHOOL WEEK

1-11. Does this school have a library media center?

(A library media center is an organized collection of printed and/or audiovisual and/or computer resources which is administered as a unit, is located in a designated place or places, and makes resources and services available to students, teachers, and administrators. A library media center may be called a school library, media center, resource center, information center, instructional materials center, learning resource center, or any other similar name.)

 Yes

 No


1-12. During the 2019-20 school year, how did COVID-19 affect instruction in this school?

🍏 Mark (X) for all that apply

- There was no change in how classes were taught because of COVID-19
- All or some of the classes normally taught in person at the school were canceled
- All or some of the classes normally taught in person moved to a distance-learning format using online resources, either self-paced or real-time
- All or some of the classes normally taught in person moved into a distance-learning format using paper materials sent home with students
- All or some of the classes normally taught in person changed in some other way
Please specify →

1-13. For classes that were moved into a distance-learning format, was there any real-time interaction between the teachers and students, such as live video conferences?

- Yes
- No
- Not applicable, no classes were moved into a distance-learning format

Now we would like you to think about how classes are normally taught at this school

1-14. Which of the following best describes how classes are normally taught at this school?

🍏 Mark (X) only one box.

- Classes are taught ONLY in person at the school
- Classes are taught in person at the school with some online resources (for example, homework submission or instructional software)
- Classes are taught in person at the school AND at least some classes are available online without in person instruction → [GO TO item 1-16 below.](#)
- Classes are taught only online with no in person classes → [GO TO item 1-17a on page 8.](#)

1-15. Does this school normally offer any classes that are taught entirely online with no in person instruction?

- Yes
- No → [GO TO item 1-17a on page 8.](#)

1-16. About what percentage of students are typically enrolled in at least one online class?

🍏 Mark (X) only one box.

- No students are enrolled in online classes
- 1-10% of students
- 11-25% of students
- 26-50% of students
- 51-75% of students
- 76% or more of students



1-17a. Does this school have a magnet program?

(A magnet program attracts students from outside their normal attendance area and offers enhancements such as special curricular themes or methods of instruction.)

 Yes No → GO TO item 1-18 on page 9.**b. Is this a school-wide magnet program in which all students in this school participate in the program?** Yes No**c. Is the magnet program focused on...?**

🍏 Mark (X) for all that apply.

 Science, Technology, Engineering, or Math Performing Arts Education for gifted or talented students Foreign language immersion Other

1-18. Does this school offer the following?

- a. Different instructional approaches (e.g., mixed-ability grouping, self-paced instruction, ungraded classrooms, etc.)

Yes

No

- b. A dual-language or foreign language immersion program (A program in which the goal of instruction is that students are proficient in two languages)

🍎 Do NOT include English as a Second Language (ESL) programs or classes.

Yes

No

1-19. Are the following before-school or after-school programs or services currently available for students in any of grades K-12, or comparable ungraded levels, regardless of funding source at this school?

- a. A program or service providing instruction beyond the normal school day for students who NEED academic ASSISTANCE

Yes

No

- b. A program or service providing instruction beyond the normal school day for students who SEEK academic ADVANCEMENT or ENRICHMENT

Yes

No

- c. Extended-day care

Yes

No

- d. School-related activities and clubs (e.g., yearbook club, school dance committee, etc.)

Yes

No



2. SCHOOL STAFFING

2-1. Around October 1, 2020, how many teachers were teaching in grades K-12 and/or comparable ungraded levels at this school in the following time categories?

- 🍏 *INCLUDE special area or resource teachers (e.g., special education, Title I, art, music, physical education)*
- 🍏 *INCLUDE as part-time teachers: itinerant teachers and teachers who have another position at this school (e.g., data coach, instructional coordinator)*
- 🍏 *DO NOT INCLUDE student teachers, teachers who teach ONLY prekindergarten or adult education, aides, or other staff who do not directly teach students*
- 🍏 *Write '0' if no person is teaching in a particular time category*

a. Full-time Teachers

Teachers

b. Part-time Teachers

Teachers

c. TOTAL Full- and Part-time Teachers

Teachers



2-2. Around October 1, 2020, how many staff held full-time or part-time positions or assignments in this school in each of the following categories?

🍏 *Employees who hold more than one position in this school should be counted as part-time staff for each position held. FOR EXAMPLE: If your school's vice principal also serves as a data coach, you would count this person as 1 part-time vice principal (item b) and 1 part-time data coach (item e), even if this person works full-time across the two positions.*

🍏 *Employees shared with other schools or the district office should be counted as part-time employees.*

🍏 *If no FULL-TIME or PART-TIME staff members exist, please write '0' in the box under full-time and/or part-time.*

	FULL-TIME	PART-TIME
a. Principals	<input type="text"/>	<input type="text"/>
b. Vice principals and assistant principals	<input type="text"/>	<input type="text"/>
c. Instructional coordinators and supervisors, such as curriculum specialists	<input type="text"/>	<input type="text"/>
d. Librarians or library media specialists	<input type="text"/>	<input type="text"/>
e. Data coaches or data coordinators	<input type="text"/>	<input type="text"/>
f. Technology specialists	<input type="text"/>	<input type="text"/>
g. Student support services professional staff		
(1) School/guidance counselors, excluding psychologists and social workers	<input type="text"/>	<input type="text"/>
(2) Nurses	<input type="text"/>	<input type="text"/>
(3) Social workers	<input type="text"/>	<input type="text"/>
(4) Psychologists	<input type="text"/>	<input type="text"/>
(5) Speech therapists or pathologists	<input type="text"/>	<input type="text"/>
(6) Other student support services staff	<input type="text"/>	<input type="text"/>



2-2. *Continued* – Around October 1, 2020, how many staff held full-time or part-time positions or assignments in this school in each of the following categories?

	FULL-TIME	PART-TIME
h. Aides	<input type="text"/>	<input type="text"/>
(1) Regular Title I aides	<input type="text"/>	<input type="text"/>
(2) English as a Second Language (ESL) or bilingual teacher aides	<input type="text"/>	<input type="text"/>
(3) Special education aides	<input type="text"/>	<input type="text"/>
(4) Library media center aides	<input type="text"/>	<input type="text"/>
(5) Other classroom aides	<input type="text"/>	<input type="text"/>
i. Secretaries and other clerical support staff	<input type="text"/>	<input type="text"/>
j. Food service personnel	<input type="text"/>	<input type="text"/>
k. Custodial and maintenance personnel	<input type="text"/>	<input type="text"/>
l. Security guards or security personnel (not law enforcement)	<input type="text"/>	<input type="text"/>
m. School Resource Officers (include all career law enforcement officers with arrest authority, who have specialized training and are assigned to work in collaboration with school organizations)	<input type="text"/>	<input type="text"/>
n. Sworn law enforcement officers who are not School Resource Officers	<input type="text"/>	<input type="text"/>
o. Other employees not reported above	<input type="text"/>	<input type="text"/>



2-3a. Do any of the teachers or staff have the following specialist assignments working with students in this school?

(1) Reading specialist

Yes

No

(2) Math specialist

Yes

No

(3) Science specialist

Yes

No

b. Do any of the teachers or staff have the following coaching assignments working with teachers in this school?

(Coaching includes observing teachers giving lessons, providing feedback to teachers, and demonstrating teaching strategies.)

(1) Reading coach

Yes

No

(2) Math coach

Yes

No

(3) Science coach

Yes

No

(4) General instructional/Not subject-specific coach

Yes

No



Filter question for item 2-4 (web-only*)

**Note: This item only appears on the web version of the school questionnaire for a subset of school respondents in an experimental manner.*

For THIS school year (2020-21), were there teaching vacancies in this school, that is, teaching positions for which teachers were recruited and interviewed by this school's hiring authority?

- 🍏 *Please include teaching positions that were vacant for the 2020-21 school year and that may or may not have been filled before the start of the 2020-21 school year.*
- 🍏 *Do not include vacancies for teachers who teach ONLY prekindergarten or adult education.*

Yes → [GO TO Item 2-4.](#)

No → [GO TO Item 2-5a.](#)

2-4. For THIS school year (2020-21), how easy or difficult was it to fill teaching vacancies in each of the following fields?

- 🍏 Please include teaching positions that were vacant for the 2020-21 school year and that may or may not have been filled before the start of the 2020-21 school year.
- 🍏 Do NOT include vacancies for teachers who teach ONLY prekindergarten or adult education.
- 🍏 Mark (X) one box on each line.

	This position is not offered in this school	No vacancy in this field this school year	Easy	Somewhat difficult	Very difficult	Could not fill the vacancy
(1) General elementary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) Special education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) English or language arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) Social studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(5) Computer science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(6) Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(7) Biology or life sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(8) Physical sciences (e.g., chemistry, physics, earth sciences)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(9) English as a Second Language (ESL) or bilingual education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(10) Foreign languages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(11) Music or art	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(12) Career or technical education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(13) Physical education or health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



2-5a. Around October 1, 2020, did you have any newly-hired teachers, that is, employees that were not employed as teachers at THIS SCHOOL last year?

🍏 Include all teachers that are new to your school, even if they had previously taught at other schools.

🍏 Do NOT include newly-hired teachers who teach ONLY prekindergarten or adult education.

Yes

No → GO TO Section 3 on page 16.



b. How many teachers were newly-hired by this school?

🍏 Do NOT include newly-hired teachers who teach ONLY prekindergarten or adult education.

🍏 Record HEAD COUNTS, not FTEs (full-time equivalent).

Newly-hired teachers

c. Of those newly-hired teachers, how many were in their first year of teaching?

🍏 Record HEAD COUNTS, not FTEs (full-time equivalent).

🍏 Write '0' if no newly-hired teachers were in their first year of teaching.

Teachers in their first year of teaching



3. COMMUNITY SERVICE REQUIREMENTS

3-1. Does this school grant high school diplomas?

🍏 *Do NOT include vocational certificates, certificates of attendance, or certificates of completion.*

Yes

No → GO TO Section 4 on page 17.

3-2. For high school graduates of the class of 2021, does this school or district have a community service requirement for a standard diploma?

Yes

No → GO TO Section 4 on page 17.

3-3. What is the minimum number of community service hours required of the high school graduates in the class of 2021?

Minimum hours of community service



4. SPECIAL PROGRAMS AND SERVICES

4-1a. Of the students enrolled in grades K-12 in this school, do any have an Individual Education Plan (IEP) because they have disabilities or special needs?

Yes

No → GO TO item 4-3a on page 18.



b. How many students have an Individual Education Plan (IEP) because they have disabilities or special needs?

🍎 Do NOT include prekindergarten, postsecondary, or adult education students.

🍎 Do NOT include students who have only a 504 plan.

 ,

Students with an Individual Education Plan (IEP)

4-2a. Does this school PRIMARILY SERVE students with disabilities?

🍎 If you marked "SPECIAL EDUCATION school - primarily serves students with disabilities" for item 1-7, please mark "Yes" for this item.

Yes → GO TO item 4-3a on page 18.

No



b. How many students with an Individual Education Plan (IEP) because they have disabilities or special needs are in each of the following instructional settings?

🍎 The sum of entries in item 4-2b should equal the entry in item 4-1b above.

🍎 Write '0' if no student with an IEP is in a particular instructional setting.

(1) 100% of the school day in a regular classroom

 ,

Students

(2) 80-99% of the school day in a regular classroom

 ,

Students

(3) 40-79% of the school day in a regular classroom

 ,

Students

(4) 0-39% of the school day in a regular classroom

 ,

Students



4-3a. Of the students enrolled in this school as of October 1, 2020, have any been identified as English language learners (ELL), also known as limited-English proficient (LEP)?

(English language learners (ELLs) or limited-English proficient (LEP) refers to students whose native or dominant language is other than English and who have sufficient difficulty speaking, reading, writing, or understanding the English language as to deny them the opportunity to learn successfully in an English-speaking-only classroom.)

🍏 Do NOT include prekindergarten, postsecondary, or adult education students.

Yes

No → GO TO item 4-6a on page 19.



b. How many ELL or LEP students are enrolled in this school?

Students

4-4. Does this school have instruction specifically designed to address the needs of ELL or LEP students?

Yes

No → GO TO item 4-6a on page 19.



4-5a. Are ELL or LEP students taught English using ESL, bilingual, or immersion techniques?

Yes

No

b. Are ELL or LEP students taught English in regular English-speaking classrooms?

Yes

No



4-6a. Does this school participate in the National School Lunch Program (that is, the federal free or reduced-price lunch program)?

Yes

No → GO TO item 4-7 on page 20.



b. Around October 1, 2020, did you have any PREKINDERGARTEN students enrolled in this school?

Yes

No → GO TO item 4-6c below.

(1) How many PREKINDERGARTEN students were enrolled in this school?

, Prekindergarten students

(2) What was the percentage of PREKINDERGARTEN students at this school APPROVED for free or reduced-price lunches under the National School Lunch Program?

% of prekindergarten students approved

c. Around October 1, 2020, what was the percentage of K-12 students at this school APPROVED for free or reduced-price lunches under the National School Lunch Program?

% of K-12 students approved

d. What is the count of students whose National School Lunch Program eligibility was determined through direct certification?

(Direct certification deems students eligible for free meals under the National School Lunch Program (NSLP) by their families' participation in certain Federal assistance programs such as Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), or Food Distribution Program on Indian Reservations (FDPIR).)

🍎 Write '0' if no student's eligibility was determined through Direct Certification.

, Students

e. Does this school provide a free lunch for ALL students as part of the National School Lunch Program's Community Eligibility Option?

(The Community Eligibility Program (CEP) eliminates the requirement for eligibility information once a school has determined a baseline percentage of NSLP-eligible students. Under CEP, schools must serve all students free lunch and breakfast. All students in a school are therefore eligible for free lunches and there is no count of reduced-price lunch students.)

Yes

No



4-7. Around October 1, 2020, did any students enrolled in this school receive Title I services at this school or at any other location?

(Title I is a federally funded program that provides educational services, such as remedial reading or remedial math, to children who live in areas with high concentrations of low-income families.)

Yes

No → GO TO Section 5 on page 21.

4-8a. How many PREKINDERGARTEN students at this school participate in the Title I program?

🍏 Write '0' if no prekindergarten students participate in the Title I program.

, Prekindergarten students

b. How many students at this school in GRADES K-12 participate in the Title I program?

🍏 Write '0' if no students in grades K-12 participate in the Title I program.

, K-12 students

4-9. Are students receiving Title I services in –

a. Reading or language arts?

Yes

No

b. Mathematics?

Yes

No

c. English as a Second Language (ESL)?

Yes

No

4-10. How many designated Title I teachers were teaching AT THIS SCHOOL around October 1, 2020?

🍏 Write '0' if there are no designated Title I teachers at this school.

Title I teachers



5. CONTACT INFORMATION

5-1. What is the name of the person who completed most of this questionnaire?

5-2. What is his or her job title?

5-3. What is his or her work e-mail address?

5-4. What is the school's phone number?

Area code	Number
<input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

5-5. Please enter the date your school completed this questionnaire.

MM	DD	YYYY
<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> 2 <input type="text"/> 0 <input type="text"/> <input type="text"/>

5-6. Please indicate how much time it took your school to complete this form, not counting interruptions.

🍏 Please record the time in minutes, e.g., 50 minutes, 65 minutes, etc.

<input type="text"/> <input type="text"/> <input type="text"/>	Minutes
--	---------

Thank you very much for your participation
in this survey. If you have any questions,
please contact us, toll-free, at: 1-888-595-1338
or by e-mail at: ntps@census.gov.

Please return your completed questionnaire
in the enclosed pre-addressed, postage-paid
envelope or mail it to:

U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001



This page intentionally left blank.



This page intentionally left blank.



To learn more about this survey and to access reports from earlier collections, see the National Teacher and Principal Survey (NTPS) website at: <http://nces.ed.gov/surveys/ntps>

Additional data collected by the National Center for Education Statistics (NCES) on a variety of topics in elementary, secondary, postsecondary, and international education are available from NCES' website at: <http://nces.ed.gov>

For additional data collected by various Federal agencies, including the Department of Education, visit the Federal Statistics clearinghouse at: <https://www.usa.gov/statistics>



Conducted by:
U.S. DEPARTMENT OF EDUCATION
NATIONAL CENTER FOR EDUCATION STATISTICS

OMB No. 1850-0598: Approval Expires 03/31/2023

Collected by:
U.S. DEPARTMENT OF COMMERCE
U.S. CENSUS BUREAU

PRIVATE SCHOOL QUESTIONNAIRE NATIONAL TEACHER AND PRINCIPAL SURVEY 2020-21 SCHOOL YEAR



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

THIS SURVEY HAS BEEN ENDORSED BY:

Please return your completed questionnaire in the pre-addressed, postage-paid envelope or mail it to:

**U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

The National Center for Education Statistics (NCES), within the U.S. Department of Education, is authorized to conduct this survey by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543).



- **What is the average student-teacher ratio in the United States?**
- **What is the average salary of a beginning principal?**
- **Have teachers' views of their autonomy in the classroom changed over time?**
- **Have the characteristics of the principal and teacher workforces in the United States changed over time?**

The answers to these questions help schools and policy makers set education policy and improve teacher and principal working conditions.

Since 1988, the National Teacher and Principal Survey and its precursor, the Schools and Staffing Survey, have provided the answers to these and other important education questions from the perspective of Principals and Teachers.

By selecting a statistically representative sample of schools, and teachers in those schools, we are able to provide representative data for the United States without going to every school.

Your school has been selected to participate in the 2020-21 National Teacher and Principal Survey. You will represent thousands of other schools, so it is important that you respond to this survey.

Basic school information such as school name, contact information, school type or program emphasis, religious orientation or affiliation of the school, association membership, grades taught and the number of students by grade, number of students by race/ethnicity, and the number of full-time-equivalent teachers are published on <http://nces.ed.gov/surveys/pss/privateschoolsearch/>. The remaining information is 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).

More information can be found on our website: <http://nces.ed.gov/surveys/ntps>

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this voluntary information collection is 1850-0598. The time required to complete this information collection is estimated to average 40 minutes per response, including the time to review instructions, search existing data resources, 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 collection, or comments or concerns about the contents or the status of your individual submission of this questionnaire, please e-mail: ntps@census.gov, or write directly to: National Teacher and Principal Survey (NTPS), National Center for Education Statistics, Potomac Center Plaza, 550 12th Street, SW, Room 4014, Washington, DC 20202.



INSTRUCTIONS

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

<p>CORRECT marking example – (Use care to keep characters in their designated spaces.)</p>	<p>INCORRECT marking example –</p>
<p><input type="checkbox"/> 3 <input type="checkbox"/> 5</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> 35 <input type="checkbox"/> 3 <input type="checkbox"/> 5</p> <p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>OR</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>

- This questionnaire may be completed by any staff member who has access to the school's records.
- Please do not write any comments by the answer boxes.
- If you are unsure about how to answer a question, please give the best answer you can rather than leaving it blank.
- If you have any questions, call the U.S. Census Bureau at 1-888-595-1338. Someone will be available to take your call Monday through Friday, between 8:00 a.m. and 8:00 p.m. (Eastern Time). The U.S. Census Bureau is also available to answer your questions via e-mail at: ntps@census.gov.



1. GENERAL INFORMATION ABOUT THIS SCHOOL

1-1. Around October 1, 2020, how many students were enrolled in each of the following grade levels?

🍏 Report only for the school named on the front of this questionnaire.

🍏 Do NOT include postsecondary or adult education students, or children who are enrolled only in day care at this school.

🍏 In column (1), mark (X) "Yes" or "No" for each grade level.

🍏 In column (2), record the number of students for each grade level with "Yes" marked in column (1).

Grade levels	(1) Does this school have students in this grade?	(2) Number of students in this grade
a. Ungraded (including ungraded special education students)	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
b. Nursery and prekindergarten	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
c. Kindergarten (traditional year of school primarily for 5-year-olds prior to first grade)	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
d. Transitional (or readiness) kindergarten (extra year of school for kindergarten-age children who are judged not ready for kindergarten)	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
e. Transitional first (or pre-first) grade (extra year of school for children who have attended kindergarten but have been judged not ready for first grade)	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
f. 1st	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
g. 2nd	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
h. 3rd	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
i. 4th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
j. 5th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
k. 6th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>



1-1. *Continued* – Around October 1, 2020, how many students were enrolled in each of the following grade levels?

Grade levels	(1) Does this school have students in this grade?	(2) Number of students in this grade
l. 7th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
m. 8th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
n. 9th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
o. 10th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
p. 11th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>
q. 12th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/>

1-2. Around October 1, 2020, what was the total number of students enrolled in this school or program?

🍏 *This item should equal to the sum of entries in items 1-1(a-q).*

Enrolled students



1-3. Of the total number of students enrolled in grades K-12 and comparable ungraded levels in this school or program around October 1, 2020, how many students are –

- 🍏 Do NOT include nursery, prekindergarten, postsecondary, or adult education students.
- 🍏 Do NOT include children who are enrolled only in day care at this school or program.
- 🍏 Please only include each student in one category below.
- 🍏 Write '0' if there are no students in this school of a given racial and ethnic origin.

Hispanic or Latino Students

a. Hispanic or Latino Students , Students

Non-Hispanic Students

b. White , Students

c. Black or African American , Students

d. Asian , Students

e. Native Hawaiian or other Pacific Islander , Students

f. American Indian or Alaska Native , Students

g. Two or more races , Students

TOTAL number of students in grades K-12 , Students

1-4a. Is this school or program coeducational?

Yes
 No, it is an all-female school
 No, it is an all-male school

} GO TO item 1-5a on page 7.

b. Of the total number of students enrolled in grades K-12 and comparable ungraded levels in this school or program around October 1, 2020, how many students are MALE?

- 🍏 Do NOT include nursery, prekindergarten, postsecondary, or adult education students.
- 🍏 Do NOT include children who are enrolled only in day care at this school or program.
- 🍏 Write '0' if there were no male students enrolled in this school or program.

, Male students



1-9. Which of the following best describes this school?

🍏 *Mark (X) only one box.*

- REGULAR school – elementary or secondary
- MONTESSORI school
- SPECIAL PROGRAM EMPHASIS school – such as a science or math school, performing arts school, talented or gifted school, foreign language immersion school, etc.
- SPECIAL EDUCATION school – primarily serves students with disabilities
- CAREER/TECHNICAL/VOCATIONAL school – primarily serves students being trained for occupations
- EARLY CHILDHOOD PROGRAM OR DAY CARE CENTER – such as kindergarten only, prekindergarten and kindergarten and transitional first grade only, day care and transitional kindergarten only, etc.
- ALTERNATIVE/OTHER school – offers a curriculum designed to provide alternative or nontraditional education; does not specifically fall into the categories of regular, special program emphasis, special education, or vocational school
Please specify ↴

1-10a. Does this school currently have any students enrolled in kindergarten?

🍏 *Please include regular kindergarten as well as transitional (or readiness) kindergarten and transitional first (or pre-first) grade students, if enrolled.*

- Yes
- No → GO TO item 1-11 below.

b. How long is the school day for a kindergarten, transitional kindergarten, or transitional first grade student?

🍏 *Mark (X) only one box.*

- Full day (4 hours or more per day)
- Half day (less than 4 hours per day)
- Both full-day and half-day programs are offered

c. How many days are in a TYPICAL SCHOOL WEEK for kindergarten, transitional kindergarten, or transitional first grade students in this school?

🍏 *If the number of days per week varies, record the most days that a student would attend in a week.*

Days per TYPICAL SCHOOL WEEK

1-11. Does this school have a library media center?

(A library media center is an organized collection of printed and/or audiovisual and/or computer resources which is administered as a unit, is located in a designated place or places, and makes resources and services available to students, teachers, and administrators. A library media center may be called a school library, media center, resource center, information center, instructional materials center, learning resource center, or any other similar name.)

- Yes
- No



1-12. During the 2019-20 school year, how did COVID-19 affect instruction in this school?

🍏 Mark (X) for all that apply

- There was no change in how classes were taught because of COVID-19
- All or some of the classes normally taught in person at the school were canceled
- All or some of the classes normally taught in person moved to a distance-learning format using online resources, either self-paced or real-time
- All or some of the classes normally taught in person moved into a distance-learning format using paper materials sent home with students
- All or some of the classes normally taught in person changed in some other way
Please specify →

1-13. For classes that were moved into a distance-learning format, was there any real-time interaction between the teachers and students, such as live video conferences?

- Yes
- No
- Not applicable, no classes were moved into a distance-learning format

Now we would like you to think about how classes are normally taught at this school

1-14. Which of the following best describes how classes are normally taught at this school?

🍏 Mark (X) only one box.

- Classes are taught ONLY in person at the school
- Classes are taught in person at the school with some online resources (for example, homework submission or instructional software)
- Classes are taught in person at the school AND at least some classes are available online without in person instruction → [GO TO item 1-16 below.](#)
- Classes are taught only online with no in person classes → [GO TO item 1-17a on page 10.](#)

1-15. Does this school normally offer any classes that are taught entirely online with no in person instruction?

- Yes
- No → [GO TO item 1-17a on page 10.](#)

1-16. About what percentage of students are typically enrolled in at least one online class?

🍏 Mark (X) only one box.

- No students are enrolled in online classes
- 1-10% of students
- 11-25% of students
- 26-50% of students
- 51-75% of students
- 76% or more of students



1-17. Does this school offer the following?

- a. Different instructional approaches (e.g., mixed-ability grouping, self-paced instruction, ungraded classrooms, etc.)**

Yes

No

- b. A dual-language or foreign language immersion program (A program in which the goal of instruction is that students are proficient in two languages)**

🍏 *Do NOT include English as a Second Language (ESL) programs or classes.*

Yes

No

1-18. Are the following before-school or after-school programs or services currently available for students in any of grades K-12, or comparable ungraded levels, regardless of funding source at this school?

- a. A program or service providing instruction beyond the normal school day for students who NEED academic ASSISTANCE**

Yes

No

- b. A program or service providing instruction beyond the normal school day for students who SEEK academic ADVANCEMENT or ENRICHMENT**

Yes

No

- c. Extended-day care**

Yes

No

- d. School-related activities and clubs (e.g., yearbook club, school dance committee, etc.)**

Yes

No

1-19a. Is a major role of this school or program to support homeschooling?

Yes

No

- b. Is this school or program located in a private home that is used primarily as a family residence?**

Yes

No



1-24c. What is this school's or program's religious orientation or affiliation?

🍏 *Mark (X) only one box.*

- Roman Catholic →
- African Methodist Episcopal
- Amish
- Assembly of God
- Baptist
- Brethren
- Calvinist
- Christian (no specific denomination)
- Church of Christ
- Church of God
- Church of God in Christ
- Church of the Nazarene
- Disciples of Christ
- Episcopal
- Friends
- Greek Orthodox
- Islamic
- Jewish
- Latter Day Saints
- Lutheran Church – Missouri Synod
- Evangelical Lutheran Church in America (formerly AELC, ALC, or LCA)
- Wisconsin Evangelical Lutheran Synod
- Other Lutheran
- Mennonite
- Methodist
- Pentecostal
- Presbyterian
- Seventh-Day Adventist
- Other – please specify ↴

Is this school –
 🍏 *Mark (X) only one box.*

- Parochial (or inter-parochial)
- Diocesan
- Private



1-25. To which of the following associations or organizations does this school or program belong?

🍏 *Mark (X) for all that apply.*

This school does NOT belong to ANY associations or organizations → GO TO Section 2 on page 15.

RELIGIOUS

- Accelerated Christian Education (ACE) (or School of Tomorrow)
- American Association of Christian Schools (AACCS)
- Association of Christian Schools International (ACSI)
- Association of Christian Teachers and Schools (ACTS)
- Association of Classical and Christian Schools (ACCS)
- Christian Schools International (CSI)
- Council of Islamic Schools in North America (CISNA)
- Evangelical Lutheran Education Association (ELEA)
- Friends Council on Education (FCE)
- General Conference of the Seventh-Day Adventist Church (GCSDAC)
- Islamic School League of America (ISLA)
- Jesuit Secondary Education Association (JSEA)
- National Association of Episcopal Schools (NAES)
- National Catholic Educational Association (NCEA)
- National Christian School Association (NCSA)
- National Society for Hebrew Day Schools (Torah Umesorah)
- Oral Roberts University Educational Fellowship (ORUEF)
- The Center for Jewish Day Schools (PRIZMAH)
- Southern Baptist Association of Christian Schools (SBACS)
- Other religious school association(s) – please specify ↴



1-25. Continued – To which of the following associations or organizations does this school or program belong?

🍏 *Mark (X) for all that apply.*

SPECIAL EMPHASIS

- American Montessori Society (AMS)
- Association Montessori International (AMI)
- Other Montessori association(s)
- Association of Military Colleges and Schools (AMCS)
- Association of Waldorf Schools of North America (AWSNA)
- National Association of Private Special Education Centers (NAPSEC)
- Other association(s) for exceptional children
- European Council for International Schools (ECIS)
- National Association for the Education of Young Children (NAEYC)
- National Association of Laboratory Schools (NALS)
- National Coalition of Girls Schools (NCGS)
- Other special emphasis association(s) – please specify ↴

OTHER SCHOOL ASSOCIATIONS OR ORGANIZATIONS

- Alternative School Network (ASN)
- National Association of Independent Schools (NAIS)
- State or regional independent school association
- National Independent Private Schools Association (NIPSA)
- The Association of Boarding Schools (TABS)
- Other school association(s) – please specify ↴



2. SCHOOL STAFFING

2-1. Around October 1, 2020, how many staff were teaching in grades K-12 and/or comparable ungraded levels at this school or program in the following time categories?

🍏 Consider only the amount of time an individual works as a teacher of grades K-12 and comparable ungraded levels during a typical week at THIS school or program.

🍏 INCLUDE:

- Teachers who teach subjects such as music, art, physical education, and special education
- Principals or administrators who teach a regularly scheduled class at this school or program

🍏 DO NOT INCLUDE:

- Teachers who teach ONLY nursery, prekindergarten, postsecondary, or adult education
- Student teachers, teacher aides, day care aides, or short-term substitute teachers
- Counselors, library media specialists or librarians, speech therapists, social workers, or administrators UNLESS they also teach a regularly scheduled class at THIS school or program

🍏 Write '0' if no person is teaching in a particular time category.

a. Full-time Teachers	<input type="text"/> <input type="text"/> <input type="text"/>	Teachers
b. Teach at least $\frac{3}{4}$ time but less than full-time	<input type="text"/> <input type="text"/> <input type="text"/>	Teachers
c. Teach at least $\frac{1}{2}$ time but less than $\frac{3}{4}$ time	<input type="text"/> <input type="text"/> <input type="text"/>	Teachers
d. Teach at least $\frac{1}{4}$ time but less than $\frac{1}{2}$ time	<input type="text"/> <input type="text"/> <input type="text"/>	Teachers
e. Teach less than $\frac{1}{4}$ time	<input type="text"/> <input type="text"/> <input type="text"/>	Teachers
f. TOTAL Full- and Part-time Teachers	<input type="text"/> <input type="text"/> <input type="text"/>	Teachers



2-2. Around October 1, 2020, how many staff held full-time or part-time positions or assignments in this school in each of the following categories?

🍏 *Employees who hold more than one position in this school should be counted as part-time staff for each position held. FOR EXAMPLE: If your school's vice principal also serves as a data coach, you would count this person as 1 part-time vice principal (item b) and 1 part-time data coach (item e), even if this person works full-time across the two positions.*

🍏 *Employees shared with other schools should be counted as part-time employees.*

🍏 *If no FULL-TIME or PART-TIME staff members exist, please write '0' in the box under full-time and/or part-time.*

	FULL-TIME	PART-TIME
a. Principals or school heads	<input type="text"/>	<input type="text"/>
b. Vice principals and assistant principals or school heads	<input type="text"/>	<input type="text"/>
c. Instructional coordinators and supervisors, such as curriculum specialists	<input type="text"/>	<input type="text"/>
d. Librarians or library media specialists	<input type="text"/>	<input type="text"/>
e. Data coaches or data coordinators	<input type="text"/>	<input type="text"/>
f. Technology specialists	<input type="text"/>	<input type="text"/>
g. Student support services professional staff		
(1) School/guidance counselors, excluding psychologists and social workers	<input type="text"/>	<input type="text"/>
(2) Nurses	<input type="text"/>	<input type="text"/>
(3) Social workers	<input type="text"/>	<input type="text"/>
(4) Psychologists	<input type="text"/>	<input type="text"/>
(5) Speech therapists or pathologists	<input type="text"/>	<input type="text"/>
(6) Other student support services staff	<input type="text"/>	<input type="text"/>



2-2. *Continued* – Around October 1, 2020, how many staff held full-time or part-time positions or assignments in this school in each of the following categories?

	FULL-TIME	PART-TIME
h. Aides	<input type="text"/>	<input type="text"/>
(1) Regular Title I aides	<input type="text"/>	<input type="text"/>
(2) English as a Second Language (ESL) or bilingual teacher aides	<input type="text"/>	<input type="text"/>
(3) Special education aides	<input type="text"/>	<input type="text"/>
(4) Library media center aides	<input type="text"/>	<input type="text"/>
(5) Other classroom aides	<input type="text"/>	<input type="text"/>
i. Secretaries and other clerical support staff	<input type="text"/>	<input type="text"/>
j. Food service personnel	<input type="text"/>	<input type="text"/>
k. Custodial and maintenance personnel	<input type="text"/>	<input type="text"/>
l. Security guards or security personnel (not law enforcement)	<input type="text"/>	<input type="text"/>
m. School Resource Officers (include all career law enforcement officers with arrest authority, who have specialized training and are assigned to work in collaboration with school organizations)	<input type="text"/>	<input type="text"/>
n. Sworn law enforcement officers who are not School Resource Officers	<input type="text"/>	<input type="text"/>
o. Other employees not reported above	<input type="text"/>	<input type="text"/>



2-3a. Do any of the teachers or staff have the following specialist assignments working with students in this school?**(1) Reading specialist** Yes No**(2) Math specialist** Yes No**(3) Science specialist** Yes No**b. Do any of the teachers or staff have the following coaching assignments working with teachers in this school?**

(Coaching includes observing teachers giving lessons, providing feedback to teachers, and demonstrating teaching strategies)

(1) Reading coach Yes No**(2) Math coach** Yes No**(3) Science coach** Yes No**(4) General instructional/Not subject-specific coach** Yes No

Filter question for item 2-4 (web-only*)

**Note: This item only appears on the web version of the school questionnaire for a subset of school respondents in an experimental manner.*

For THIS school year (2020-21), were there teaching vacancies in this school, that is, teaching positions for which teachers were recruited and interviewed by this school's hiring authority?

- 🍏 *Please include teaching positions that were vacant for the 2020-21 school year and that may or may not have been filled before the start of the 2020-21 school year.*
- 🍏 *Do not include vacancies for teachers who teach ONLY prekindergarten or adult education.*

Yes → [GO TO Item 2-4.](#)

No → [GO TO Item 2-5a.](#)

2-4. For THIS school year (2020-21), how easy or difficult was it to fill teaching vacancies in each of the following fields?

🍏 Please include teaching positions that were vacant for the 2020-21 school year and that may or may not have been filled before the start of the 2020-21 school year.

🍏 Do NOT include vacancies for teachers who teach ONLY prekindergarten or adult education.

🍏 Mark (X) one box on each line.

	This position is not offered in this school	No vacancy in this field this school year	Easy	Somewhat difficult	Very difficult	Could not fill the vacancy
(1) General elementary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) Special education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(3) English or language arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(4) Social studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(5) Computer science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(6) Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(7) Biology or life sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(8) Physical sciences (e.g., chemistry, physics, earth sciences)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(9) English as a Second Language (ESL) or bilingual education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(10) Foreign languages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(11) Music or art	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(12) Career or technical education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(13) Physical education or health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



2-5a. Around October 1, 2020, did you have any newly-hired teachers, that is, employees that were not employed as teachers at THIS SCHOOL last year?

- 🍏 Include all teachers that are new to your school, even if they had previously taught at other schools.
- 🍏 Do NOT include newly-hired teachers who teach ONLY prekindergarten or adult education.

Yes

No → GO TO Section 3 on page 21.

b. How many teachers were newly-hired by this school?

- 🍏 Do NOT include newly-hired teachers who teach ONLY prekindergarten or adult education.
- 🍏 Record HEAD COUNTS, not FTEs (full-time equivalent).

Newly-hired teachers

c. Of those newly-hired teachers, how many were in their first year of teaching?

- 🍏 Record HEAD COUNTS, not FTEs (full-time equivalent).
- 🍏 Write '0' if no newly-hired teachers were in their first year of teaching.

Teachers in their first year of teaching



3. COMMUNITY SERVICE REQUIREMENTS

3-1. Does this school grant high school diplomas?

🍏 *Do NOT include vocational certificates, certificates of attendance, or certificates of completion.*

Yes

No → GO TO Section 4 on page 22.



3-2. For high school graduates of the class of 2021, does this school have a community service requirement for a standard diploma?

Yes

No → GO TO Section 4 on page 22.



3-3. What is the minimum number of community service hours required of the high school graduates in the class of 2021?

Minimum hours of community service



4. SPECIAL PROGRAMS AND SERVICES

4-1a. Of the students enrolled in grades K-12 or comparable ungraded levels in this school, do any have a formally-identified disability?

Yes
 No → GO TO item 4-3a on page 23.

b. How many students in this school have a formally-identified disability?
 🍏 Do NOT include prekindergarten, postsecondary, or adult education students.

, Students with a formally-identified disability

4-2a. Does this school PRIMARILY SERVE students with disabilities?

🍏 If you marked "SPECIAL EDUCATION school - primarily serves students with disabilities" for item 1-9, please mark "Yes" for this item.

Yes → GO TO item 4-3a on page 23.
 No

b. How many students with formally-identified disabilities are in each of the following instructional settings?

🍏 The sum of entries in item 4-2b should equal the entry in item 4-1b above.
 🍏 Write '0' if no student with a formally-identified disability is in a particular instructional setting.

(1) 100% of the school day in a regular classroom

, Students

(2) 80-99% of the school day in a regular classroom

, Students

(3) 40-79% of the school day in a regular classroom

, Students

(4) 0-39% of the school day in a regular classroom

, Students



4-3a. Of the students enrolled in this school as of October 1, 2020, have any been identified as English-language learners (ELL), also known as limited-English proficient (LEP)?

(English language learners (ELLs) or limited-English proficient (LEP) refers to students whose native or dominant language is other than English and who have sufficient difficulty speaking, reading, writing, or understanding the English language as to deny them the opportunity to learn successfully in an English-speaking-only classroom.)

🍏 Do NOT include prekindergarten, postsecondary, or adult education students.

Yes

No → GO TO item 4-6a on page 24.



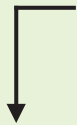
b. How many ELL or LEP students are enrolled in this school?

Students

4-4. Does this school have instruction specifically designed to address the needs of ELL or LEP students?

Yes

No → GO TO item 4-6a on page 24.



4-5a. Are ELL or LEP students taught English using ESL, bilingual, or immersion techniques?

Yes

No

b. Are ELL or LEP students taught English in regular English-speaking classrooms?

Yes

No



4-6a. Does this school participate in the National School Lunch Program (that is, the federal free or reduced-price lunch program)?

Yes

No → GO TO item 4-7 on page 25.



b. Around October 1, 2020, did you have any PREKINDERGARTEN students enrolled in this school?

Yes

No → GO TO item 4-6c below.

(1) How many PREKINDERGARTEN students were enrolled in this school?

Prekindergarten students

(2) What was the percentage of PREKINDERGARTEN students at this school APPROVED for free or reduced-price lunches under the National School Lunch Program?

% of prekindergarten students approved

c. Around October 1, 2020, what was the percentage of K-12 students at this school APPROVED for free or reduced-price lunches under the National School Lunch Program?

% of K-12 students approved



4-7. Around October 1, 2020, did any students enrolled in this school receive Title I services at this school or at any other location?

(Title I is a federally funded program that provides educational services, such as remedial reading or remedial math, to children who live in areas with high concentrations of low-income families.)

- Yes
- No → [GO TO Section 5 on page 26.](#)

4-8a. How many PREKINDERGARTEN students at this school participate in the Title I program?

🍎 Write '0' if no prekindergarten students participate in the Title I program.

Prekindergarten students

b. How many students at this school in GRADES K-12 participate in the Title I program?

🍎 Write '0' if no students in grades K-12 participate in the Title I program.

K-12 students

4-9. Are students receiving Title I services in –

a. Reading or language arts?

- Yes
- No

b. Mathematics?

- Yes
- No

c. English as a Second Language (ESL)?

- Yes
- No



5. CONTACT INFORMATION

5-1. What is the name of the person who completed most of this questionnaire?

5-2. What is his or her job title?

5-3. What is his or her work e-mail address?

5-4. What is the school's phone number?

Area code

Number

5-5. Please verify this school's or program's name and mailing address that are printed on the front of this questionnaire.

If any part of the name and mailing address is incorrect, enter the correction(s), as necessary, in the appropriate space(s) below.

School or program name

Mailing address

City

State

ZIP Code

5-6a. Is the physical or street address of this school or program the same as the mailing address?

Yes → *GO TO item 5-7 on page 27.*

No



b. Please print this school's or program's physical or street address.

Street

City

State

ZIP Code



5-7. Please enter the date your school completed this questionnaire.

MM	DD	YYYY
<input type="text"/>	<input type="text"/>	<input type="text" value="20"/> <input type="text"/>

5-8. Please indicate how much time it took your school to complete this form, not counting interruptions.

🍏 Please record the time in minutes, e.g., 50 minutes, 65 minutes, etc.

<input type="text"/> <input type="text"/> <input type="text"/>	Minutes
--	---------

Thank you very much for your participation in this survey. If you have any questions, please contact us, toll-free, at: 1-888-595-1338 or by e-mail at: ntps@census.gov.

Please return your completed questionnaire in the enclosed pre-addressed, postage-paid envelope or mail it to:

U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001



To learn more about this survey and to access reports from earlier collections, see the National Teacher and Principal Survey (NTPS) website at: <http://nces.ed.gov/surveys/ntps>

Additional data collected by the National Center for Education Statistics (NCES) on a variety of topics in elementary, secondary, postsecondary, and international education are available from NCES' website at: <http://nces.ed.gov>

For additional data collected by various Federal agencies, including the Department of Education, visit the Federal Statistics clearinghouse at: <https://www.usa.gov/statistics>



Conducted by:
U.S. DEPARTMENT OF EDUCATION
NATIONAL CENTER FOR EDUCATION STATISTICS

OMB No. 1850-0598: Approval Expires 03/31/2023

Collected by:
U.S. DEPARTMENT OF COMMERCE
U.S. CENSUS BUREAU

TEACHER QUESTIONNAIRE

NATIONAL TEACHER AND PRINCIPAL SURVEY

2020-21 SCHOOL YEAR



THIS SURVEY HAS BEEN ENDORSED BY:

Please return your completed questionnaire in the pre-addressed, postage-paid envelope or mail it to:




**U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

The National Center for Education Statistics (NCES), within the U.S. Department of Education, is authorized to conduct this survey by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543).



INSTRUCTIONS AND DEFINITIONS

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

CORRECT marking example – <i>(Use care to keep characters in their designated spaces.)</i>	INCORRECT marking example –
	 
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	OR <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

- a. If you are the teacher named on the cover page label, please complete the questionnaire.
- b. Please do not write any comments near the answer boxes.
- c. If you are unsure about how to answer a question, please give the best answer you can rather than leaving it blank.
- d. If you have any questions, call the U.S. Census Bureau at 1-888-595-1338. Someone will be available to take your call Monday through Friday, between 8:00 a.m. and 8:00 p.m. (Eastern Time). The U.S. Census Bureau is also available to answer your questions via e-mail at: ntps@census.gov

Teachers who teach in multiple schools: Please respond to questions as they apply to the school where you received this questionnaire.

Grades K-12 and comparable ungraded levels. This survey focuses on schools offering any of grades K-12 or comparable ungraded levels at the elementary, middle, or secondary level. The term “ungraded levels” refers to schools that classify students by an alternative means other than particular grade levels (e.g., Kindergarten, 1st grade, 2nd grade, etc.).

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).

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this voluntary information collection is 1850-0598. The time required to complete this information collection is estimated to average 40 minutes per response, including the time to review instructions, search existing data resources, 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 collection, or comments or concerns about the contents or the status of your individual submission of this questionnaire, please e-mail: ntps@census.gov, or write directly to: National Teacher and Principal Survey (NTPS), National Center for Education Statistics, Potomac Center Plaza, 550 12th Street, SW, Room 4014, Washington, DC 20202.



1. GENERAL INFORMATION

1-1. How do you classify your position at THIS school?

🍏 If you have more than one position, consider the one at which you spend most of your time.

🍏 Mark (X) only one box.

- 1 Regular full-time teacher (in any of grades K-12 or comparable ungraded levels)
- 2 Regular part-time teacher (in any of grades K-12 or comparable ungraded levels)
- 3 Itinerant teacher (i.e. your assignment requires you to provide instruction at more than one school)
- 4 Long-term substitute (i.e. your assignment requires that you fill the role of a regular teacher on a long-term basis, but you are still considered a substitute)
- 5 Short-term substitute
- 6 Student teacher
- 7 Teacher aide
- 8 Administrator (e.g., principal, assistant principal, director, school head)
- 9 Library media specialist or Librarian
- 10 Other professional staff (e.g., counselor, curriculum coordinator, social worker)
- 11 Support staff (e.g., secretary)

1-2. Which box did you mark in item 1-1 above?

Box 1 → GO TO item 1-5 on page 4.

Box 2, 3, or 4 → GO TO item 1-4 on page 4.

Box 5, 6, or 7 → **Please STOP now and return this questionnaire to the U.S. Census Bureau. Thank you for your time.**

Box 8, 9, 10, or 11



1-3. Do you TEACH one or more classes at THIS school, at least once per week, in any of grades K-12 or comparable ungraded levels?

🍏 If you work as a library media specialist or librarian at this school, do not include classes in which you teach students how to use the library (e.g., library skills or library research).

🍏 If you teach a particular specialty either within or outside of a regular classroom (e.g., reading specialist, special education teacher, English as a Second Language teacher), include that time as a regularly scheduled class.

Yes → GO TO item 1-4 on page 4.

No → **Please STOP now and return this questionnaire to the U.S. Census Bureau. Thank you for your time.**



1-4. How much time do you work as a TEACHER in any of grades K-12 or comparable ungraded levels at THIS school?

🍎 *Mark (X) only one box.*

- Full time
- 3/4 time or more, but less than full-time
- 1/2 time or more, but less than 3/4 time
- 1/4 time or more, but less than 1/2 time
- Less than 1/4 time
- I do not teach any of grades K-12 or comparable ungraded levels →

Please STOP now and return this questionnaire to the U.S. Census Bureau. Thank you for your time.

1-5. During the LAST school year (2019-20), what was your MAIN activity?

🍎 *Mark (X) only ONE box which best applies to how you spent the MOST time LAST school year.*

🍎 *If you were a substitute or itinerant teacher, please mark (X) the box which best applies to your MAIN activity LAST school year.*

- Teaching in this school
- Teaching in another public elementary, middle, or secondary school IN THIS SCHOOL SYSTEM
- Teaching in a public elementary, middle, or secondary school IN A DIFFERENT SCHOOL SYSTEM IN THIS STATE
- Teaching in a public elementary, middle, or secondary school IN ANOTHER STATE
- Teaching in a PRIVATE elementary, middle, or secondary school
- Teaching in a preschool
- Teaching at a college or university
- Student at a college or university
- Working in a position in the field of education, but not as a teacher
- Working in a position outside the field of education
- On leave (e.g., maternity or paternity leave, disability leave, sabbatical)
- Caring for family members, but not on leave (e.g., homemaking, childrearing)
- Military service
- Unemployed and seeking work
- Retired from another job
- Other – please specify →



1-6. When did you begin teaching, either full-time or part-time, at THIS school?

- 🍏 Do NOT include time spent as a student teacher or a substitute teacher.
- 🍏 Enter the month AND year.

MM

YYYY

1-7. When did you FIRST begin teaching, either full-time or part-time, at the K-12 or comparable ungraded level?

- 🍏 Do NOT include time spent as a student teacher or a substitute teacher.
- 🍏 Enter the month AND year.

MM

YYYY

1-8. Excluding time spent on maternity/paternity leave or sabbatical, how many school years have you worked, either full-time or part-time, as a K-12 or comparable ungraded level teacher in public, public charter, or private schools?

- 🍏 Include the current school year.
- 🍏 Do NOT include time spent as a student teacher or a substitute teacher.
- 🍏 Report years to the nearest whole year, not fractions or months.

School years

1-9. In how many schools have you taught, either full-time or part-time, at the K-12 or comparable ungraded level?

- 🍏 Do NOT include time spent as a student teacher or a substitute teacher.

Schools



2. CLASS ORGANIZATION

2-1. Do you currently teach students in any of these grades at THIS school?

🍏 Please mark (X) for all that apply.

Prekindergarten

Kindergarten

1st

2nd

3rd

4th

5th

6th

7th

8th

9th

10th

11th

12th

Ungraded

2-2. Of all the students you teach at THIS school, how many have an Individualized Education Plan (IEP) because they have disabilities or have special needs?

🍏 Do NOT include students who have only a 504 plan.

🍏 Write '0' if you do NOT teach any students with an IEP.

Students with IEPs



- 2-3. Of all the students you teach at THIS school, how many have been identified as English-language learners (ELL), also known as limited-English proficiency (LEP)?**
 (English-language learners [ELLs] or limited-English proficiency [LEP] refers to students whose native or dominant language is other than English and who have sufficient difficulty speaking, reading, writing, or understanding the English language as to deny them the opportunity to learn successfully in an English-speaking-only classroom.)

🍏 Write '0' if you do NOT teach any students that are ELL or LEP.

ELL or LEP Students

- 2-4. Using Table 1 on page 10, this school year, in what subject is your MAIN teaching assignment at THIS school?**

(Your main teaching assignment is the subject matter in which you teach the most classes)

🍏 Record one of the main teaching assignment codes and labels from Table 1 on page 10.

Main Teaching
Assignment Code

Main Teaching
Assignment Label

- 2-5. Are you intentionally assigned to instruct the same group of students for more than one year (e.g., looping)?**

Yes

No

- 2-6a. During any of your classes, do you have students use instructional software to learn some or all of their lessons?**

Yes

No → GO TO item 2-7 on page 8.



- b. Does any of the instructional software the students use AUTOMATICALLY ADJUST the level of instruction to an individual student's performance?**

Yes

No



2-7. Which statement best describes the way YOUR classes at THIS school are organized?

🍏 *Mark (X) only one box.*

- 1 You instruct several classes of different students most or all of the day in one or more subjects.
- 2 You are an elementary school teacher who teaches only one subject to different classes of students.
- 3 You instruct the same group of students all or most of the day in multiple subjects.
- 4 You are one of two or more teachers, in the same class, at the same time, and are jointly responsible for teaching the same group of students all or most of the day.
- 5 You instruct a small number of selected students released from or in their regular classes in specific skills or to address specific needs.

2-8. Which box did you mark in item 2-7 above?

Box 1 or 2 → *GO TO item 2-12 on page 11.*

Box 3 or 4

Box 5 → *GO TO item 2-10 below.*

2-9. During your most recent FULL WEEK of teaching at THIS school, what is the total number of students enrolled in the class you taught?

🍏 *If you teach more than one self-contained class, report the number from your class with the most students.*

Students → *GO TO item 2-11 on page 9.*

2-10. During your most recent FULL WEEK of teaching at THIS school, what is the average number of students you taught at any one time?

Students



2-11. During your most recent FULL WEEK of teaching, approximately how many minutes did YOU spend teaching each of the following subjects at THIS school?

🍎 *If you taught two or more subjects at the same time, divide the time between each subject the best you can.*

🍎 *Write '0' in the "Minutes per day" box if you did not teach a particular subject during the week.*

a. English, reading, or language arts (including reading and writing)

Minutes per day		Days per week
<input type="text"/>	for	<input type="text"/>

b. Of these English, reading, or language arts (including reading and writing) minutes, how many were designated for reading instruction?

Minutes per day		Days per week
<input type="text"/>	for	<input type="text"/>

c. Arithmetic or mathematics

Minutes per day		Days per week
<input type="text"/>	for	<input type="text"/>

d. Social studies or history

Minutes per day		Days per week
<input type="text"/>	for	<input type="text"/>

e. Science

Minutes per day		Days per week
<input type="text"/>	for	<input type="text"/>

GO TO Section 3 on page 12.



**Table 1. Main Teaching Assignment and Subject-matter Codes and Labels
For Questions 2-4 and 2-13**

General Education Codes and Labels

Elementary Education

- 101 Early childhood or pre-K, general
102 Elementary grades, general
103 Middle grades, general

Special Education

- 110 Special education, any

Subject-matter Specific Codes and Labels

Arts and Music

- 141 Art or arts and crafts
142 Art history
143 Dance
144 Drama or theater
145 Music

English and Language Arts

- 151 Communications
152 Composition
153 English
154 Journalism
155 Language arts
157 Literature or literary criticism
158 Reading
159 Speech

English as a Second Language (ESL)

- 160 ESL or bilingual education: General
161 ESL or bilingual education: Spanish
162 ESL or bilingual education: Other languages

Foreign Languages

- 171 French
172 German
173 Latin
174 Spanish
175 Other foreign language

Health Education

- 181 Health education
182 Physical education

Mathematics and Computer Science

- 191 Algebra I
192 Algebra II
193 Algebra III
194 Basic and general mathematics
195 Business and applied math
196 Calculus and pre-calculus
197 Computer science
198 Geometry
199 Pre-algebra
200 Statistics and probability
201 Trigonometry

Natural Sciences

- 210 Science, general
211 Biology or life sciences
212 Chemistry
213 Earth sciences
214 Engineering
215 Integrated science
216 Physical sciences
217 Physics
218 Other natural sciences

Social Sciences

- 220 Social studies, general
221 Anthropology
222 Area or ethnic studies (excluding Native American studies)
225 Economics
226 Geography
227 Government or civics
228 History
231 Native American studies
232 Political Science
233 Psychology
234 Sociology
235 Other social sciences

Career or Technical Education

- 241 Agriculture and natural resources
242 Business management
243 Business support
244 Marketing and distribution
245 Healthcare occupations
246 Construction trades, engineering, or science technologies (including CADD and drafting)
247 Mechanics and repair
249 Manufacturing or precision production (electronics, metalwork, textiles, etc.)
250 Communications and related technologies (including design, graphics, or printing; not including computer science)
253 Personal and public services (including culinary arts, cosmetology, child care, social work, protective services, custodial services, and interior design)
254 Family and consumer sciences education
255 Industrial arts or technology education
256 Other career or technical education

Miscellaneous

- 262 Driver education
264 Library or information science
265 Military science or ROTC
266 Philosophy
267 Religious studies, theology, or divinity

Other

- 268 Other



NOTE: Items 2-12 and 2-13 are for teachers who marked box 1 or 2 for item 2-7 on page 8.

If you marked box 3, 4, or 5 for item 2-7 → **GO TO Section 3 on page 12.**

2-12. How many separate class periods or sections do you currently teach at THIS school?

🍏 Do NOT include homeroom periods or study halls.

(Example: If you teach 2 classes or sections of chemistry I, a class or section of physics I, and a class or section of physics II, you would report 04 classes or sections.)

Number of classes or sections

2-13. Using Table 1 on page 10, for EACH class period or section that you reported in item 2-12, record the subject-matter code, subject-matter label, grade level code, and number of students.

🍏 If you teach a class or section with more than one grade level, list the grade level with the most students in column C and record the total number of students in column D.

🍏 If you reported more than 10 periods or sections in item 2-12, report on only 10 of those periods or sections.

	A. Subject-Matter Code from Table 1	B. Subject-Matter Label from Table 1, one for EACH class period	C. Grade Level Code from list below	D. Number of Students
Example	<input type="text" value="192"/>	<input type="text" value="Algebra II"/>	<input type="text" value="11"/>	<input type="text" value="33"/>
(1)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(2)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(3)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(4)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(5)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(6)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(7)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(8)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(9)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(10)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Grade Level Codes

If your class period or section has students from more than one grade level (i.e., MIXED GRADES), please list the grade with the most students.

PK	Prekindergarten	07	7th grade
KG	Kindergarten	08	8th grade
01	1st grade	09	9th grade
02	2nd grade	10	10th grade
03	3rd grade	11	11th grade
04	4th grade	12	12th grade
05	5th grade	UG	Ungraded
06	6th grade		



3. EDUCATION AND TRAINING

3-1a. Do you have a bachelor's degree?

- Yes
 No → GO TO item 3-3 on page 15.

b. What is the name of the college or university where you earned this degree?

If you have more than one bachelor's degree, information about additional degrees will be asked in item 3-3 on page 15.

Name of college or university

In what city and state is it located?

City

State

Located outside the United States

c. In what year did you receive your bachelor's degree?

Year

d. Was your bachelor's degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended?

Yes

No

e. Using Table 2 on page 13, what was your major field of study?

Major Field of Study Code

Major Field of Study Label

f. Did you have a second major field of study?

Do NOT report academic minors or concentrations.

Yes

No → GO TO item 3-1h on page 14.

g. Using Table 2 on page 13, what was your second major field of study?

Do NOT report academic minors or concentrations.

Major Field of Study Code

Major Field of Study Label



**Table 2. Major and Minor Fields of Study Codes and Labels
For Questions 3-1e, 3-1g, 3-1i, 3-2e, and 3-3b**

General Education Codes and Labels

Elementary Education

- 101 Early childhood or pre-K, general
102 Elementary grades, general

Secondary Education

- 103 Middle grades, general
104 Secondary grades, general

Special Education

- 110 Special education, any

Other Education

- 131 Administration
132 Counseling and guidance
133 Educational psychology
134 Policy studies
135 School psychology
136 Other non-subject-matter-specific education
137 Curriculum and instruction

Subject-matter Specific Codes and Labels

Arts and Music

- 141 Art or arts and crafts
142 Art history
143 Dance
144 Drama or theater
145 Music

English and Language Arts

- 151 Communications
152 Composition
153 English
154 Journalism
155 Language arts
156 Linguistics
157 Literature or literary criticism
158 Reading
159 Speech

English as a Second Language (ESL)

- 160 ESL or bilingual education: General
161 ESL or bilingual education: Spanish
162 ESL or bilingual education: Other languages

Foreign Languages

- 171 French
172 German
173 Latin
174 Spanish
175 Other foreign language

Health Education

- 181 Health education
182 Physical education

Mathematics and Computer Science

- 190 Mathematics
197 Computer science
200 Statistics and probability

Natural Sciences

- 211 Biology or life sciences
212 Chemistry
213 Earth sciences
214 Engineering
217 Physics
218 Other natural sciences

Social Sciences

- 220 Social studies, general
221 Anthropology

- 222 Area or ethnic studies (excluding Native American studies)
223 Criminal justice
224 Cultural studies
225 Economics
226 Geography
227 Government or civics
228 History
229 International studies
230 Law
231 Native American studies
232 Political science
233 Psychology
234 Sociology
235 Other social sciences

Career or Technical Education

- 241 Agriculture and natural resources
242 Business management
243 Business support
244 Marketing and distribution
245 Healthcare occupations
246 Construction trades, engineering, or science technologies (including CADD and drafting)
247 Mechanics and repair
249 Manufacturing or precision production (electronics, metalwork, textiles, etc.)
250 Communications and related technologies (including design, graphics, or printing; not including computer science)
253 Personal and public services (including culinary arts, cosmetology, child care, social work, protective services, custodial services, and interior design)
254 Family and consumer sciences education
255 Industrial arts or technology education
256 Other career or technical education

Miscellaneous


- 261 Architecture
263 Humanities or liberal studies
264 Library or information science
265 Military science or ROTC
266 Philosophy
267 Religious studies, theology, or divinity

Other

- 268 Other



3-1h. Did you have a minor field of study? Yes No → GO TO item 3-2a below.**i. Using Table 2 on page 13, what was your minor field of study?**Minor Field
of Study CodeMinor Field
of Study Label**3-2a. Do you have a master's degree?** Yes No → GO TO item 3-3 on page 15.**b. Was at least a portion of the cost of your master's degree paid for by a STATE, SCHOOL DISTRICT, or SCHOOL in which you taught?**

 *If you have more than one master's degree, information about additional degrees will be asked in item 3-3 on page 15.*

 Yes No**c. In what year did you receive your master's degree?**

Year

d. Was your master's degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended? Yes No**e. Using Table 2 on page 13, what was your major field of study for your master's degree?**Major Field
of Study CodeMajor Field
of Study Label

3-3. Have you earned any of the degrees or certificates listed below?

Yes
 No → GO TO item 3-4 on page 16.

a. Degree or certificate	b. Using Table 2 on page 13, what was your major field of study for each degree or certificate?	c. Which of the following best describes each degree or certificate?	d. In what year?
(1) Vocational certificate	Major Field of Study Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Major Field of Study Label <input type="text" value=""/>		Year <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
(2) Associate's degree	Major Field of Study Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Major Field of Study Label <input type="text" value=""/>		Year <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
(3) SECOND Bachelor's degree	Major Field of Study Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Major Field of Study Label <input type="text" value=""/>	Was your degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended? <input type="checkbox"/> Yes <input type="checkbox"/> No	Year <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
(4) SECOND Master's degree	Major Field of Study Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Major Field of Study Label <input type="text" value=""/>	Was your degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended? <input type="checkbox"/> Yes <input type="checkbox"/> No	Year <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
(5) Educational specialist or professional diploma (at least one year beyond a master's level)	Major Field of Study Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Major Field of Study Label <input type="text" value=""/>	Was your degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended? <input type="checkbox"/> Yes <input type="checkbox"/> No	Year <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
(6) Certificate of Advanced Graduate Studies	Major Field of Study Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Major Field of Study Label <input type="text" value=""/>	Was your degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended? <input type="checkbox"/> Yes <input type="checkbox"/> No	Year <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
(7) Doctorate or first professional degree (Ph.D., Ed.D., M.D., J.D., D.D.S.)	Major Field of Study Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Major Field of Study Label <input type="text" value=""/>	Was your degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended? <input type="checkbox"/> Yes <input type="checkbox"/> No	Year <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>



3-4a. Have you ever taken any undergraduate or graduate courses that focused SOLELY on teaching methods?

🍎 Do NOT include student teaching (sometimes called practice teaching).

🍎 Do NOT include professional development courses, workshops, or seminars.

- Yes
- No → GO TO item 3-5 below.

b. How many undergraduate or graduate courses focused SOLELY on teaching methods?

🍎 Mark (X) only one box.

- 1 or 2 courses
- 3 or 4 courses
- 5 to 9 courses
- 10 or more courses

c. Did you take any of these courses before your first year of teaching?

- Yes
- No

3-5. BEFORE your first year of teaching, did you take any graduate or undergraduate courses which taught you —

a. Classroom management techniques?

- Yes
- No

b. Lesson planning?

- Yes
- No

c. How to assess learning?

- Yes
- No

d. How to use student performance data to inform instruction?

- Yes
- No

e. How to serve students from diverse economic backgrounds?

- Yes
- No



3-5. *Continued* – **BEFORE** your first year of teaching, did you take any graduate or undergraduate courses which taught you —

f. How to serve students with special needs?

Yes

No

g. How to teach students who are English-language learners (ELLs) or limited-English proficient (LEP)?

Yes

No

3-6a. Did you spend time student teaching (sometimes called practice teaching)?

Yes

No → **GO TO Section 4 on page 18.**



b. In how many different classrooms did you student teach?

🍏 *Mark (X) only one box.*

1

2

3 or more

c. How long did your student teaching last?

🍏 *If you student taught in more than one classroom, report the total amount of time spent student teaching across all assignments.*

🍏 *Mark (X) only one box.*

4 weeks or less

5-7 weeks

8-11 weeks

12 weeks or more



4. CERTIFICATION

4-1. Did you enter teaching through an alternative route to certification program?

(An alternative route to certification program is a program that was designed to expedite the transition of nonteachers to a teaching career, for example, a state, district, or university alternative route to certification program.)

- Yes
- No

The next series of questions is about state certification. This section allows teachers to report UP TO TWO current teaching certificates in the state where they are teaching, plus several content areas per certificate, if applicable. Those who have only one certificate that applies to only one content area DO NOT have to fill out the entire section and should follow the GO TO instructions.

4-2a. Which of the following describes the teaching certificate you currently hold that certifies you to teach in THIS state?

🍏 Mark (X) only one box.

🍏 If you currently hold more than one of the following, a second certification may be listed in item 4-3.

- Regular or standard state certificate or advanced professional certificate
- Certificate issued after satisfying all requirements except the completion of a probationary period (in some states this is called a probationary certificate)
- Certificate that requires some additional coursework, student teaching, or passage of a test before regular certification can be obtained (in some states this is called a temporary or provisional certificate)
- Certificate issued to persons who must complete a certification program in order to continue teaching (in some states this is called a waiver or emergency certificate)
- I do not hold any of the above certifications in THIS state → GO TO Section 5 on page 22.

b. Using Table 3 on page 19, in what content area(s) and grade range(s) does the teaching certificate marked above certify you to teach in THIS state?

(For some teachers, the content area may be special education or the grade level.)

🍏 If this certificate certifies you to teach in more than one content area, you may report additional content areas in later items.

🍏 If your certificate does not restrict you to a specific grade range(s), mark (X) all three grade ranges.

(1) Content Area	(2) Grade Range of Certificate (Mark (X) all that apply)
<p>Content Area Code</p> <div style="border: 1px solid black; padding: 5px; width: 60px; display: flex; justify-content: space-around;"> </div> <p>Content Area Label</p> <div style="border: 1px solid black; height: 25px; width: 100%;"></div>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5</p> <p><input type="checkbox"/> At least one of grades 6-8</p> <p><input type="checkbox"/> At least one of grades 9-12</p>

c. Does this certificate marked in item 4-2a certify you to teach in additional content areas?

- Yes → GO TO item 4-2d on page 20.
- No → GO TO item 4-3a on page 20.



Table 3. Certification Content Area Codes and Labels For Questions 4-2b, 4-2d, 4-3c, and 4-3e**General Education Codes and Labels****Elementary Education**

- 101 Early childhood or Pre-K, general
- 102 Elementary grades, general
- 103 Middle grades, general

Secondary Education

- 103 Middle grades, general
- 104 Secondary grades, general

Special Education

- 111 Special education, general
- 112 Autism
- 113 Deaf and hard-of-hearing
- 114 Developmentally delayed
- 115 Early childhood special education
- 116 Emotionally disturbed or behavior disorders

Special Education – Continued

- 117 Learning disabilities
- 118 Intellectual disabilities
- 119 Mildly or moderately disabled
- 120 Orthopedically impaired
- 121 Severely or profoundly disabled
- 122 Speech or language impaired
- 123 Traumatologically brain-injured
- 124 Visually impaired
- 125 Other special education

General Administration

- 131 Administration
- 132 Counseling and guidance

Subject-matter Specific Codes and Labels**Arts and Music**

- 141 Art or arts and crafts
- 142 Art History
- 143 Dance
- 144 Drama or theater
- 145 Music

English and Language Arts

- 151 Communications
- 152 Composition
- 153 English
- 154 Journalism
- 155 Language arts
- 157 Literature or literary criticism
- 158 Reading
- 159 Speech

English as a Second Language (ESL)

- 160 ESL or bilingual education: General
- 161 ESL or bilingual education: Spanish
- 162 ESL or bilingual education: Other languages

Foreign Languages

- 171 French
- 172 German
- 173 Latin
- 174 Spanish
- 175 Other foreign language

Health Education

- 181 Health education
- 182 Physical education

Mathematics and Computer Science

- 190 Mathematics
- 197 Computer science
- 200 Statistics and probability

Natural Sciences

- 210 Science, general
- 211 Biology or life sciences
- 212 Chemistry
- 213 Earth sciences
- 216 Physical sciences
- 217 Physics
- 218 Other natural sciences

Social Sciences

- 220 Social studies, general
- 221 Anthropology
- 222 Area or ethnic studies (excluding Native American studies)
- 225 Economics
- 226 Geography
- 227 Government or civics
- 228 History
- 231 Native American studies
- 232 Political Science
- 233 Psychology
- 234 Sociology
- 235 Other social sciences

Career or Technical Education

- 241 Agriculture and natural resources
- 242 Business management
- 243 Business support
- 244 Marketing and distribution
- 245 Healthcare occupations
- 246 Construction trades, engineering, or science technologies (including CADD and drafting)
- 247 Mechanics and repair
- 249 Manufacturing or precision production (electronics, metalwork, textiles, etc.)
- 250 Communications and related technologies (including design, graphics or printing; not including computer science)
- 253 Personal and public services (including culinary arts, cosmetology, child care, social work, protective services, custodial services, and interior design)
- 254 Family and consumer sciences education
- 255 Industrial arts or technology education
- 256 Other career or technical education

Miscellaneous

- 262 Driver education
- 263 Humanities or liberal studies
- 264 Library or information science
- 265 Military science or ROTC
- 266 Philosophy
- 267 Religious studies, theology, or divinity

Other

- 268 Other



NOTE: Item 4-2d is for teachers who marked Yes for item 4-2c on page 18.

If you marked No for item 4-2c → **GO TO item 4-3a on page 20.**

4-2. Continued –

d. Using Table 3 on page 19, please record all ADDITIONAL content areas and grade ranges in which this certificate certifies you to teach:

☛ If your certificate does not restrict you to a specific range(s), mark (X) all three ranges.

Additional Content Area	Grade Range of Certificate (Mark (X) all that apply)
<p>(1) Content Area Code</p> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;"> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <p>Content Area Label</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5</p> <p><input type="checkbox"/> At least one of grades 6-8</p> <p><input type="checkbox"/> At least one of grades 9-12</p>
<p>(2) Content Area Code</p> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;"> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <p>Content Area Label</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5</p> <p><input type="checkbox"/> At least one of grades 6-8</p> <p><input type="checkbox"/> At least one of grades 9-12</p>
<p>(3) Content Area Code</p> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;"> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <p>Content Area Label</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5</p> <p><input type="checkbox"/> At least one of grades 6-8</p> <p><input type="checkbox"/> At least one of grades 9-12</p>
<p>(4) Content Area Code</p> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;"> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <p>Content Area Label</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5</p> <p><input type="checkbox"/> At least one of grades 6-8</p> <p><input type="checkbox"/> At least one of grades 9-12</p>

4-3a. Do you have another current teaching certificate that certifies you to teach in THIS state?

- Yes
- No → **GO TO Section 5 on page 22.**

b. Which of the following describes this current teaching certificate you hold in THIS state?

☛ Mark (X) only one box.

- Regular or standard state certificate or advanced professional certificate
- Certificate issued after satisfying all requirements except the completion of a probationary period (in some states this is called a probationary certificate)
- Certificate that requires some additional coursework, student teaching, or passage of a test before regular certification can be obtained (in some states this is called a temporary or provisional certificate)
- Certificate issued to persons who must complete a certification program in order to continue teaching (in some states this is called a waiver or emergency certificate)



4-3. Continued –

c. Using Table 3 on page 19, in what content area(s) and grade range(s) does the teaching certificate marked in question 4-3b on page 20 certify you to teach in THIS state?

(For some teachers, the content area may be special education or the grade level.)

🍎 If this certificate certifies you to teach in more than one content area, you may report additional content areas in later items.

🍎 If your certificate does not restrict you to a specific grade range(s), mark (X) all three grade ranges.

(1) Content Area	(2) Grade Range of Certificate (Mark (X) all that apply)
Content Area Code <input type="text" value=""/> Content Area Label <input type="text"/>	<input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12

d. Does this certificate marked in item 4-3b certify you to teach in additional content areas?

Yes

No → GO TO Section 5 on page 22.

e. Using Table 3 on page 19, please record all ADDITIONAL content areas and grade ranges in which this certificate certifies you to teach:

🍎 If your certificate does not restrict you to a specific grade range(s), mark (X) all three grade ranges.

Additional Content Area	Grade Range of Certificate (Mark (X) all that apply)
(1) Content Area Code <input type="text" value=""/> Content Area Label <input type="text"/>	<input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12
(2) Content Area Code <input type="text" value=""/> Content Area Label <input type="text"/>	<input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12
(3) Content Area Code <input type="text" value=""/> Content Area Label <input type="text"/>	<input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12
(4) Content Area Code <input type="text" value=""/> Content Area Label <input type="text"/>	<input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12



5. EARLY CAREER EXPERIENCES

- 5-1. Was your FIRST year of teaching before the 2016-2017 school year?**
 🍎 Do NOT include time spent as a student teacher or a substitute teacher.

Yes → GO TO Section 6 on page 26.

No

- 5-2. What was your MAIN activity the year before you began teaching at the K-12 or comparable ungraded level?**

🍎 Mark (X) only one box.

Student at a college or university

Working as a substitute teacher

Teaching in a preschool

Teaching at a college or university

→ GO TO item 5-4 on page 23.

Working in a position in the field of education, but not as a teacher

Working in an occupation outside the field of education

Caring for family members

Military service

Unemployed and seeking work

Retired from another job

→ GO TO item 5-4 on page 23.

- 5-3a. What kind of work did you do, that is, what was your occupation?**

🍎 Please record your job title; for example, electrical engineer, cashier, typist, farmer, loan officer.

- b. What were your most important activities or duties on that job?**

🍎 For example, typing, selling cars, driving delivery truck, caring for livestock.

- c. How would you classify yourself on that job?**

🍎 Mark (X) only one box.

An employee of a PRIVATE company, business, or individual for wages, salary, or commission

A FEDERAL government employee

A STATE government employee

A LOCAL government employee

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

Working WITHOUT PAY in a family business or farm

Working WITHOUT PAY in a volunteer job



- 5-4. In your FIRST year of teaching, how well prepared were you to —**
 🍎 *If you are in your first year of teaching, please answer for THIS school year.*
 🍎 *Mark (X) one box on each line.*

	Not at all prepared	Somewhat prepared	Well prepared	Very well prepared
a. Handle a range of classroom management or discipline situations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Use a variety of instructional methods?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Teach your subject matter?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Use computers in classroom instruction?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Assess students?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Differentiate instruction in the classroom?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Use data from student assessments to inform instruction?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Teach to state content standards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Teach students who are limited-English proficient [LEP] or English-language learners [ELLs]?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Teach students with special needs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- 5-5. In your FIRST year of teaching, did you participate in a FORMAL schoolwide or districtwide program for beginning teachers aimed to enhance teachers' effectiveness by providing systematic support (sometimes called a teacher induction program)?**

🍎 *If you are in your first year of teaching, please answer for THIS school year.*

Yes

No



5-6. Did you receive the following kinds of support during your FIRST year of teaching?

🍏 *If you are in your first year of teaching, please answer for THIS school year.*

a. Reduced teaching schedule or number of preparations Yes No**b. Common planning time with teachers in your subject** Yes No**c. Seminars or classes for beginning teachers** Yes No**d. Extra classroom assistance (e.g., teacher aides)** Yes No**e. Regular supportive communication with your principal, other administrators, or department chair** Yes No**f. Observation and feedback on your teaching aimed at helping you develop and refine your teaching practice BEYOND any formal administrative observation and feedback you may have received** Yes No**g. Release time to participate in support activities for new or beginning teachers** Yes No

5-7a. In your FIRST year of teaching, were you ASSIGNED a master or mentor teacher by your school or district?

🍎 *If you are in your first year of teaching, please answer for THIS school year.*

- Yes
- No → GO TO Section 6 on page 26.

b. How frequently did you work with your assigned master or mentor teacher during your first year of teaching?

- At least once a week
- Once or twice a month
- A few times a year
- Never

c. Had your assigned master or mentor teacher ever instructed students in the same subject area(s) as yours?

- Yes
- No

5-8. Did your assigned master or mentor teacher provide the following types of support during your FIRST year of teaching?

🍎 *If you are in your first year of teaching, please answer for THIS school year.*

a. Helped with paperwork or record keeping

- Yes
- No

b. Demonstrated lessons

- Yes
- No

c. Helped you prepare lessons that address learning standards

- Yes
- No

d. Helped you develop student assessment tools

- Yes
- No

5-9. Overall, to what extent did your assigned master or mentor teacher improve your teaching in your first year of teaching?

🍎 *Mark (X) only one box.*

- Not at all
- To a small extent
- To a moderate extent
- To a great extent



6. TEACHER WORKING CONDITIONS

6-1. How many hours does your contract require you to work during a typical FULL WEEK at THIS school?

🍏 *This would be base contract hours, or the equivalent, NOT including stipends or extra pay for extra duty.*

🍏 *Report to the nearest whole hour.*

Total WEEKLY hours required to work

6-2. Of the hours you are CONTRACTED to work, excluding time spent on planning, lunch, break/recess, arrival/dismissal of students, and otherwise NOT delivering instruction, how many hours during a typical full week do you DELIVER INSTRUCTION to students in THIS school?

🍏 *This number should be less than the reported number of hours in 6-1.*

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

🍏 *Report to the nearest whole hour.*

Total WEEKLY hours delivering instruction

6-3. Including hours spent during the school day, before and after school, and on the weekends, how many hours do you spend on ALL teaching and other school-related activities during a typical FULL WEEK at THIS school?

🍏 *This number should be greater than or equal to the reported number of hours in 6-1.*

🍏 *Report to the nearest whole hour.*

Total WEEKLY hours spent on all teaching and school-related activities



7. SCHOOL CLIMATE AND TEACHER ATTITUDES

7-1. During the 2019-20 school year, how did COVID-19 affect how you delivered instruction in this school?

🍏 *Mark (X) for all that apply*

- I was not a teacher at this school during the 2019-20 school year
- There was no change in how my classes were taught because of COVID-19
- All or some of my classes normally taught in person at the school were canceled
- All or some of my classes normally taught in person moved to a distance-learning format using online resources, either self-paced or real-time
- All or some of my classes normally taught in person moved to a distance-learning format using paper materials sent home with students
- All or some of my classes normally taught in person changed in some other way
Please specify →

7-2. To what extent do you agree or disagree with the following statement: I had the support and resources I needed to be effective as a teacher at this school during the COVID-19 pandemic in the 2019-20 school year.

- Strongly disagree
- Somewhat disagree
- Somewhat agree
- Strongly agree

7-3. During the COVID-19 pandemic in the 2019-20 school year, what kinds of real-time interactions, if any, did you have with your students?

🍏 *Mark (X) for all that apply*

- I had no real-time interactions with students during the COVID-19 pandemic in the 2019-20 school year
- I taught scheduled real-time lessons to classes who could ask questions during the lesson through a video or audio call
- I held scheduled sessions with groups of students to provide support through a video or audio call
- I held scheduled one-on-one sessions with individual students to teach lessons or provide support through a video or audio call
- I held scheduled office hours where students could ask questions through a video or audio call
- I had unscheduled sessions with students as needed through a video or audio call

7-4. What percentage of your students did you have any real-time interaction with during the coronavirus (COVID-19) pandemic in the 2019-20 school year?

- 1-25%
- 26-50%
- 51-75%
- 76-100%



7-5. How much actual influence do you think teachers have over school policy AT THIS SCHOOL in each of the following areas?

🍏 Mark (X) one box on each line.

	No influence	Minor influence	Moderate influence	A great deal of influence
a. Setting performance standards for students at this school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Establishing curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Determining the content of in-service professional development programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Evaluating teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Hiring new full-time teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Setting discipline policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Deciding how the school budget will be spent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7-6. How much actual control do you have IN YOUR CLASSROOM at this school over the following areas of your planning and teaching?

🍏 Mark (X) one box on each line.

	No control	Minor control	Moderate control	A great deal of control
a. Selecting textbooks and other instructional materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Selecting content, topics, and skills to be taught	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Selecting teaching techniques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Evaluating and grading students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Disciplining students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Determining the amount of homework to be assigned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



7-7. To what extent do you agree or disagree with each of the following statements?

🍏 *Mark (X) one box on each line.*

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. The school administration's behavior toward the staff is supportive and encouraging.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I am satisfied with my teaching salary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The level of student misbehavior in this school (such as noise, horseplay or fighting in the halls, cafeteria, or student lounge) interferes with my teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I receive a great deal of support from parents for the work I do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Necessary materials such as textbooks, supplies, and copy machines are available as needed by the staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Routine duties and paperwork interfere with my job of teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. My principal enforces school rules for student conduct and backs me up when I need it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Rules for student behavior are consistently enforced by teachers in this school, even for students who are not in their classes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Most of my colleagues share my beliefs and values about what the central mission of the school should be.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. The principal knows what kind of school he or she wants and has communicated it to the staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. There is a great deal of cooperative effort among the staff members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. In this school, staff members are recognized for a job well done.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. I worry about the security of my job because of the performance of my students or my school on state and/or local tests.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. State or district content standards have had a positive influence on my satisfaction with teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. I am given the support I need to teach students with special needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. The amount of student tardiness and class cutting in this school interferes with my teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. I am generally satisfied with being a teacher at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. I make a conscious effort to coordinate the content of my courses with that of other teachers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



7-8. To what extent is each of the following a problem in THIS school?

🍎 *Mark (X) one box on each line.*

	Not a problem	Minor problem	Moderate problem	Serious problem
a. Student tardiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Student absenteeism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Student class cutting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Teacher absenteeism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Students dropping out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Student apathy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Lack of parental involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Poverty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Students come to school unprepared to learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Poor student health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


7-9. To what extent do you agree or disagree with each of the following statements?

🍎 *Mark (X) one box on each line.*

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. The stress and disappointments involved in teaching at this school aren't really worth it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The teachers at this school like being here; I would describe us as a satisfied group.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I like the way things are run at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. If I could get a higher paying job I'd leave teaching as soon as possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I think about transferring to another school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I don't seem to have as much enthusiasm now as I did when I began teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. I think about staying home from school because I'm just too tired to go.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



7-10. Which statement best describes how long you plan to remain in teaching?

 Mark (X) only one box.

- As long as I am able
- Until I am eligible for retirement benefits from this job
- Until I am eligible for retirement benefits from a previous job
- Until I am eligible for Social Security benefits
- Until a specific life event occurs (e.g., parenthood, marriage, retirement of spouse or partner)
- Until a more desirable job opportunity comes along
- Definitely plan to leave as soon as I can
- Undecided at this time

7-11a. Has a student FROM THIS SCHOOL ever threatened to injure you?

- Yes
- No → *GO TO item 7-12a below.*

b. Has a student FROM THIS SCHOOL threatened to injure you IN THE PAST 12 MONTHS?

- Yes
- No → *GO TO item 7-12a below.*

c. In the past 12 months, how many times has a student FROM THIS SCHOOL threatened to injure you?

Times

7-12a. Has a student FROM THIS SCHOOL ever physically attacked you?

- Yes
- No → *GO TO item 7-13 below.*

b. Has a student FROM THIS SCHOOL physically attacked you IN THE PAST 12 MONTHS?

- Yes
- No → *GO TO item 7-13 below.*


c. In the past 12 months, how many times has a student FROM THIS SCHOOL physically attacked you?

Times

7-13. In general, would you say that your health is: Excellent, Very good, Good, Fair, or Poor?

- Excellent
- Very good
- Good
- Fair
- Poor

7-14. On average, how many hours of sleep do you get in a typical school night?

 Report to the nearest whole hour.

Total average hours sleeping



8. GENERAL EMPLOYMENT AND BACKGROUND INFORMATION

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

8-1. DURING THE SUMMER OF 2020, did you have any earnings from —
 🍏 *Report amounts in whole dollars.*

a. Teaching summer school in this school or any other school?

- Yes →
- No

How much?

\$, .00

(1) Did all of these earnings come from your current school?

- Yes
- No

GO TO item 8-1b below.

b. Working in a non-teaching job in this school or any other school?

- Yes →
- No

How much?

\$, .00

(1) Did all of these earnings come from your current school?

- Yes
- No

GO TO item 8-1c below.

c. Working in any NONSCHOOL job?

- Yes →
- No

How much?

\$, .00

GO TO item 8-2 below.

8-2. How many days are covered by your contract, per contract year?

🍏 *Include professional development, student contact days, and any other days covered by your contract.*

Days per contract year

8-3. DURING THE CURRENT SCHOOL YEAR, what is your base teaching salary for the entire school year?

🍏 *Report amounts in whole dollars.*

\$, .00 For the entire school year



8-13. Please indicate whether your student loan debt has influenced your employment plans and decisions in any of the following ways. Did you —

a. Have to work at more than one job at the same time because of your student loan debt?

Yes

No

b. Take a less desirable job because of your student loan debt?

Yes

No

8-14. Are you a member of a teachers' union or an employee association similar to a union?

Yes

No

8-15a. Does your school, district, or school system offer tenure?

Yes

No → *GO TO Section 9 on page 37.*



b. Are you tenured at your current school?

Yes

No



9. TEACHER DEMOGRAPHIC INFORMATION

9-1. Are you male or female?

Male

Female

9-2. Are you of Hispanic or Latino origin?

Yes

No

9-3. What is your race?

🍏 *Mark (X) one or more races to indicate what you consider yourself to be.*

White

Black or African-American

Asian

Native Hawaiian or Other Pacific Islander

American Indian or Alaska Native

9-4. What is your year of birth?



10. CONTACT INFORMATION

10-1. Please enter the date you completed this questionnaire.

MM	DD	YYYY
<input type="text"/>	<input type="text"/>	<input type="text" value="20"/> <input type="text"/>

10-2. Please indicate how much time it took you to complete this form, not counting interruptions.

 Please record the time in minutes, e.g., 50 minutes, 65 minutes, etc.

<input type="text"/>	Minutes
----------------------	---------

10-3. Please PRINT your name, your home address, your cell and home telephone numbers, the most convenient time to reach you, and your work and home e-mail addresses. This information would only be used in the event that we need to contact you for follow-up. 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).

a. First name

Middle name

Last name

Suffix

b. Street Address

c. City

d. State

e. ZIP Code



f. Cell phone number

Area code Number

			-				-				
--	--	--	---	--	--	--	---	--	--	--	--

 I consent to receive text messages for follow-up purposes only.**g. Home phone number**

Area code Number

			-				-				
--	--	--	---	--	--	--	---	--	--	--	--

h. Best day(s) to reach you *Mark (X) for all that apply.* Monday Tuesday Wednesday Thursday Friday Saturday Sunday**i. Best time of the day to reach you** *Mark (X) only one box.* a.m. p.m.**j. Work e-mail address****k. Home e-mail address**

Thank you very much for your participation in this survey. If you have any questions, please contact us, toll-free, at: 1-888-595-1338 or by e-mail at: ntps@census.gov

Please return your completed questionnaire in the enclosed pre-addressed, postage-paid envelope or mail it to:

U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001

To learn more about this survey and to access reports from earlier collections, see the National Teacher and Principal Survey (NTPS) website at: <http://nces.ed.gov/surveys/ntps>

Additional data collected by the National Center for Education Statistics (NCES) on a variety of topics in elementary, secondary, postsecondary, and international education are available from NCES' website at: <http://nces.ed.gov>

For additional data collected by various Federal agencies, including the Department of Education, visit the Federal Statistics clearinghouse at: <https://www.usa.gov/statistics>



Conducted by:
U.S. DEPARTMENT OF EDUCATION
NATIONAL CENTER FOR EDUCATION STATISTICS

OMB No. 1850-0598: Approval Expires 03/31/2023

Collected by:
U.S. DEPARTMENT OF COMMERCE
U.S. CENSUS BUREAU

PRIVATE TEACHER QUESTIONNAIRE NATIONAL TEACHER AND PRINCIPAL SURVEY 2020-21 SCHOOL YEAR



THIS SURVEY HAS BEEN ENDORSED BY:

Please return your completed questionnaire in the pre-addressed, postage-paid envelope or mail it to:

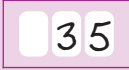

**U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

The National Center for Education Statistics (NCES), within the U.S. Department of Education, is authorized to conduct this survey by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543).



INSTRUCTIONS AND DEFINITIONS

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

CORRECT marking example – <i>(Use care to keep characters in their designated spaces.)</i>	INCORRECT marking example –
	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	OR <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

- a. If you are the teacher named on the cover page label, please complete the questionnaire.
- b. Please do not write any comments near the answer boxes.
- c. If you are unsure about how to answer a question, please give the best answer you can rather than leaving it blank.
- d. If you have any questions, call the U.S. Census Bureau at 1-888-595-1338. Someone will be available to take your call Monday through Friday, between 8:00 a.m. and 8:00 p.m. (Eastern Time). The U.S. Census Bureau is also available to answer your questions via e-mail at: ntps@census.gov

Teachers who teach in multiple schools: Please respond to questions as they apply to the school where you received this questionnaire.

Grades K-12 and comparable ungraded levels. This survey focuses on schools offering any of grades K-12 or comparable ungraded levels at the elementary, middle, or secondary level. The term “ungraded levels” refers to schools that classify students by an alternative means other than particular grade levels (e.g., Kindergarten, 1st grade, 2nd grade, etc.).

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).

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this voluntary information collection is 1850-0598. The time required to complete this information collection is estimated to average 40 minutes per response, including the time to review instructions, search existing data resources, 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 collection, or comments or concerns about the contents or the status of your individual submission of this questionnaire, please e-mail: ntps@census.gov, or write directly to: National Teacher and Principal Survey (NTPS), National Center for Education Statistics, Potomac Center Plaza, 550 12th Street, SW, Room 4014, Washington, DC 20202.



1. GENERAL INFORMATION

1-1. How do you classify your position at THIS school?

- 🍏 If you have more than one position, consider the one at which you spend most of your time.
- 🍏 Mark (X) only one box.

- 1 Regular full-time teacher (in any of grades K-12 or comparable ungraded levels)
- 2 Regular part-time teacher (in any of grades K-12 or comparable ungraded levels)
- 3 Itinerant teacher (i.e. your assignment requires you to provide instruction at more than one school)
- 4 Long-term substitute (i.e. your assignment requires that you fill the role of a regular teacher on a long-term basis, but you are still considered a substitute)
- 5 Short-term substitute
- 6 Student teacher
- 7 Teacher aide
- 8 Administrator (e.g., principal, assistant principal, director, school head)
- 9 Library media specialist or Librarian
- 10 Other professional staff (e.g., counselor, curriculum coordinator, social worker)
- 11 Support staff (e.g., secretary)

1-2. Which box did you mark in item 1-1 above?

- Box 1 → GO TO item 1-5 on page 4.
- Box 2, 3, or 4 → GO TO item 1-4 on page 4.
- Box 5, 6, or 7 → **Please STOP now and return this questionnaire to the U.S. Census Bureau. Thank you for your time.**
- Box 8, 9, 10, or 11



1-3. Do you TEACH one or more classes at THIS school, at least once per week, in any of grades K-12 or comparable ungraded levels?

- 🍏 If you work as a library media specialist or librarian at this school, do not include classes in which you teach students how to use the library (e.g., library skills or library research).
- 🍏 If you teach a particular specialty either within or outside of a regular classroom (e.g., reading specialist, special education teacher, English as a Second Language teacher), include that time as a regularly scheduled class.

- Yes → GO TO item 1-4 on page 4.
- No → **Please STOP now and return this questionnaire to the U.S. Census Bureau. Thank you for your time.**



1-4. How much time do you work as a TEACHER in any of grades K-12 or comparable ungraded levels at THIS school?

🍎 *Mark (X) only one box.*

- Full time
- 3/4 time or more, but less than full-time
- 1/2 time or more, but less than 3/4 time
- 1/4 time or more, but less than 1/2 time
- Less than 1/4 time
- I do not teach any of grades K-12 or comparable ungraded levels →

Please STOP now and return this questionnaire to the U.S. Census Bureau. Thank you for your time.

1-5. During the LAST school year (2019-20), what was your MAIN activity?

🍎 *Mark (X) only ONE box which best applies to how you spent the MOST time LAST school year.*

🍎 *If you were a substitute or itinerant teacher, please mark (X) the box which best applies to your MAIN activity LAST school year.*

- Teaching in this school
- Teaching in another private elementary, middle, or secondary school IN THIS STATE
- Teaching in a private elementary, middle, or secondary school IN ANOTHER STATE
- Teaching in a PUBLIC elementary, middle, or secondary school
- Teaching in a preschool
- Teaching at a college or university
- Student at a college or university
- Working in a position in the field of education, but not as a teacher
- Working in a position outside the field of education
- On leave (e.g., maternity or paternity leave, disability leave, sabbatical)
- Caring for family members, but not on leave (e.g., homemaking, childrearing)
- Military service
- Unemployed and seeking work
- Retired from another job
- Other – please specify →



1-6. When did you begin teaching, either full-time or part-time, at THIS school?

- 🍏 Do NOT include time spent as a student teacher or a substitute teacher.
- 🍏 Enter the month AND year.

MM

YYYY

1-7. When did you FIRST begin teaching, either full-time or part-time, at the K-12 or comparable ungraded level?

- 🍏 Do NOT include time spent as a student teacher or a substitute teacher.
- 🍏 Enter the month AND year.

MM

YYYY

1-8. Excluding time spent on maternity/paternity leave or sabbatical, how many school years have you worked, either full-time or part-time, as a K-12 or comparable ungraded level teacher in public, public charter, or private schools?

- 🍏 Include the current school year.
- 🍏 Do NOT include time spent as a student teacher or a substitute teacher.
- 🍏 Report years to the nearest whole year, not fractions or months.

School years

1-9. In how many schools have you taught, either full-time or part-time, at the K-12 or comparable ungraded level?

- 🍏 Do NOT include time spent as a student teacher or a substitute teacher.

Schools



2. CLASS ORGANIZATION

2-1. Do you currently teach students in any of these grades at THIS school?

🍏 Please mark (X) for all that apply.

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

2-2. Of all the students you teach at THIS school, how many have a formally-identified disability?

🍏 Write '0' if you do NOT teach any students with a formally-identified disability.

Students with a formally-identified disability



- 2-3. Of all the students you teach at THIS school, how many have been identified as English-language learners (ELL), also known as limited-English proficiency (LEP)?**
 (English-language learners [ELLs] or limited-English proficiency [LEP] refers to students whose native or dominant language is other than English and who have sufficient difficulty speaking, reading, writing, or understanding the English language as to deny them the opportunity to learn successfully in an English-speaking-only classroom.)

🍏 Write '0' if you do NOT teach any students that are ELL or LEP.

ELL or LEP Students

- 2-4. Using Table 1 on page 10, this school year, in what subject is your MAIN teaching assignment at THIS school?**

(Your main teaching assignment is the subject matter in which you teach the most classes)

🍏 Record one of the main teaching assignment codes and labels from Table 1 on page 10.

Main Teaching
Assignment Code

Main Teaching
Assignment Label

- 2-5. Are you intentionally assigned to instruct the same group of students for more than one year (e.g., looping)?**

Yes

No

- 2-6a. During any of your classes, do you have students use instructional software to learn some or all of their lessons?**

Yes

No → GO TO item 2-7 on page 8.



- b. Does any of the instructional software the students use AUTOMATICALLY ADJUST the level of instruction to an individual student's performance?**

Yes

No



2-7. Which statement best describes the way YOUR classes at THIS school are organized?

🍏 *Mark (X) only one box.*

- 1 You instruct several classes of different students most or all of the day in one or more subjects.
- 2 You are an elementary school teacher who teaches only one subject to different classes of students.
- 3 You instruct the same group of students all or most of the day in multiple subjects.
- 4 You are one of two or more teachers, in the same class, at the same time, and are jointly responsible for teaching the same group of students all or most of the day.
- 5 You instruct a small number of selected students released from or in their regular classes in specific skills or to address specific needs.

2-8. Which box did you mark in item 2-7 above?

Box 1 or 2 → *GO TO item 2-12 on page 11.*

Box 3 or 4

Box 5 → *GO TO item 2-10 below.*

2-9. During your most recent FULL WEEK of teaching at THIS school, what is the total number of students enrolled in the class you taught?

🍏 *If you teach more than one self-contained class, report the number from your class with the most students.*

Students → *GO TO item 2-11 on page 9.*

2-10. During your most recent FULL WEEK of teaching at THIS school, what is the average number of students you taught at any one time?

Students



2-11. During your most recent FULL WEEK of teaching, approximately how many minutes did YOU spend teaching each of the following subjects at THIS school?

- 🍎 *If you taught two or more subjects at the same time, divide the time between each subject the best you can.*
- 🍎 *Write '0' in the "Minutes per day" box if you did not teach a particular subject during the week.*

a. English, reading, or language arts (including reading and writing)

Minutes per day		Days per week
<input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/>	for	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>

b. Of these English, reading, or language arts (including reading and writing) minutes, how many were designated for reading instruction?

Minutes per day		Days per week
<input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/>	for	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>

c. Arithmetic or mathematics

Minutes per day		Days per week
<input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/>	for	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>

d. Social studies or history

Minutes per day		Days per week
<input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/>	for	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>

e. Science

Minutes per day		Days per week
<input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/>	for	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>

GO TO Section 3 on page 12.



**Table 1. Main Teaching Assignment and Subject-matter Codes and Labels
For Questions 2-4 and 2-13**

General Education Codes and Labels

Elementary Education

101 Early childhood or pre-K, general
102 Elementary grades, general
103 Middle grades, general

Special Education

110 Special education, any

Subject-matter Specific Codes and Labels

Arts and Music

141 Art or arts and crafts
142 Art history
143 Dance
144 Drama or theater
145 Music

English and Language Arts

151 Communications
152 Composition
153 English
154 Journalism
155 Language arts
157 Literature or literary criticism
158 Reading
159 Speech

English as a Second Language (ESL)

160 ESL or bilingual education: General
161 ESL or bilingual education: Spanish
162 ESL or bilingual education: Other languages

Foreign Languages

171 French
172 German
173 Latin
174 Spanish
175 Other foreign language

Health Education

181 Health education
182 Physical education

Mathematics and Computer Science

191 Algebra I
192 Algebra II
193 Algebra III
194 Basic and general mathematics
195 Business and applied math
196 Calculus and pre-calculus
197 Computer science
198 Geometry
199 Pre-algebra
200 Statistics and probability
201 Trigonometry

Natural Sciences

210 Science, general
211 Biology or life sciences
212 Chemistry
213 Earth sciences
214 Engineering
215 Integrated science
216 Physical sciences
217 Physics
218 Other natural sciences

Social Sciences

220 Social studies, general
221 Anthropology
222 Area or ethnic studies (excluding Native American studies)
225 Economics
226 Geography
227 Government or civics
228 History
231 Native American studies
232 Political Science
233 Psychology
234 Sociology
235 Other social sciences

Career or Technical Education

241 Agriculture and natural resources
242 Business management
243 Business support
244 Marketing and distribution
245 Healthcare occupations
246 Construction trades, engineering, or science technologies (including CADD and drafting)
247 Mechanics and repair
249 Manufacturing or precision production (electronics, metalwork, textiles, etc.)
250 Communications and related technologies (including design, graphics, or printing; not including computer science)
253 Personal and public services (including culinary arts, cosmetology, child care, social work, protective services, custodial services, and interior design)
254 Family and consumer sciences education
255 Industrial arts or technology education
256 Other career or technical education

Miscellaneous

262 Driver education
264 Library or information science
265 Military science or ROTC
266 Philosophy
267 Religious studies, theology, or divinity

Other

268 Other



NOTE: Items 2-12 and 2-13 are for teachers who marked box 1 or 2 for item 2-7 on page 8.

If you marked box 3, 4, or 5 for item 2-7 → **GO TO Section 3 on page 12.**

2-12. How many separate class periods or sections do you currently teach at THIS school?

🍏 Do NOT include homeroom periods or study halls.

(Example: If you teach 2 classes or sections of chemistry I, a class or section of physics I, and a class or section of physics II, you would report 04 classes or sections.)

Number of classes or sections

2-13. Using Table 1 on page 10, for EACH class period or section that you reported in item 2-12, record the subject-matter code, subject-matter label, grade level code, and number of students.

🍏 If you teach a class or section with more than one grade level, list the grade level with the most students in column C and record the total number of students in column D.

🍏 If you reported more than 10 periods or sections in item 2-12, report on only 10 of those periods or sections.

	A. Subject-Matter Code from Table 1	B. Subject-Matter Label from Table 1, one for EACH class period	C. Grade Level Code from list below	D. Number of Students
Example	<input type="text" value="192"/>	<input type="text" value="Algebra II"/>	<input type="text" value="11"/>	<input type="text" value="33"/>
(1)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(2)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(3)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(4)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(5)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(6)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(7)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(8)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(9)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(10)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Grade Level Codes

If your class period or section has students from more than one grade level (i.e., MIXED GRADES), please list the grade with the most students.

PK	Prekindergarten	07	7th grade
KG	Kindergarten	08	8th grade
01	1st grade	09	9th grade
02	2nd grade	10	10th grade
03	3rd grade	11	11th grade
04	4th grade	12	12th grade
05	5th grade	UG	Ungraded
06	6th grade		



3. EDUCATION AND TRAINING

3-1a. Do you have a bachelor's degree?

Yes

No → GO TO item 3-3 on page 15.



b. What is the name of the college or university where you earned this degree?

If you have more than one bachelor's degree, information about additional degrees will be asked in item 3-3 on page 15.

Name of college or university

In what city and state is it located?

City

State

Located outside the United States

c. In what year did you receive your bachelor's degree?

 Year

d. Was your bachelor's degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended?

Yes

No

e. Using Table 2 on page 13, what was your major field of study?

Major Field
of Study Code

Major Field
of Study Label

f. Did you have a second major field of study?

Do NOT report academic minors or concentrations.

Yes

No → GO TO item 3-1h on page 14.



g. Using Table 2 on page 13, what was your second major field of study?

Do NOT report academic minors or concentrations.

Major Field
of Study Code

Major Field
of Study Label



**Table 2. Major and Minor Fields of Study Codes and Labels
For Questions 3-1e, 3-1g, 3-1i, 3-2e, and 3-3b**

General Education Codes and Labels

Elementary Education

- 101 Early childhood or pre-K, general
102 Elementary grades, general

Secondary Education

- 103 Middle grades, general
104 Secondary grades, general

Special Education

- 110 Special education, any

Other Education

- 131 Administration
132 Counseling and guidance
133 Educational psychology
134 Policy studies
135 School psychology
136 Other non-subject-matter-specific education
137 Curriculum and instruction

Subject-matter Specific Codes and Labels

Arts and Music

- 141 Art or arts and crafts
142 Art history
143 Dance
144 Drama or theater
145 Music

English and Language Arts

- 151 Communications
152 Composition
153 English
154 Journalism
155 Language arts
156 Linguistics
157 Literature or literary criticism
158 Reading
159 Speech

English as a Second Language (ESL)

- 160 ESL or bilingual education: General
161 ESL or bilingual education: Spanish
162 ESL or bilingual education: Other languages

Foreign Languages

- 171 French
172 German
173 Latin
174 Spanish
175 Other foreign language

Health Education

- 181 Health education
182 Physical education

Mathematics and Computer Science

- 190 Mathematics
197 Computer science
200 Statistics and probability

Natural Sciences

- 211 Biology or life sciences
212 Chemistry
213 Earth sciences
214 Engineering
217 Physics
218 Other natural sciences

Social Sciences

- 220 Social studies, general
221 Anthropology

- 222 Area or ethnic studies (excluding Native American studies)
223 Criminal justice
224 Cultural studies
225 Economics
226 Geography
227 Government or civics
228 History
229 International studies
230 Law
231 Native American studies
232 Political science
233 Psychology
234 Sociology
235 Other social sciences

Career or Technical Education

- 241 Agriculture and natural resources
242 Business management
243 Business support
244 Marketing and distribution
245 Healthcare occupations
246 Construction trades, engineering, or science technologies (including CADD and drafting)
247 Mechanics and repair
249 Manufacturing or precision production (electronics, metalwork, textiles, etc.)
250 Communications and related technologies (including design, graphics, or printing; not including computer science)
253 Personal and public services (including culinary arts, cosmetology, child care, social work, protective services, custodial services, and interior design)
254 Family and consumer sciences education
255 Industrial arts or technology education
256 Other career or technical education

Miscellaneous

- 261 Architecture
263 Humanities or liberal studies
264 Library or information science
265 Military science or ROTC
266 Philosophy
267 Religious studies, theology, or divinity

Other

- 268 Other



3-1h. Did you have a minor field of study? Yes No → [GO TO item 3-2a below.](#)**i. Using Table 2 on page 13, what was your minor field of study?**Minor Field
of Study CodeMinor Field
of Study Label**3-2a. Do you have a master's degree?** Yes No → [GO TO item 3-3 on page 15.](#)**b. Was at least a portion of the cost of your master's degree paid for by a STATE, SCHOOL DISTRICT, or SCHOOL in which you taught?**

If you have more than one master's degree, information about additional degrees will be asked in item 3-3 on page 15.

 Yes No**c. In what year did you receive your master's degree?**

Year

d. Was your master's degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended? Yes No**e. Using Table 2 on page 13, what was your major field of study for your master's degree?**Major Field
of Study CodeMajor Field
of Study Label

3-3. Have you earned any of the degrees or certificates listed below?

Yes
 No → GO TO item 3-4 on page 16.

a. Degree or certificate	b. Using Table 2 on page 13, what was your major field of study for each degree or certificate?	c. Which of the following best describes each degree or certificate?	d. In what year?
(1) Vocational certificate	Major Field of Study Code <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> Major Field of Study Label <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>		Year <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/>
(2) Associate's degree	Major Field of Study Code <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> Major Field of Study Label <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>		Year <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/>
(3) SECOND Bachelor's degree	Major Field of Study Code <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> Major Field of Study Label <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	Was your degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended? <input type="checkbox"/> Yes <input type="checkbox"/> No	Year <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/>
(4) SECOND Master's degree	Major Field of Study Code <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> Major Field of Study Label <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	Was your degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended? <input type="checkbox"/> Yes <input type="checkbox"/> No	Year <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/>
(5) Educational specialist or professional diploma (at least one year beyond a master's level)	Major Field of Study Code <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> Major Field of Study Label <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	Was your degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended? <input type="checkbox"/> Yes <input type="checkbox"/> No	Year <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/>
(6) Certificate of Advanced Graduate Studies	Major Field of Study Code <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> Major Field of Study Label <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	Was your degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended? <input type="checkbox"/> Yes <input type="checkbox"/> No	Year <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/>
(7) Doctorate or first professional degree (Ph.D., Ed.D., M.D., J.D., D.D.S.)	Major Field of Study Code <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> Major Field of Study Label <input style="width: 100%; height: 20px; border: 1px solid black;" type="text"/>	Was your degree awarded by the College of Education, School of Education, or Department of Education at the college or university you attended? <input type="checkbox"/> Yes <input type="checkbox"/> No	Year <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/>



3-4a. Have you ever taken any undergraduate or graduate courses that focused SOLELY on teaching methods?

🍎 Do NOT include student teaching (sometimes called practice teaching).

🍎 Do NOT include professional development courses, workshops, or seminars.

- Yes
- No → GO TO item 3-5 below.

b. How many undergraduate or graduate courses focused SOLELY on teaching methods?

🍎 Mark (X) only one box.

- 1 or 2 courses
- 3 or 4 courses
- 5 to 9 courses
- 10 or more courses

c. Did you take any of these courses before your first year of teaching?

- Yes
- No

3-5. BEFORE your first year of teaching, did you take any graduate or undergraduate courses which taught you —

a. Classroom management techniques?

- Yes
- No

b. Lesson planning?

- Yes
- No

c. How to assess learning?

- Yes
- No

d. How to use student performance data to inform instruction?

- Yes
- No

e. How to serve students from diverse economic backgrounds?

- Yes
- No



3-5. *Continued* – **BEFORE** your first year of teaching, did you take any graduate or undergraduate courses which taught you —

f. How to serve students with special needs?

Yes

No

g. How to teach students who are English-language learners (ELLs) or limited-English proficient (LEP)?

Yes

No

3-6a. Did you spend time student teaching (sometimes called practice teaching)?

Yes

No → **GO TO Section 4 on page 18.**



b. In how many different classrooms did you student teach?

🍏 *Mark (X) only one box.*

1

2

3 or more

c. How long did your student teaching last?

🍏 *If you student taught in more than one classroom, report the total amount of time spent student teaching across all assignments.*

🍏 *Mark (X) only one box.*

4 weeks or less

5-7 weeks

8-11 weeks

12 weeks or more



4. CERTIFICATION

4-1. Did you enter teaching through an alternative route to certification program?

(An alternative route to certification program is a program that was designed to expedite the transition of nonteachers to a teaching career, for example, a state, district, or university alternative route to certification program.)

- Yes
- No

The next series of questions is about certification. This section allows teachers to report UP TO THREE current teaching certificates plus several content areas per certificate, if applicable. Those who have only one certificate that applies to only one content area DO NOT have to fill out the entire section and should follow the GO TO instructions.

4-2a. Do you currently hold regular or full certification by an accrediting or certifying body OTHER THAN THE STATE?

🍏 Information about state-granted certification will be asked in item 4-3.

- Yes
- No → GO TO item 4-3a on page 20.

b. Using Table 3 on page 19, in what content area(s) and grade range(s) does the teaching certificate marked above certify you to teach?

(For some teachers, the content area may be special education or the grade level.)

🍏 If this certificate certifies you to teach in more than one content area, you may report additional content areas in later items.

🍏 If your certificate does not restrict you to a specific grade range(s), mark (X) all three grade ranges.

(1) Content Area

Content Area Code

Content Area Label

(2) Grade Range of Certificate (Mark (X) all that apply)

- Early childhood, preschool, or at least one of grades K-5
- At least one of grades 6-8
- At least one of grades 9-12

c. Does this certificate marked in item 4-2a certify you to teach in additional content areas?

- Yes → GO TO item 4-2d on page 20.
- No → GO TO item 4-3a on page 20.



Table 3. Certification Content Area Codes and Labels For Questions 4-2b, 4-2d, 4-3c, and 4-3e**General Education Codes and Labels**

Elementary Education	Special Education – Continued
101 Early childhood or Pre-K, general	117 Learning disabilities
102 Elementary grades, general	118 Intellectual disabilities
103 Middle grades, general	119 Mildly or moderately disabled
Secondary Education	120 Orthopedically impaired
103 Middle grades, general	121 Severely or profoundly disabled
104 Secondary grades, general	122 Speech or language impaired
Special Education	123 Traumatologically brain-injured
111 Special education, general	124 Visually impaired
112 Autism	125 Other special education
113 Deaf and hard-of-hearing	General Administration
114 Developmentally delayed	131 Administration
115 Early childhood special education	132 Counseling and guidance
116 Emotionally disturbed or behavior disorders	

Subject-matter Specific Codes and Labels

Arts and Music	Social Sciences
141 Art or arts and crafts	220 Social studies, general
142 Art History	221 Anthropology
143 Dance	222 Area or ethnic studies (excluding Native American studies)
144 Drama or theater	225 Economics
145 Music	226 Geography
English and Language Arts	227 Government or civics
151 Communications	228 History
152 Composition	231 Native American studies
153 English	232 Political Science
154 Journalism	233 Psychology
155 Language arts	234 Sociology
157 Literature or literary criticism	235 Other social sciences
158 Reading	Career or Technical Education
159 Speech	241 Agriculture and natural resources
English as a Second Language (ESL)	242 Business management
160 ESL or bilingual education: General	243 Business support
161 ESL or bilingual education: Spanish	244 Marketing and distribution
162 ESL or bilingual education: Other languages	245 Healthcare occupations
Foreign Languages	246 Construction trades, engineering, or science technologies (including CADD and drafting)
171 French	247 Mechanics and repair
172 German	249 Manufacturing or precision production (electronics, metalwork, textiles, etc.)
173 Latin	250 Communications and related technologies (including design, graphics or printing; not including computer science)
174 Spanish	253 Personal and public services (including culinary arts, cosmetology, child care, social work, protective services, custodial services, and interior design)
175 Other foreign language	254 Family and consumer sciences education
Health Education	255 Industrial arts or technology education
181 Health education	256 Other career or technical education
182 Physical education	Miscellaneous
Mathematics and Computer Science	262 Driver education
190 Mathematics	263 Humanities or liberal studies
197 Computer science	264 Library or information science
200 Statistics and probability	265 Military science or ROTC
Natural Sciences	266 Philosophy
210 Science, general	267 Religious studies, theology, or divinity
211 Biology or life sciences	Other
212 Chemistry	268 Other
213 Earth sciences	
216 Physical sciences	
217 Physics	
218 Other natural sciences	



NOTE: Item 4-2d is for teachers who marked Yes for item 4-2c on page 18.

If you marked No for item 4-2c → [GO TO item 4-3a on page 20.](#)

4-2. Continued –

d. Using Table 3 on page 19, please record all ADDITIONAL content areas and grade ranges in which this certificate certifies you to teach:

🍏 If your certificate does not restrict you to a specific range(s), mark (X) all three ranges.

Additional Content Area	Grade Range of Certificate (Mark (X) all that apply)
<p>(1) Content Area Code</p> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;"> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <p>Content Area Label</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5</p> <p><input type="checkbox"/> At least one of grades 6-8</p> <p><input type="checkbox"/> At least one of grades 9-12</p>
<p>(2) Content Area Code</p> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;"> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <p>Content Area Label</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5</p> <p><input type="checkbox"/> At least one of grades 6-8</p> <p><input type="checkbox"/> At least one of grades 9-12</p>
<p>(3) Content Area Code</p> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;"> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <p>Content Area Label</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5</p> <p><input type="checkbox"/> At least one of grades 6-8</p> <p><input type="checkbox"/> At least one of grades 9-12</p>
<p>(4) Content Area Code</p> <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 60px; text-align: center;"> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px; margin-right: 5px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <p>Content Area Label</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5</p> <p><input type="checkbox"/> At least one of grades 6-8</p> <p><input type="checkbox"/> At least one of grades 9-12</p>

4-3a. Do you have another current teaching certificate that certifies you to teach in THIS state?

- Yes
- No → [GO TO Section 5 on page 24.](#)

b. Which of the following describes this current teaching certificate you hold in THIS state?

🍏 Mark (X) only one box.

- Regular or standard state certificate or advanced professional certificate
- Certificate issued after satisfying all requirements except the completion of a probationary period (in some states this is called a probationary certificate)
- Certificate that requires some additional coursework, student teaching, or passage of a test before regular certification can be obtained (in some states this is called a temporary or provisional certificate)
- Certificate issued to persons who must complete a certification program in order to continue teaching (in some states this is called a waiver or emergency certificate)
- I do not hold any of the above certifications in THIS state → [GO TO Section 5 on page 24.](#)



4-3. Continued –

c. Using Table 3 on page 19, in what content area(s) and grade range(s) does the teaching certificate marked in question 4-3b on page 20 certify you to teach in THIS state?

(For some teachers, the content area may be special education or the grade level.)

🍎 If this certificate certifies you to teach in more than one content area, you may report additional content areas in later items.

🍎 If your certificate does not restrict you to a specific grade range(s), mark (X) all three grade ranges.

(1) Content Area	(2) Grade Range of Certificate (Mark (X) all that apply)
Content Area Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Content Area Label <input type="text"/>	<input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12

d. Does this certificate marked in item 4-3b certify you to teach in additional content areas?

Yes

No → GO TO item 4-4a on page 22.

e. Using Table 3 on page 19, please record all ADDITIONAL content areas and grade ranges in which this certificate certifies you to teach:

🍎 If your certificate does not restrict you to a specific grade range(s), mark (X) all three grade ranges.

Additional Content Area	Grade Range of Certificate (Mark (X) all that apply)
(1) Content Area Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Content Area Label <input type="text"/>	<input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12
(2) Content Area Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Content Area Label <input type="text"/>	<input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12
(3) Content Area Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Content Area Label <input type="text"/>	<input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12
(4) Content Area Code <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> Content Area Label <input type="text"/>	<input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12



4-4a. Do you have another current teaching certificate that certifies you to teach in THIS state? Yes No → **GO TO Section 5 on page 24.****b. Which of the following describes this current teaching certificate you hold in THIS state?**🍏 *Mark (X) only one box.* Regular or standard state certificate or advanced professional certificate Certificate issued after satisfying all requirements except the completion of a probationary period (in some states this is called a probationary certificate) Certificate that requires some additional coursework, student teaching, or passage of a test before regular certification can be obtained (in some states this is called a temporary or provisional certificate) Certificate issued to persons who must complete a certification program in order to continue teaching (in some states this is called a waiver or emergency certificate)**c. Using Table 3 on page 19, in what content area(s) and grade range(s) does the teaching certificate marked in question 4-4b above certify you to teach in THIS state?**

(For some teachers, the content area may be the grade level.)

🍏 *If this certificate certifies you to teach in more than one content area, you may report additional content areas in later items.*🍏 *If your certificate does not restrict you to a specific grade range(s), mark (X) all three grade ranges.***(1) Content Area**

Content Area Code

Content Area Label

(2) Grade Range of Certificate (Mark (X) all that apply) Early childhood, preschool, or at least one of grades K-5 At least one of grades 6-8 At least one of grades 9-12**d. Does this certificate marked in item 4-4b certify you to teach in additional content areas?** Yes → **GO TO item 4-4e on page 23.** No → **GO TO Section 5 on page 24.**

4-4. *Continued –*

e. Using Table 3 on page 19, please record all ADDITIONAL content areas and grade ranges in which this certificate certifies you to teach:

🍎 If your certificate does not restrict you to a specific grade range(s), mark (X) all three grade ranges.

Additional Content Area	Grade Range of Certificate (<i>Mark (X) all that apply</i>)
<p>(1) Content Area Code <input type="text" value=""/> Content Area Label <input type="text"/></p>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12</p>
<p>(2) Content Area Code <input type="text" value=""/> Content Area Label <input type="text"/></p>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12</p>
<p>(3) Content Area Code <input type="text" value=""/> Content Area Label <input type="text"/></p>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12</p>
<p>(4) Content Area Code <input type="text" value=""/> Content Area Label <input type="text"/></p>	<p><input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 <input type="checkbox"/> At least one of grades 6-8 <input type="checkbox"/> At least one of grades 9-12</p>



5. EARLY CAREER EXPERIENCES

- 5-1. Was your FIRST year of teaching before the 2016-2017 school year?**
 🍎 Do NOT include time spent as a student teacher or a substitute teacher.

Yes → GO TO Section 6 on page 28.

No

- 5-2. What was your MAIN activity the year before you began teaching at the K-12 or comparable ungraded level?**

🍎 Mark (X) only one box.

Student at a college or university

Working as a substitute teacher

Teaching in a preschool

Teaching at a college or university

→ GO TO item 5-4 on page 25.

Working in a position in the field of education, but not as a teacher

Working in an occupation outside the field of education

Caring for family members

Military service

Unemployed and seeking work

Retired from another job

→ GO TO item 5-4 on page 25.

- 5-3a. What kind of work did you do, that is, what was your occupation?**

🍎 Please record your job title; for example, electrical engineer, cashier, typist, farmer, loan officer.

- b. What were your most important activities or duties on that job?**

🍎 For example, typing, selling cars, driving delivery truck, caring for livestock.

- c. How would you classify yourself on that job?**

🍎 Mark (X) only one box.

An employee of a PRIVATE company, business, or individual for wages, salary, or commission

A FEDERAL government employee

A STATE government employee

A LOCAL government employee

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

Working WITHOUT PAY in a family business or farm

Working WITHOUT PAY in a volunteer job



- 5-4. In your FIRST year of teaching, how well prepared were you to —**
 🍎 *If you are in your first year of teaching, please answer for THIS school year.*
 🍎 *Mark (X) one box on each line.*

	Not at all prepared	Somewhat prepared	Well prepared	Very well prepared
a. Handle a range of classroom management or discipline situations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Use a variety of instructional methods?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Teach your subject matter?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Use computers in classroom instruction?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Assess students?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Differentiate instruction in the classroom?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Use data from student assessments to inform instruction?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Teach to state content standards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Teach students who are limited-English proficient [LEP] or English-language learners [ELLs]?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Teach students with special needs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- 5-5. In your FIRST year of teaching, did you participate in a FORMAL schoolwide or districtwide program for beginning teachers aimed to enhance teachers' effectiveness by providing systematic support (sometimes called a teacher induction program)?**

🍎 *If you are in your first year of teaching, please answer for THIS school year.*

Yes

No



5-6. Did you receive the following kinds of support during your FIRST year of teaching?

🍏 *If you are in your first year of teaching, please answer for THIS school year.*

a. Reduced teaching schedule or number of preparations Yes No**b. Common planning time with teachers in your subject** Yes No**c. Seminars or classes for beginning teachers** Yes No**d. Extra classroom assistance (e.g., teacher aides)** Yes No**e. Regular supportive communication with your principal, other administrators, or department chair** Yes No**f. Observation and feedback on your teaching aimed at helping you develop and refine your teaching practice BEYOND any formal administrative observation and feedback you may have received** Yes No**g. Release time to participate in support activities for new or beginning teachers** Yes No

5-7a. In your FIRST year of teaching, were you ASSIGNED a master or mentor teacher by your school or district?

🍎 *If you are in your first year of teaching, please answer for THIS school year.*

- Yes
- No → GO TO Section 6 on page 28.

b. How frequently did you work with your assigned master or mentor teacher during your first year of teaching?

- At least once a week
- Once or twice a month
- A few times a year
- Never

c. Had your assigned master or mentor teacher ever instructed students in the same subject area(s) as yours?

- Yes
- No

5-8. Did your assigned master or mentor teacher provide the following types of support during your FIRST year of teaching?

🍎 *If you are in your first year of teaching, please answer for THIS school year.*

a. Helped with paperwork or record keeping

- Yes
- No

b. Demonstrated lessons

- Yes
- No

c. Helped you prepare lessons that address learning standards

- Yes
- No

d. Helped you develop student assessment tools

- Yes
- No

5-9. Overall, to what extent did your assigned master or mentor teacher improve your teaching in your first year of teaching?

🍎 *Mark (X) only one box.*

- Not at all
- To a small extent
- To a moderate extent
- To a great extent



6. TEACHER WORKING CONDITIONS

6-1. How many hours does your contract require you to work during a typical FULL WEEK at THIS school?

🍏 *This would be base contract hours, or the equivalent, NOT including stipends or extra pay for extra duty.*

🍏 *Report to the nearest whole hour.*

Total WEEKLY hours required to work

6-2. Of the hours you are CONTRACTED to work, excluding time spent on planning, lunch, break/recess, arrival/dismissal of students, and otherwise NOT delivering instruction, how many hours during a typical full week do you DELIVER INSTRUCTION to students in THIS school?

🍏 *This number should be less than the reported number of hours in 6-1.*

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

🍏 *Report to the nearest whole hour.*

Total WEEKLY hours delivering instruction

6-3. Including contract hours, and hours before and after school, and on the weekends, how many hours do you spend on ALL teaching and other school-related activities during a typical FULL WEEK at THIS school?

🍏 *This number should be greater than or equal to the reported number of hours in 6-1.*

🍏 *Report to the nearest whole hour.*

Total WEEKLY hours spent on all teaching and school-related activities



7. SCHOOL CLIMATE AND TEACHER ATTITUDES

7-1. During the 2019-20 school year, how did COVID-19 affect how you delivered instruction in this school?

🍏 *Mark (X) for all that apply*

- I was not a teacher at this school during the 2019-20 school year
- There was no change in how my classes were taught because of COVID-19
- All or some of my classes normally taught in person at the school were canceled
- All or some of my classes normally taught in person moved to a distance-learning format using online resources, either self-paced or real-time
- All or some of my classes normally taught in person moved to a distance-learning format using paper materials sent home with students
- All or some of my classes normally taught in person changed in some other way
Please specify →

7-2. To what extent do you agree or disagree with the following statement: I had the support and resources I needed to be effective as a teacher at this school during the COVID-19 pandemic in the 2019-20 school year.

- Strongly disagree
- Somewhat disagree
- Somewhat agree
- Strongly agree

7-3. During the COVID-19 pandemic in the 2019-20 school year, what kinds of real-time interactions, if any, did you have with your students?

🍏 *Mark (X) for all that apply*

- I had no real-time interactions with students during the COVID-19 pandemic in the 2019-20 school year
- I taught scheduled real-time lessons to classes who could ask questions during the lesson through a video or audio call
- I held scheduled sessions with groups of students to provide support through a video or audio call
- I held scheduled one-on-one sessions with individual students to teach lessons or provide support through a video or audio call
- I held scheduled office hours where students could ask questions through a video or audio call
- I had unscheduled sessions with students as needed through a video or audio call

7-4. What percentage of your students did you have any real-time interaction with during the coronavirus (COVID-19) pandemic in the 2019-20 school year?

- 1-25%
- 26-50%
- 51-75%
- 76-100%



7-5. How much actual influence do you think teachers have over school policy AT THIS SCHOOL in each of the following areas?

🍏 *Mark (X) one box on each line.*

	No influence	Minor influence	Moderate influence	A great deal of influence
a. Setting performance standards for students at this school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Establishing curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Determining the content of in-service professional development programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Evaluating teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Hiring new full-time teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Setting discipline policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Deciding how the school budget will be spent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7-6. How much actual control do you have IN YOUR CLASSROOM at this school over the following areas of your planning and teaching?

🍏 *Mark (X) one box on each line.*

	No control	Minor control	Moderate control	A great deal of control
a. Selecting textbooks and other instructional materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Selecting content, topics, and skills to be taught	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Selecting teaching techniques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Evaluating and grading students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Disciplining students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Determining the amount of homework to be assigned	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



7-7. To what extent do you agree or disagree with each of the following statements?

🍏 *Mark (X) one box on each line.*

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. The school administration's behavior toward the staff is supportive and encouraging.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I am satisfied with my teaching salary.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The level of student misbehavior in this school (such as noise, horseplay or fighting in the halls, cafeteria, or student lounge) interferes with my teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I receive a great deal of support from parents for the work I do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Necessary materials such as textbooks, supplies, and copy machines are available as needed by the staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Routine duties and paperwork interfere with my job of teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. My principal enforces school rules for student conduct and backs me up when I need it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Rules for student behavior are consistently enforced by teachers in this school, even for students who are not in their classes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Most of my colleagues share my beliefs and values about what the central mission of the school should be.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. The principal knows what kind of school he or she wants and has communicated it to the staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. There is a great deal of cooperative effort among the staff members.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. In this school, staff members are recognized for a job well done.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. I worry about the security of my job because of the performance of my students or my school on state and/or local tests.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. State or district content standards have had a positive influence on my satisfaction with teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. I am given the support I need to teach students with special needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. The amount of student tardiness and class cutting in this school interferes with my teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. I am generally satisfied with being a teacher at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. I make a conscious effort to coordinate the content of my courses with that of other teachers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



7-8. To what extent is each of the following a problem in THIS school?

🍏 *Mark (X) one box on each line.*

	Not a problem	Minor problem	Moderate problem	Serious problem
a. Student tardiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Student absenteeism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Student class cutting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Teacher absenteeism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Students dropping out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Student apathy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Lack of parental involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Poverty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Students come to school unprepared to learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Poor student health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


7-9. To what extent do you agree or disagree with each of the following statements?

🍏 *Mark (X) one box on each line.*

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. The stress and disappointments involved in teaching at this school aren't really worth it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The teachers at this school like being here; I would describe us as a satisfied group.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I like the way things are run at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. If I could get a higher paying job I'd leave teaching as soon as possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I think about transferring to another school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I don't seem to have as much enthusiasm now as I did when I began teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. I think about staying home from school because I'm just too tired to go.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



7-10. Which statement best describes how long you plan to remain in teaching?

 Mark (X) only one box.

- As long as I am able
- Until I am eligible for retirement benefits from this job
- Until I am eligible for retirement benefits from a previous job
- Until I am eligible for Social Security benefits
- Until a specific life event occurs (e.g., parenthood, marriage, retirement of spouse or partner)
- Until a more desirable job opportunity comes along
- Definitely plan to leave as soon as I can
- Undecided at this time

7-11a. Has a student FROM THIS SCHOOL ever threatened to injure you?

- Yes
- No → *GO TO item 7-12a below.*

b. Has a student FROM THIS SCHOOL threatened to injure you IN THE PAST 12 MONTHS?

- Yes
- No → *GO TO item 7-12a below.*

c. In the past 12 months, how many times has a student FROM THIS SCHOOL threatened to injure you?

Times

7-12a. Has a student FROM THIS SCHOOL ever physically attacked you?

- Yes
- No → *GO TO item 7-13 below.*

b. Has a student FROM THIS SCHOOL physically attacked you IN THE PAST 12 MONTHS?

- Yes
- No → *GO TO item 7-13 below.*


c. In the past 12 months, how many times has a student FROM THIS SCHOOL physically attacked you?

Times

7-13. In general, would you say that your health is: Excellent, Very good, Good, Fair, or Poor?

- Excellent
- Very good
- Good
- Fair
- Poor

7-14. On average, how many hours of sleep do you get in a typical school night?

 Report to the nearest whole hour.

Total average hours sleeping



8. GENERAL EMPLOYMENT AND BACKGROUND INFORMATION

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

8-1. DURING THE SUMMER OF 2020, did you have any earnings from —

🍏 Report amounts in whole dollars.

a. Teaching summer school in this school or any other school?

Yes →

No

How much?

\$, .00

(1) Did all of these earnings come from your current school?

Yes

No

GO TO item 8-1b below.

b. Working in a non-teaching job in this school or any other school?

Yes →

No

How much?

\$, .00

(1) Did all of these earnings come from your current school?

Yes

No

GO TO item 8-1c below.

c. Working in any NONSCHOOL job?

Yes →

No

How much?

\$, .00

GO TO item 8-2 below.

8-2. How many days are covered by your contract, per contract year?

🍏 Include professional development, student contact days, and any other days covered by your contract.

Days per contract year

8-3. DURING THE CURRENT SCHOOL YEAR, what is your base teaching salary for the entire school year?

🍏 Report amounts in whole dollars.

\$, .00 For the entire school year



8-13. Please indicate whether your student loan debt has influenced your employment plans and decisions in any of the following ways. Did you —

a. Have to work at more than one job at the same time because of your student loan debt?

Yes

No

b. Take a less desirable job because of your student loan debt?

Yes

No

8-14. Are you a member of a teachers' union or an employee association similar to a union?

Yes

No

8-15a. Does your school, district, or school system offer tenure?

Yes

No → GO TO Section 9 on page 39.



b. Are you tenured at your current school?

Yes

No



9. TEACHER DEMOGRAPHIC INFORMATION

9-1. Are you male or female?

Male

Female

9-2. Are you of Hispanic or Latino origin?

Yes

No

9-3. What is your race?

🍏 *Mark (X) one or more races to indicate what you consider yourself to be.*

White

Black or African-American

Asian

Native Hawaiian or Other Pacific Islander

American Indian or Alaska Native

9-4. What is your year of birth?



10. CONTACT INFORMATION

10-1. Please enter the date you completed this questionnaire.

MM	DD	YYYY
<input type="text"/>	<input type="text"/>	<input type="text" value="20"/> <input type="text"/>

10-2. Please indicate how much time it took you to complete this form, not counting interruptions.

🍏 Please record the time in minutes, e.g., 50 minutes, 65 minutes, etc.

<input type="text"/>	Minutes
----------------------	---------

10-3. Please PRINT your name, your home address, your cell and home telephone numbers, the most convenient time to reach you, and your work and home e-mail addresses. This information would only be used in the event that we need to contact you for follow-up. 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).

a. First name

Middle name

Last name

Suffix

b. Street Address

c. City

d. State

e. ZIP Code



f. Cell phone number

Area code

Number

- -

I consent to receive text messages for follow-up purposes only.

g. Home phone number

Area code

Number

- -

h. Best day(s) to reach you

🍏 *Mark (X) for all that apply.*

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

i. Best time of the day to reach you

🍏 *Mark (X) only one box.*

- a.m.
- p.m.

j. Work e-mail address

k. Home e-mail address



**Thank you very much for your participation
in this survey. If you have any questions,
please contact us, toll-free, at: 1-888-595-1338
or by e-mail at: ntps@census.gov.**

**Please return your completed questionnaire
in the enclosed pre-addressed, postage-paid
envelope or mail it to:**

**U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**



This page intentionally left blank.



To learn more about this survey and to access reports from earlier collections, see the National Teacher and Principal Survey (NTPS) website at: <http://nces.ed.gov/surveys/ntps>

Additional data collected by the National Center for Education Statistics (NCES) on a variety of topics in elementary, secondary, postsecondary, and international education are available from NCES' website at: <http://nces.ed.gov>

For additional data collected by various Federal agencies, including the Department of Education, visit the Federal Statistics clearinghouse at: <https://www.usa.gov/statistics>

