

National Teacher and Principal Survey of 2023-2024 (NTPS 2023-24)

OMB# 1850-0598 v.43

Appendix B

Draft NTPS 2023-24 Questionnaires

**National Center for Education Statistics
U.S. Department of Education**

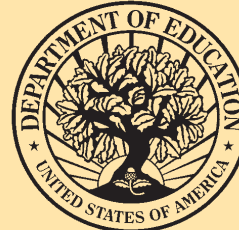
**January 2023
revised April 2023**

Table of Contents

The following questionnaire materials are contained in this document:

1. 2023-24 NTPS Teacher Listing Form (NTPS-1)
Note: This is the traditional Teacher Listing Form (TLF).
2. 2023-24 NTPS Teacher Listing Form, pre-populated version (NTPS-1P)
Note: This is the version of the TLF that will be pre-populated with vendor data.
3. 2023-24 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. 2023-24 NTPS Public School Principal Questionnaire (NTPS-2A)
5. 2023-24 NTPS Private School Principal Questionnaire (NTPS-2B)
6. 2023-24 NTPS Public School Questionnaire (NTPS-3A)
7. 2023-24 NTPS Private School Questionnaire (NTPS-3B)
8. 2023-24 NTPS Public School Teacher Questionnaire (NTPS-4A)
9. 2023-24 NTPS Private School Teacher Questionnaire (NTPS-4B)
10. 2023-24 NTPS Public and Private School Principal Instrument Login Page
11. 2023-24 NTPS Public and Private School Instrument Login and Confidentiality Pages
12. 2023-24 NTPS Public and Private School Teacher Instrument Login Page

1. 2023-24 NTPS Teacher Listing Form (NTPS-1)



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

NATIONAL TEACHER AND PRINCIPAL SURVEY

2023-24 SCHOOL YEAR

TEACHER LISTING FORM

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

**U.S. CENSUS BUREAU
ATTN: DCB 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).

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

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

FORM **NTPS-1**
(03-27-2023) D3

OMB No. 1850-0598: Approval Expires XX/XX/20XX

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: DCB 60A
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?**

- 🍏 The NTPS 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*
 - For example, chemistry, English, math, or history
- 🍏 *Special education teachers, who primarily teach students with formally-identified disabilities or special needs*
- 🍏 *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, who should be classified under "special education teachers")
 - Team-teach in any of grades K–8 (i.e., two or more teachers collaborate in teaching multiple subjects to the same class of students)
 - Kindergarten teachers
- 🍏 *Special area teachers*
 - For example, physical education, art, music, or English as a second language (ESL/ESOL)
- 🍏 *Career, technical, or vocational education teachers*
 - For example, keyboarding, business, agriculture, life skills, family or consumer economics, and any other vocational or technical classes
- 🍏 *Teaching principals, teaching guidance counselors, teaching librarians, teaching school nurses, who teach at least one regularly scheduled class per week*
- 🍏 *Teachers of ungraded students*
- 🍏 *Itinerant, co-op, traveling, and satellite teachers, who teach at more than one school (regardless of whether they are supervised by someone at your school)*
- 🍏 *Long-term substitute teachers, who are 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*

EXCLUDE FROM THE TEACHER LIST

- 🍏 *Prekindergarten teachers who teach ONLY prekindergarten students*
- 🍏 *Adult education and postsecondary teachers, who teach ONLY adult education or students beyond grade 12*
- 🍏 *Short-term substitute teachers, who 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, e-mail address, and work telephone number on the lines below.

NAME

TITLE

E-MAIL ADDRESS

WORK TELEPHONE NUMBER

AREA CODE TELEPHONE NUMBER

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

Minutes

🍏 Please see the reference card on page 4 for important information.



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.

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 "Another subject" matter for teachers who teach English as a second language (ESL), health, physical education, 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 - World language 9 - Music or Art 10 - Another subject
	FIRST MI LAST SUFFIX		
*Ex.	<i>Andrew M. Shaffer</i>	<i>ams@place.com</i>	<i>9</i>
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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>

**2. 2023-24 NTPS Teacher Listing Form, pre-populated
version (NTPS-1P)**



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

NATIONAL TEACHER AND PRINCIPAL SURVEY
2023-24 SCHOOL YEAR

TEACHER LISTING VERIFICATION FORM

Please return your completed questionnaire in the pre-addressed, postage-paid envelope or mail it to:
U.S. CENSUS BUREAU
ATTN: DCB 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).

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

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

FORM **NTPS-1P**
(03-27-2023) D3

OMB No. 1850-0598: Approval Expires XX/XX/20XX

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: DCB 60A
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?**

- 🍏 The NTPS 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*
 - For example, chemistry, English, math, or history
- 🍏 *Special education teachers, who primarily teach students with formally-identified disabilities or special needs*
- 🍏 *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, who should be classified under "special education teachers")
 - Team-teach in any of grades K–8 (i.e., two or more teachers collaborate in teaching multiple subjects to the same class of students)
 - Kindergarten teachers
- 🍏 *Special area teachers*
 - For example, physical education, art, music, or English as a second language (ESL/ESOL)
- 🍏 *Career, technical, or vocational education teachers*
 - For example, keyboarding, business, agriculture, life skills, family or consumer economics, and any other vocational or technical classes
- 🍏 *Teaching principals, teaching guidance counselors, teaching librarians, teaching school nurses, who teach at least one regularly scheduled class per week*
- 🍏 *Teachers of ungraded students*
- 🍏 *Itinerant, co-op, traveling, and satellite teachers, who teach at more than one school (regardless of whether they are supervised by someone at your school)*
- 🍏 *Long-term substitute teachers, who are 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*

EXCLUDE FROM THE TEACHER LIST

- 🍏 *Prekindergarten teachers who teach ONLY prekindergarten students*
- 🍏 *Adult education and postsecondary teachers, who teach ONLY adult education or students beyond grade 12*
- 🍏 *Short-term substitute teachers, who 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 the reference card on 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 ensure that any beginning teachers and teachers who are new to your school are included on the list. 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, e-mail address, and work telephone number on the lines below.**

NAME

TITLE

E-MAIL ADDRESS

WORK TELEPHONE NUMBER

AREA CODE TELEPHONE 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"/>
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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	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>*Lines Ex. 1-3 are examples of how to correct, verify, or add a teacher's information to this list.</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 - World language (WL) 9 - Music or Art (MA) 10 - Another subject (OTH) (e.g., ESL, phys. ed.)</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			
*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

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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

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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

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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

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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

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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

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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

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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

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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 - World language (WL) 9 - Music or Art (MA) 10 - Another subject (OTH) (e.g., ESL, phys. ed.)</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 - World language (WL) 9 - Music or Art (MA) 10 - Another subject (OTH) (e.g., ESL, phys. ed.)</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

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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 - World language (WL) 9 - Music or Art (MA) 10 - Another subject (OTH) (e.g., ESL, phys. ed.)</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

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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 - World language (WL) 9 - Music or Art (MA) 10 - Another subject (OTH) (e.g., ESL, phys. ed.)</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>
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

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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 - World language (WL) 9 - Music or Art (MA) 10 - Another subject (OTH) (e.g., ESL, phys. ed.)</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 - World language (WL) 9 - Music or Art (MA) 10 - Another subject (OTH) (e.g., ESL, phys. ed.)</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>

**3. 2023-24 NTPS Teacher Listing Form, short version
(NTPS-1S)**



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

NATIONAL TEACHER AND PRINCIPAL SURVEY

2023-24 SCHOOL YEAR

TEACHER LISTING FORM

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

**U.S. CENSUS BUREAU
ATTN: DCB 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).

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

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

FORM **NTPS-1S**
(03-27-2023) D3

OMB No. 1850-0598: Approval Expires XX/XX/20XX

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: DCB 60A
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?**

- 🍏 The NTPS 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*
 - For example, chemistry, English, math, or history
- 🍏 *Special education teachers, who primarily teach students with formally-identified disabilities or special needs*
- 🍏 *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, who should be classified under "special education teachers")
 - Team-teach in any of grades K–8 (i.e., two or more teachers collaborate in teaching multiple subjects to the same class of students)
 - Kindergarten teachers
- 🍏 *Special area teachers*
 - For example, physical education, art, music, or English as a second language (ESL/ESOL)
- 🍏 *Career, technical, or vocational education teachers*
 - For example, keyboarding, business, agriculture, life skills, family or consumer economics, and any other vocational or technical classes
- 🍏 *Teaching principals, teaching guidance counselors, teaching librarians, teaching school nurses, who teach at least one regularly scheduled class per week*
- 🍏 *Teachers of ungraded students*
- 🍏 *Itinerant, co-op, traveling, and satellite teachers, who teach at more than one school (regardless of whether they are supervised by someone at your school)*
- 🍏 *Long-term substitute teachers, who are 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*

EXCLUDE FROM THE TEACHER LIST

- 🍏 *Prekindergarten teachers who teach ONLY prekindergarten students*
- 🍏 *Adult education and postsecondary teachers, who teach ONLY adult education or students beyond grade 12*
- 🍏 *Short-term substitute teachers, who 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"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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2. How much time did it take to complete this form, not counting interruptions?

Minutes

🍏 Please see the reference card on page 4 for important information.



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).

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.	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 "Another subject" matter for teachers who teach English as a second language (ESL), health, physical education, 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 - World language 9 - Music or Art 10 - Another subject
	FIRST MI LAST SUFFIX	
*Ex.	<i>Andrew M. Shaffer</i>	9
1		
2		
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5		
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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				Subject Matter Taught
	<p>Please list all of the full-time and part-time teachers who TEACH at THIS SCHOOL.</p> <p>List each teacher only once.</p> <p>List in the following order: First name, Middle initial (MI), Last name, Suffix (if applicable).</p> <p>Please see the reference card for important information about itinerant teachers, substitute teachers, librarians, principals and other staff that may teach at this school.</p>				<p>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>Enter the code for "Another subject" matter for teachers who teach English as a second language (ESL), health, physical education, and any other remaining subjects.</p>
	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 - World language 9 - Music or Art 10 - Another subject
18					
19					
20					
21					
22					
23					
24					
25					
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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>

**4. 2023-24 NTPS Public School Principal Questionnaire
(NTPS-2A)**



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

NATIONAL TEACHER AND PRINCIPAL SURVEY

2023-24 SCHOOL YEAR

PRINCIPAL QUESTIONNAIRE

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

**U.S. CENSUS BUREAU
ATTN: DCB 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).

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

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

FORM **NTPS-2A**
(03-27-2023) D4

OMB No. 1850-0598: Approval Expires xx/xx/xxxx



- **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, principals, and teachers, 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 2023-24 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 25 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.



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.)

3 5

Yes

No

INCORRECT marking example –

35 3 5

Yes

No

OR

Yes

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.*

🍎 *Mark 'None' if you had no years of teaching experience before becoming a principal.*

None or 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.*

🍎 *Mark 'None' if this is your first year serving as principal of THIS school.*

None or 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.*

🍎 *Mark 'None' if this is your first year serving as principal of THIS OR ANY OTHER school.*

None or 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 2023-24 school year in this count, if applicable.*

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

🍏 *Mark 'None' if you did not regularly teach for any years while serving as a principal.*

- None → [GO TO Section 2 on page 6.](#)

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. **LAST school year (2022-23), 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"/>



3-2. How prepared do you feel your school is to deal with the following emergency events?

🍏 *Mark (X) one box on each line.*

	Very unprepared	Somewhat unprepared	Somewhat prepared	Very prepared
a. Active shooters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Active armed individuals with a weapon other than a firearm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Intruders (e.g., unauthorized persons entering the premises)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Shooting threats (e.g., in-person verbal threats, threats made via social media)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Bomb threats or incidents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Suicide threats or incidents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Pandemic diseases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Natural disasters (e.g., earthquakes, tornadoes, hurricanes, floods, wildfires)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Inclement weather (e.g., extreme heat, snowstorms, ice storms)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Chemical or industrial hazards (e.g., industrial plant explosions, release of hazardous materials within or outside of the school, gas leaks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Utility or systems failures (e.g., power or water outages, air conditioning outages)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



3-3. LAST school year (2022-23), 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"/>

3-4a. 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

3-5. 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. TEACHER EVALUATION

- 4-1. During the LAST school year (2022-23), which of the following sources of information on teacher performance did THIS school use in teacher evaluations?
- a. Classroom observations using a teacher professional practice rubric, conducted by the principal or other school administrator
- Yes
- No
-
- b. Assessments by the principal or other school administrator that are NOT based on a teacher professional practice rubric
- Yes
- No
-
- c. Videotaped classroom observation
- Yes
- No
-
- d. Assessments by a peer or mentor teacher that are NOT based on a teacher professional practice rubric
- Yes
- No
-
- e. Assessments by a peer or mentor teacher that ARE based on a teacher professional practice rubric
- Yes
- No
-
- f. Teacher self-assessment
- Yes
- No
-
- g. Amount or content of professional development completed by the teacher
- Yes
- No
-
- h. Artifacts of teacher professional practice or portfolios
- Yes
- No



4-1. Continued – During the LAST school year (2022-23), which of the following sources of information on teacher performance did THIS school use in teacher evaluations?

i. Student surveys or other student feedback

Yes

No

j. Parent surveys or other parent feedback

Yes

No

k. Teacher professional credentials including experience, education, and certification

Yes

No

4-2a. For a TENURED or EXPERIENCED teacher, on average, how many FORMAL observations were conducted during the LAST school year (2022-23) to evaluate performance?

🍏 *A formal observation is one that is required by the school, district, or state in order to collect information for a performance evaluation.*

🍏 *Mark 'None' if no formal observations were conducted during the last school year.*

None or Formal observations

↳ [GO TO item 4-2c below.](#)

b. For a TENURED or EXPERIENCED teacher, on average, how long is the typical FORMAL observation?

Minutes

c. For a TENURED or EXPERIENCED teacher, on average, how many INFORMAL observations were conducted during the LAST school year (2022-23)?

🍏 *Mark 'None' if no informal observations were conducted during the last school year.*

None or Informal observations

↳ [GO TO item 4-2e on page 12.](#)

d. For a TENURED or EXPERIENCED teacher, on average, how long is the typical INFORMAL observation?

Minutes



4-2e. On average, how often do TENURED or EXPERIENCED teachers receive a summative evaluation?

🍏 A summative evaluation is a **SUMMATIVE** assessment about performance that is used for some administrative purposes and becomes a part of the record of a teacher's performance.

🍏 Mark (X) only one box.

- Two or more times a year
- Once a year
- Once every 2 years
- Once every 3 or more years
- No summative evaluations are conducted.

4-3a. For a NON-TENURED or INEXPERIENCED teacher, on average, how many FORMAL observations were conducted during the LAST school year (2022-23) to evaluate performance?

🍏 A formal observation is one that is required by the school, district, or state in order to collect information for a performance evaluation.

🍏 Mark 'None' if no formal observations were conducted during the last school year.

None or Formal observations

↳ [GO TO item 4-3c below.](#)

b. For a NON-TENURED or INEXPERIENCED teacher, on average, how long is the typical FORMAL observation?

Minutes

c. For a NON-TENURED or INEXPERIENCED teacher, on average, how many INFORMAL observations were conducted during the LAST school year (2022-23)?

🍏 Mark 'None' if no informal observations were conducted during the last school year.

None or Informal observations

↳ [GO TO item 4-3e on page 13.](#)

d. For a NON-TENURED or INEXPERIENCED teacher, on average, how long is the typical INFORMAL observation?

Minutes



4-3e. On average, how often do NON-TENURED or INEXPERIENCED teachers receive a summative evaluation?

🍏 A summative evaluation is a **SUMMATIVE** assessment about performance that is used for some administrative purposes and becomes a part of the record of a teacher's performance.

🍏 Mark (X) only one box.

- Two or more times a year
- Once a year
- Once every 2 years
- Once every 3 or more years
- No summative evaluations are conducted.

4-4. During THIS school year (2023-24), is student achievement growth on standardized assessments or student learning objectives used in the performance evaluation of teachers in this school, whether it be within a classroom, teamwide, gradewide, schoolwide, or districtwide?

🍏 Student achievement growth is the change in individual student achievement between two or more points in time.

🍏 Standardized assessments are assessments consistently administered and scored districtwide or statewide for all students in the same grades and subjects.

🍏 Student learning objectives (SLOs) are measurable learning goals or objectives established for students, which can be used to measure student growth over a set period of time.

🍏 Mark (X) only one box.

Student achievement growth on standardized assessments or student learning objectives is used in the evaluation of:

- ALL teachers in this school, including all grades, all subjects, special education, and special populations
- MOST teachers in this school
- SOME teachers in this school
- NO teachers in this school → [GO TO item 4-6 on page 14.](#)

4-5. The teachers in this school are evaluated on the achievement growth of:

🍏 Mark (X) all that apply.

- Students they teach DIRECTLY
- Students GRADEWIDE
- Students TEAMWIDE
- Students SCHOOLWIDE
- Students DISTRICTWIDE



4-6. During THIS school year (2023-24), to what extent will teachers' performance evaluation results be used to inform the following decisions about teacher professional development?

🍏 *Mark (X) one box on each line.*

	Not at all	Somewhat	A lot
a. Plan professional development for individual teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Identify low-performing teachers for coaching, mentoring, or peer assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Develop performance improvement plans for low-performing teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Set goals with teachers for student achievement growth for the next school year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4-7. During THIS school year (2023-24), will teacher performance evaluation results be used to inform any of the following decisions about teachers in THIS school?

a. Formally recognizing high-performing teachers

Yes

No

b. Determining annual salary increases

Yes

No

c. Determining bonuses or performance-based compensation other than salary increases

Yes

No

d. Determining teaching assignments

Yes

No

e. Offering career advancement opportunities, such as teacher leadership roles

Yes

No

f. Granting job protection or tenure

Yes

No



4-8. During THIS school year (2023-24), will teacher performance evaluation results be used to inform any of the following decisions about LOW-PERFORMING teachers in THIS school?

a. Losing job protection or tenure

Yes

No

b. Prioritizing teachers for layoffs

Yes

No

c. Determining teacher reassignment

Yes

No

d. Counseling a teacher out of the school, district, or profession due to poor performance

Yes

No

e. Not renewing teacher contract or terminating employment for cause

Yes

No



5. TEACHER PROFESSIONAL DEVELOPMENT

5-1. To what extent do you agree or disagree with the following statements about professional development for TEACHERS in this school?

🍏 Mark (X) one box on each line.

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. An appropriate amount of time is provided for professional development.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Sufficient resources are available for professional development in this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Professional development offerings are based on best practices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Professional development opportunities are aligned with the school's improvement plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Professional development is directly applicable to the content or curriculum being taught.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Professional development provides ongoing opportunities for teachers to refine instructional strategies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Professional development enhances teachers' abilities to improve student learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5-2a. During the past 12 months, professional development was available to TEACHERS at THIS school:

🍏 Mark (X) all that apply.

- Before or after school days
- During in-service days (teacher planning or work days) when students are NOT in school
- During regular school days when students are in school
- During summer and other extended school breaks

b. Does THIS school provide teachers with time for INDIVIDUAL professional development during regular contract hours?

- Yes
- No

c. Does THIS school provide teachers with time for TEAM-BASED professional development during regular contract hours?

- Yes
- No



5-3. During the past 12 months, did teachers receive any of the following types of support?

a. Release time from teaching to attend professional development

Yes

No

b. Funding or reimbursement for attending conferences or workshops for professional development

Yes

No

c. Funding or reimbursement for travel and/or daily expenses to attend professional development

Yes

No

d. Full or partial reimbursement of college tuition for courses related to professional development

Yes

No

e. Stipend for professional development activities that took place outside regular work hours

Yes

No

5-4a. How often is teachers' input taken into consideration when planning professional development at THIS school?

Mark (X) only one box.

Never

Sometimes

Always

b. How often is professional development for teachers at THIS school led by teachers in THIS school or district?

Mark (X) only one box.

Never

Sometimes

Always

c. How often is professional development for teachers at THIS school evaluated for evidence of improvement in SCHOOLWIDE or DISTRICTWIDE achievement?

Mark (X) only one box.

Never

Sometimes

Always



6. PRINCIPAL EVALUATIONS

6-1a. During the LAST school year (2022-23), were you evaluated as a principal at THIS school?

Yes

No →

b. During the LAST school year (2022-23), why were you not evaluated at THIS school?

🍏 *Mark (X) only one box.*

- I was not a principal at this school last year.
- This district does not conduct principal evaluations.
- This district does not conduct principal evaluations on a yearly basis.
- I was not evaluated because I am a tenured or experienced principal.
- I was not evaluated for another reason. Please specify ↴

GO TO item 6-4 on page 19.

6-2. To what extent do you agree or disagree with the following statements about THIS school's evaluation process LAST school year (2022-23)?

🍏 *Mark (X) one box on each line.*

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. The evaluator(s) accurately evaluated my strengths and weaknesses as a principal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. My evaluator(s) was (were) fair and unbiased.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Overall, the evaluation process was fair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I had a strong understanding of how I would be evaluated at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I had a clearer idea of what was expected of me because of the evaluation process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The evaluation rubric accurately represents the scope of my responsibilities as a principal.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



6-3a. Thinking about your evaluation LAST school year (2022-23), did you receive any feedback on your work as a principal?

- Yes
- No → GO TO item 6-4 below.

b. Thinking about your evaluation LAST school year (2022-23), have you used the feedback you received to try to improve YOUR performance?

- Yes
- No

c. Thinking about your evaluation LAST school year (2022-23), did you receive feedback on the processes or procedures you used to achieve THIS SCHOOL'S performance goals?

- Yes
- No

6-4. During THIS school year (2023-24), is student achievement growth on standardized assessments used in your performance evaluation?

- 🍏 Student achievement growth is the change in individual student achievement between two or more points in time.
- 🍏 Standardized assessments are assessments consistently administered and scored districtwide or statewide for all students in the same grades and subjects.

- Yes
- No



7. PRINCIPAL PROFESSIONAL DEVELOPMENT

7-1. During the LAST school year (2022-23), did you participate in any professional development activities as a principal?

Yes

No → [GO TO Section 8 on page 23.](#)

7-2. During the LAST school year (2022-23), how often were the professional development activities in which you participated:

🍏 *Mark (X) one box on each line.*

	Never	Sometimes	Always
a. Designed to support state or district standards and/or assessments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Designed as part of a school improvement plan to meet state, district, or school goals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7-3. During the LAST school year (2022-23), was participation in professional development considered as part of your evaluation?

Yes

No

7-4. During the LAST school year (2022-23), did you participate in the following kinds of professional development?

a. University course(s) related to your role as principal

Yes

No

b. Visits to other schools designed to improve your own work as principal

Yes

No

c. Mentoring and/or peer observation and coaching of principals

Yes

No

d. Participating in a principal network (e.g., a group of principals organized within school systems, by an outside agency, or through the Internet)

Yes

No



7-4. Continued – During the LAST school year (2022-23), have you participated in the following kinds of professional development?

e. Workshops, conferences, or training in which you were a presenter

Yes

No

f. Other workshops or conferences in which you were not a presenter

Yes

No

7-5. During the LAST school year (2022-23), did you participate in professional development on any of the following topics?

a. Analyzing and interpreting student achievement data

Yes

No

b. Human resource management

Yes

No

c. Student motivation and engagement

Yes

No

d. Use of technology to support instruction

Yes

No

e. School management and policy

Yes

No

f. School improvement planning

Yes

No



7-5. *Continued* – During the LAST school year (2022-23), did you participate in professional development on any of the following topics?

g. Social services for students

Yes

No

h. Safety or school climate

Yes

No

i. Supporting effective instruction

Yes

No



8. PRINCIPAL ENGAGEMENT

8-1. To what extent do you agree or disagree with the following statements about your work at this school?

🍏 Mark (X) one box on each line.

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. The stress and disappointments involved with 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. There are too many restrictions on what can be discussed at my 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 this job 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 this job.	<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"/>




9. PRINCIPAL DEMOGRAPHIC INFORMATION

9-1. Are you of Hispanic or Latino origin?

Yes

No

9-2. 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

9-3. What is your year of birth?

The next few questions will help us better understand the experiences of principals of all gender identities and sexual orientations.

9-4. What sex were you assigned at birth (what was on your original birth certificate)?


Female

Male

9-5. What is your gender?

Female

Male


Another gender – Please specify 

9-6. Which of the following do you think of yourself as?

Straight

Lesbian or gay

Bisexual

Another sexual orientation - Please specify 



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"/>

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 work and home e-mail addresses, and your work, cell, and home telephone numbers. This information will 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 e-mail address

g. Home e-mail address

h. Work phone number

Area code Number

i. Cell phone number

Area code Number

I opt out of receiving text messages for follow-up purposes.

j. Home phone number

Area code Number



**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 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>**



**5. 2023-24 NTPS Private School Principal Questionnaire
(NTPS-2B)**



[Large white rounded rectangular area for address correction]

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

NATIONAL TEACHER AND PRINCIPAL SURVEY

2023-24 SCHOOL YEAR

PRIVATE SCHOOL PRINCIPAL QUESTIONNAIRE

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

**U.S. CENSUS BUREAU
ATTN: DCB 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).

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

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

FORM **NTPS-2B**
(03-27-2023) D3

OMB No. 1850-0598: Approval Expires xx/xx/xxxx



- **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, principals, and teachers, 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 2023-24 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 25 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.



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;"> <input type="checkbox"/> 3 5 </div> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> <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. 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.

🍏 Mark 'None' if you had no years of teaching experience before becoming a principal or school head.

None or 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, assistant school head, 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 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 ASSISTANT school head.

🍏 Count part of a year as 1 year.

🍏 Mark 'None' if this is your first year serving as principal or school head of THIS school.

None or 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 or ASSISTANT school head.

🍏 Count part of a year as 1 year.

🍏 Mark 'None' if this is your first year serving as principal or school head of THIS OR ANY OTHER school.

None or 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 2023-24 school year in this count, if applicable.*

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

🍏 *Mark 'None' if you did not regularly teach for any years while serving as a principal or school head.*

- None → [GO TO Section 2 on page 6.](#)

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. **LAST school year (2022-23), 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"/>



3-2. How prepared do you feel your school is to deal with the following emergency events?

🍏 *Mark (X) one box on each line.*

	Very unprepared	Somewhat unprepared	Somewhat prepared	Very prepared
a. Active shooters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Active armed individuals with a weapon other than a firearm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Intruders (e.g., unauthorized persons entering the premises)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Shooting threats (e.g., in-person verbal threats, threats made via social media)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Bomb threats or incidents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Suicide threats or incidents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Pandemic diseases	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Natural disasters (e.g., earthquakes, tornadoes, hurricanes, floods, wildfires)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Inclement weather (e.g., extreme heat, snowstorms, ice storms)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Chemical or industrial hazards (e.g., industrial plant explosions, release of hazardous materials within or outside of the school, gas leaks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Utility or systems failures (e.g., power or water outages, air conditioning outages)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



3-3. LAST school year (2022-23), 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"/>

3-4a. 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

3-5. 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. TEACHER EVALUATION

4-1. During the LAST school year (2022-23), which of the following sources of information on teacher performance did THIS school use in teacher evaluations?

a. Classroom observations using a teacher professional practice rubric, conducted by the principal, school head, or other school administrator

Yes

No

b. Assessments by the principal, school head, or other school administrator that are NOT based on a teacher professional practice rubric

Yes

No

c. Videotaped classroom observation

Yes

No

d. Assessments by a peer or mentor teacher that are NOT based on a teacher professional practice rubric

Yes

No

e. Assessments by a peer or mentor teacher that ARE based on a teacher professional practice rubric

Yes

No

f. Teacher self-assessment

Yes

No

g. Amount or content of professional development completed by the teacher

Yes

No

h. Artifacts of teacher professional practice or portfolios

Yes

No



4-1. Continued – During the LAST school year (2022-23), which of the following sources of information on teacher performance did THIS school use in teacher evaluations?

i. Student surveys or other student feedback

Yes

No

j. Parent surveys or other parent feedback

Yes

No

k. Teacher professional credentials including experience, education, and certification

Yes

No

4-2a. For a TENURED or EXPERIENCED teacher, on average, how many FORMAL observations were conducted during the LAST school year (2022-23) to evaluate performance?

🍏 *A formal observation is one that is required by the school or state in order to collect information for a performance evaluation.*

🍏 *Mark 'None' if no formal observations were conducted during the last school year.*

None or Formal observations

↳ [GO TO item 4-2c below.](#)

b. For a TENURED or EXPERIENCED teacher, on average, how long is the typical FORMAL observation?

Minutes

c. For a TENURED or EXPERIENCED teacher, on average, how many INFORMAL observations were conducted during the LAST school year (2022-23)?

🍏 *Mark 'None' if no informal observations were conducted during the last school year.*

None or Informal observations

↳ [GO TO item 4-2e on page 12.](#)

d. For a TENURED or EXPERIENCED teacher, on average, how long is the typical INFORMAL observation?

Minutes



4-2e. On average, how often do TENURED or EXPERIENCED teachers receive a summative evaluation?

🍏 A summative evaluation is a **SUMMATIVE** assessment about performance that is used for some administrative purposes and becomes a part of the record of a teacher's performance.

🍏 Mark (X) only one box.

- Two or more times a year
- Once a year
- Once every 2 years
- Once every 3 or more years
- No summative evaluations are conducted.

4-3a. For a NON-TENURED or INEXPERIENCED teacher, on average, how many FORMAL observations were conducted during the LAST school year (2022-23) to evaluate performance?

🍏 A formal observation is one that is required by the school or state in order to collect information for a performance evaluation.

🍏 Mark 'None' if no formal observations were conducted during the last school year.

- None or Formal observations

↙ [GO TO item 4-3c below.](#)

b. For a NON-TENURED or INEXPERIENCED teacher, on average, how long is the typical FORMAL observation?

- Minutes

c. For a NON-TENURED or INEXPERIENCED teacher, on average, how many INFORMAL observations were conducted during the LAST school year (2022-23)?

🍏 Mark 'None' if no informal observations were conducted during the last school year.

- None or Informal observations

↙ [GO TO item 4-3e on page 13.](#)

d. For a NON-TENURED or INEXPERIENCED teacher, on average, how long is the typical INFORMAL observation?

- Minutes



4-3e. On average, how often do NON-TENURED or INEXPERIENCED teachers receive a summative evaluation?

🍏 *A summative evaluation is a **SUMMATIVE** assessment about performance that is used for some administrative purposes and becomes a part of the record of a teacher's performance.*

🍏 *Mark (X) only one box.*

- Two or more times a year
- Once a year
- Once every 2 years
- Once every 3 or more years
- No summative evaluations are conducted.

4-4. During THIS school year (2023-24), is student achievement growth on standardized assessments or student learning objectives used in the performance evaluation of teachers in this school, whether it be within a classroom, teamwide, gradewide, or schoolwide?

🍏 *Student achievement growth is the change in individual student achievement between two or more points in time.*

🍏 *Standardized assessments are assessments consistently administered and scored statewide for all students in the same grades and subjects.*

🍏 *Student learning objectives (SLOs) are measurable learning goals or objectives established for students, which can be used to measure student growth over a set period of time.*

🍏 *Mark (X) only one box.*

Student achievement growth on standardized assessments or student learning objectives is used in the evaluation of:

- ALL teachers in this school, including all grades, all subjects, special education, and special populations
- MOST teachers in this school
- SOME teachers in this school
- NO teachers in this school → GO TO item 4-6 on page 14.

4-5. The teachers in this school are evaluated on the achievement growth of:

🍏 *Mark (X) all that apply.*

- Students they teach DIRECTLY
- Students GRADEWIDE
- Students TEAMWIDE
- Students SCHOOLWIDE



4-6. During THIS school year (2023-24), to what extent will teachers' performance evaluation results be used to inform the following decisions about teacher professional development?

🍏 Mark (X) one box on each line.

	Not at all	Somewhat	A lot
a. Plan professional development for individual teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Identify low-performing teachers for coaching, mentoring, or peer assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Develop performance improvement plans for low-performing teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Set goals with teachers for student achievement growth for the next school year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4-7. During THIS school year (2023-24), will teacher performance evaluation results be used to inform any of the following decisions about teachers in THIS school?

a. Formally recognizing high-performing teachers

Yes

No

b. Determining annual salary increases

Yes

No

c. Determining bonuses or performance-based compensation other than salary increases

Yes

No

d. Determining teaching assignments

Yes

No

e. Offering career advancement opportunities, such as teacher leadership roles

Yes

No

f. Granting job protection or tenure

Yes

No



4-8. During THIS school year (2023-24), will teacher performance evaluation results be used to inform any of the following decisions about LOW-PERFORMING teachers in THIS school?

a. Losing job protection or tenure

Yes

No

b. Prioritizing teachers for layoffs

Yes

No

c. Determining teacher reassignment

Yes

No

d. Counseling a teacher out of the school or profession due to poor performance

Yes

No

e. Not renewing teacher contract or terminating employment for cause

Yes

No



5. TEACHER PROFESSIONAL DEVELOPMENT

5-1. To what extent do you agree or disagree with the following statements about professional development for TEACHERS in this school?

🍏 Mark (X) one box on each line.

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. An appropriate amount of time is provided for professional development.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Sufficient resources are available for professional development in this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Professional development offerings are based on best practices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Professional development opportunities are aligned with the school's improvement plan.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Professional development is directly applicable to the content or curriculum being taught.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Professional development provides ongoing opportunities for teachers to refine instructional strategies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Professional development enhances teachers' abilities to improve student learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5-2a. During the past 12 months, professional development was available to TEACHERS at THIS school:

🍏 Mark (X) all that apply.

- Before or after school days
- During in-service days (teacher planning or work days) when students are NOT in school
- During regular school days when students are in school
- During summer and other extended school breaks

b. Does THIS school provide teachers with time for INDIVIDUAL professional development during regular contract hours?

- Yes
- No

c. Does THIS school provide teachers with time for TEAM-BASED professional development during regular contract hours?

- Yes
- No



5-3. During the past 12 months, did teachers receive any of the following types of support?

a. Release time from teaching to attend professional development

Yes

No

b. Funding or reimbursement for attending conferences or workshops for professional development

Yes

No

c. Funding or reimbursement for travel and/or daily expenses to attend professional development

Yes

No

d. Full or partial reimbursement of college tuition for courses related to professional development

Yes

No

e. Stipend for professional development activities that took place outside regular work hours

Yes

No

5-4a. How often is teachers' input taken into consideration when planning professional development at THIS school?

🍎 *Mark (X) only one box.*

Never

Sometimes

Always

b. How often is professional development for teachers at THIS school led by teachers in THIS school?

🍎 *Mark (X) only one box.*

Never

Sometimes

Always

c. How often is professional development for teachers at THIS school evaluated for evidence of improvement in SCHOOLWIDE achievement?

🍎 *Mark (X) only one box.*

Never

Sometimes

Always



6. PRINCIPAL OR SCHOOL HEAD EVALUATIONS

6-1a. During the LAST school year (2022-23), were you evaluated as a principal or school head at THIS school?

Yes

No →

b. During the LAST school year (2022-23), why were you not evaluated at THIS school?

🍏 *Mark (X) only one box.*

I was not a principal or school head at this school last year.

I was not evaluated because I am a tenured or experienced principal or school head.

I was not evaluated for another reason. Please specify ↴

GO TO item 6-4 on page 19.

6-2. To what extent do you agree or disagree with the following statements about THIS school's evaluation process LAST school year (2022-23)?

🍏 *Mark (X) one box on each line.*

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. The evaluator(s) accurately evaluated my strengths and weaknesses as a principal or school head.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. My evaluator(s) was (were) fair and unbiased.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Overall, the evaluation process was fair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I had a strong understanding of how I would be evaluated at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I had a clearer idea of what was expected of me because of the evaluation process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The evaluation rubric accurately represents the scope of my responsibilities as a principal or school head.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



6-3a. Thinking about your evaluation LAST school year (2022-23), did you receive any feedback on your work as a principal or school head?

Yes

No → GO TO item 6-4 below.

b. Thinking about your evaluation LAST school year (2022-23), have you used the feedback you received to try to improve YOUR performance?

Yes

No

c. Thinking about your evaluation LAST school year (2022-23), did you receive feedback on the processes or procedures you used to achieve THIS SCHOOL'S performance goals?

Yes

No

6-4. During THIS school year (2023-24), is student achievement growth on standardized assessments used in your performance evaluation?

🍏 Student achievement growth is the change in individual student achievement between two or more points in time.

🍏 Standardized assessments are assessments consistently administered and scored statewide for all students in the same grades and subjects.

Yes

No



7. PRINCIPAL OR SCHOOL HEAD PROFESSIONAL DEVELOPMENT

7-1. During the LAST school year (2022-23), did you participate in any professional development activities as a principal or school head?

Yes

No → *GO TO Section 8 on page 22.*

7-2. During the LAST school year (2022-23), was participation in professional development considered as part of your evaluation?

Yes

No

7-3. During the LAST school year (2022-23), did you participate in the following kinds of professional development?

a. University course(s) related to your role as principal or school head

Yes

No

b. Visits to other schools designed to improve your own work as principal or school head

Yes

No

c. Mentoring and/or peer observation and coaching of principals or school heads

Yes

No

d. Participating in a principal or school head network (e.g., a group of principals or school heads organized within school systems, by an outside agency, or through the Internet)

Yes

No

e. Workshops, conferences, or training in which you were a presenter

Yes

No

f. Other workshops or conferences in which you were not a presenter

Yes

No



7-4. During the LAST school year (2022-23), did you participate in professional development on any of the following topics?

a. Analyzing and interpreting student achievement data

Yes

No

b. Human resource management

Yes

No

c. Student motivation and engagement

Yes

No

d. Use of technology to support instruction

Yes

No

e. School management and policy

Yes

No

f. School improvement planning

Yes

No

g. Social services for students

Yes

No

h. Safety or school climate

Yes

No

i. Supporting effective instruction

Yes

No



8. PRINCIPAL OR SCHOOL HEAD ENGAGEMENT

8-1. To what extent do you agree or disagree with the following statements about your work at this school?

🍏 Mark (X) one box on each line.

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. The stress and disappointments involved with 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. There are too many restrictions on what can be discussed at my 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 this job 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 this job.	<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"/>



9. PRINCIPAL OR SCHOOL HEAD DEMOGRAPHIC INFORMATION

9-1. Are you of Hispanic or Latino origin?

Yes

No

9-2. 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

9-3. What is your year of birth?

9-4. What is your gender?

Female

Male

Another gender – Please specify ↴

9-5. 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.

\$, .00 per year



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 work and home e-mail addresses, and your work, cell, and home telephone numbers. This information will 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 e-mail address

g. Home e-mail address

h. Work phone number

Area code Number

i. Cell phone number

Area code Number

I opt out of receiving text messages for follow-up purposes.

j. Home phone number

Area code Number



**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 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**



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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>



6. 2023-24 NTPS Public School Questionnaire (NTPS-3A)



[Large white rounded rectangular area for address and name information.]

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

NATIONAL TEACHER AND PRINCIPAL SURVEY

2023-24 SCHOOL YEAR

SCHOOL QUESTIONNAIRE

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

**U.S. CENSUS BUREAU
ATTN: DCB 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).

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

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

FORM NTPS-3A

OMB No. 1850-0598: Approval Expires XX/XX/XXXX



- **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 2023-24 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 13 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.



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 <input type="checkbox"/> 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 <input type="checkbox"/> 5 </div> </div> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No OR <input checked="" 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?

🍏 Mark (X) 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, 2023, how many students were enrolled in this school?

, Enrolled Students

1-3. For this school year (2023-24), 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: 20px; height: 20px; border: 1px solid black;" type="text"/> : <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> a.m. <input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> p.m.	-	<input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> : <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/>	<input style="width: 20px; height: 20px; border: 1px solid black;" type="checkbox"/> a.m. <input style="width: 20px; height: 20px; border: 1px solid black;" 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, world 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 1-10 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 ↴



1-10. Around October 1, 2023, how many persons were teaching in grades K-12 and/or comparable ungraded levels at this school 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.

🍏 **INCLUDE:**

- Regular classroom teachers.
- Teachers who teach subjects such as music, art, physical education, and special education.
- Teaching principals or administrators who teach a regularly scheduled class at this school.

🍏 **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.

🍏 Mark 'None' if no person is teaching in a particular time category.

a.	<input type="checkbox"/> None	or	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Teach full-time
b.	<input type="checkbox"/> None	or	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Teach part-time
c.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			Total full- and part-time teachers




1-11a. 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 1-12 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

1-12. 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

1-13. Which types of classes are currently available to students at this school?

a. IN-PERSON CLASSES. Classes in which the teacher delivering instruction is in the same physical space as the students. These classes may offer some online resources (for example, homework submission, online textbooks, learning management systems [LMS] or supplemental online programs).

- Yes
- No

b. VIRTUAL CLASSES. Classes in which the teacher delivering instruction is not in the same physical space as the students, and students may be in a classroom or in their own homes. Students and teachers may still meet in person for field trips, school-sponsored social events, or assessment purposes.

- Yes
- No

c. HYBRID CLASSES. Classes that include a COMBINATION of in-person instruction and virtual instruction.

- Yes
- No



1-14. In which types of classes that ONLY include virtual instruction are students at this school currently enrolled?

🍏 *Mark (X) all that apply.*

- No students are currently enrolled in classes that ONLY include virtual instruction →
- Core classes
- Classes for additional advancement (such as Advanced Placement or college credits)
- Elective classes
- Credit recovery classes
- Classes for an alternative learning program
- Remedial classes
- Specialized classes for students with an Individual Education Program or Plan (IEP)
- Other - please specify: →

GO TO item 1-17a
on page 9

1-15. About what percentage of students are currently enrolled in at least one class that ONLY includes virtual instruction?

🍏 *Mark (X) only one box.*

- 1-10% of students
- 11-25% of students
- 26-50% of students
- 51-75% of students
- 76% or more of students

1-16 What types of delivery do classes that ONLY include virtual instruction currently use in this school?

🍏 *Mark (X) all that apply.*

- Real time (synchronous) video or audio instruction
- Pre-recorded (asynchronous) video or audio instruction
- Independent learning modules
- Other - please specify: →



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 10.

**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) all that apply.

Science, Technology, Engineering, or Math

Performing Arts

Education for gifted or talented students

World Language Immersion

Other




1-18. Does this school offer the following?

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

Yes

No

- b. A dual-language or world 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. STUDENT SUPPORT AND WELLNESS SERVICES

2-1. Does this school use a universal screening tool, such as an Early Warning System (EWS) or Multi-Tiered System of Supports (MTSS), to systematically identify any of the following risk factors in an entire student population (e.g., all students in a classroom, grade level, or school)?

a. Students with low academic achievement (e.g., failing or at risk of failing a grade or a subject, low standardized assessment scores)

Yes

No

b. Students with poor attendance

Yes

No

c. Students demonstrating symptoms of possible mental health or emotional issues (e.g., withdrawal, anxiety, depression, suicidal thoughts or planning)

Yes →

No

As assessed by a teacher, administrator, or school counselor

Yes

No

Self-reported by the student or stated by their peers

Yes

No

d. Students exhibiting behavioral issues (e.g., aggression, disciplinary incidents, office discipline referrals [ODRs], substance abuse)

Yes

No

e. Students experiencing social issues (e.g., peer rejection, avoiding or withdrawing from social situations)

Yes →

No

As assessed by a teacher, administrator, or school counselor

Yes

No

Self-reported by the student or stated by their peers

Yes

No



2-2. Does this school provide any of the following services or supports specifically for students exhibiting mental, emotional, behavioral, or social issues?

🍎 *Include services that are provided at school as well as services provided through a contract the school has with an outside provider.*

a. Diagnostic mental health assessments to evaluate students for a mental health disorder (e.g., anxiety, depression, ADHD)

Yes

No

b. Brief individualized interventions (e.g., short-term counseling or therapy, check-in check-out interventions, individual skill-building training or coaching)

Yes

No

c. Small group interventions for students with similar needs (e.g., students who have experienced trauma, students with depression, group skill building training or coaching)

Yes

No

d. Consultation or collaboration with parents/guardians about identified issues or risk factors

Yes

No



3. INSTRUCTIONAL TIME

3-1. Does this school have students enrolled in the **THIRD GRADE**?

Yes
 No → GO TO item 3-4 on page 15.

3-2. What is the official start and end time for **THIRD GRADE** 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.

Start time End time
 a.m. a.m.
 p.m. p.m.

3-3. During a **TYPICAL SCHOOL WEEK**, approximately how many minutes per day do most **THIRD GRADE** students spend on the following activities at this school?

🍏 If this school has 2 or more third grade classes, calculate the average minutes per day for all third grade classes.

🍏 If most third grade students have courses taught on a rotational schedule, calculate typical course time based on the following example: For a course taught 60 minutes per day for half the year, respond with 30 minutes per day.

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

None or Minutes per day for Days per week

b. **Arithmetic or mathematics**

None or Minutes per day for Days per week

c. **Social studies or history**

None or Minutes per day for Days per week

d. **Science**

None or Minutes per day for Days per week



3-3. *Continued* – During a TYPICAL SCHOOL WEEK, approximately how many minutes per day do most THIRD GRADE students spend on the following activities at this school?

e. World language (not English as a Second Language [ESL])

None or Minutes per day for Days per week

f. Physical education

None or Minutes per day for Days per week

g. Music

None or Minutes per day for Days per week

h. Art

None or Minutes per day for Days per week

i. Recess

🍏 *Do NOT include time allocated for lunch.*

None or Minutes per day for Days per week



3-4. Does this school have students enrolled in the EIGHTH GRADE?

Yes
 No → GO TO Section 4 on page 16.

3-5. What is the official start and end time for EIGHTH GRADE 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.*

Start time: : a.m. / p.m. — End time: : a.m. / p.m.

3-6. During a TYPICAL SCHOOL WEEK, approximately how many minutes per day do most EIGHTH GRADE students spend on the following activities at this school?

🍏 *If this school has 2 or more eighth grade classes, calculate the average minutes per day for all eighth grade classes.*

🍏 *If most eighth grade students have courses taught on a rotational schedule, calculate typical course time based on the following example: For a course taught 60 minutes per day for half the year, respond with 30 minutes per day.*

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

None or Minutes per day for Days per week

b. Arithmetic or mathematics

None or Minutes per day for Days per week

c. Social studies or history

None or Minutes per day for Days per week

d. Science

None or Minutes per day for Days per week



4. STUDENTS AND CLASSROOM ORGANIZATION

- 4-1. During THIS school year (2023-24), does this school use the following methods to organize classes or students?
- a. Traditional grades (e.g., 1st grade, 2nd grade) or academic discipline-based departments (e.g., math, science)
- Yes
- No
-
- b. Students are assigned based on their ability (i.e., tracking)
- Yes
- No
-
- c. Grades subdivided into small groups such as "teams", "houses", or "families"
- Yes
- No
-
- d. Student groups assigned to stay in classes together for two or more years with the SAME teacher (i.e., looping)
- Yes
- No
-
- e. Student groups assigned to stay in classes together for two or more years with DIFFERENT teachers
- Yes
- No
-
- f. Multi-age grouping or composite classes (most students normally in different grades placed together)
- Yes
- No
-
- g. Block scheduling (extended class periods scheduled to create blocks of instruction time)
- Yes
- No



4-2a. Do students attend this school across 12 months (i.e., year-round)? Yes No → GO TO item 4-3 below.**b. Do all students attend on the same cycle?** Yes No**4-3. Does this school have students enrolled in any of grades 9-12?** Yes No → GO TO Section 5 on page 18.**4-4. Are the following opportunities available for students in any of grades 9-12 attending this school?****a. Dual or concurrent enrollment that offers both high school and college credit** Yes → No**How is this funded?**🍏 *Mark (X) all that apply.* By the school or state By the family or the student By some other entity

GO TO item 4-4b below.

b. Specialized career academy

🍏 *A specialized career academy is a program that offers a set of specialized curricula organized around a specific career area, such as automotive, business, carpentry, communications, construction, cosmetology, culinary arts, education, electricity, engineering, health, hospitality, IT, manufacturing, plumbing, protective and legal services, repair transportation, etc.*

 Yes No**c. Career and technical education courses**

🍏 *If courses are available to students but not part of a specialized career academy in 4-4b, select 'Yes'.*

 Yes No**d. Work-based learning or internships outside of school, in which students earn COURSE CREDITS for supervised learning activities that occur in paid or unpaid workplace assignments** Yes No

5. COMMUNITY SERVICE REQUIREMENTS

5-1. Does this school grant high school diplomas?

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

Yes

No → GO TO Section 6 on page 19.



5-2. For high school graduates of the class of 2024, does this school have a community service requirement for a standard diploma?

Yes

No → GO TO Section 6 on page 19.



5-3. What is the minimum number of community service hours required of the high school graduates in the class of 2024?

Minimum hours of community service



6. SPECIAL PROGRAMS AND SERVICES

- 6-1a. Of the students enrolled in grades K-12 or comparable ungraded levels in this school, do any have an Individual Education Program or Plan (IEP) because they have disabilities or special needs?

Yes

No → GO TO item 6-3a on page 20.

- b. How many students in this school have an Individual Education Program or 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 Program or Plan (IEP)

- 6-2a. 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 6-3a on page 20.

No

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

🍏 The sum of entries in item 6-2b should equal the entry in item 6-1b above.

🍏 Mark 'None' if no student with an IEP is in a particular instructional setting.

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

None or , Students

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

None or , Students

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

None or , Students

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

None or , Students



6-3a. Of the students enrolled in this school as of October 1, 2023, have any been identified as English language learners (ELLs), 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 6-6a on page 21.](#)



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

Students

6-4. Does this school have instruction specifically designed to address the needs of ELL or LEP students?

Yes

No → [GO TO item 6-6a on page 21.](#)



6-5a. 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



6-6a. 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 6-7 on page 22.

b. Around October 1, 2023, did you have any PREKINDERGARTEN students enrolled in this school?

Yes

No → GO TO item 6-6c 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, 2023, 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).

🍎 Mark 'None' if no student's eligibility was determined through Direct Certification.

None or 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 Provision (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



6-7. Around October 1, 2023, 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 7 on page 23.



6-8a. How many PREKINDERGARTEN students at this school participate in the Title I program?



Mark 'None' if no prekindergarten students participate in the Title I program.

None or [] [] [] [] Prekindergarten students

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



Mark 'None' if no students in grades K-12 participate in the Title I program.

None or [] [] [] [] [] [] K-12 students

6-9. 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

6-10. How many designated Title I teachers were teaching AT THIS SCHOOL around October 1, 2023?



Mark 'None' if there are no designated Title I teachers at this school.

None or [] [] [] Title I teachers



7. CONTACT INFORMATION

7-1 What is the name of the person who completed most of this questionnaire?

7-2. What is their job title?

7-3. What is their work e-mail address?

7-4. What is the school's phone number?

Area code Number

 - -

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

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

7-6. Please indicate how much time it took this school to complete this form, not counting interruptions.

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

 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 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>



7. 2023-24 NTPS Private School Questionnaire (NTPS-3B)



[Large white rounded rectangular area for address and name information.]

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

NATIONAL TEACHER AND PRINCIPAL SURVEY

2023-24 SCHOOL YEAR

PRIVATE SCHOOL QUESTIONNAIRE

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

**U.S. CENSUS BUREAU
ATTN: DCB 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).

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

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

FORM NTPS-3B

OMB No. 1850-0598: Approval Expires XX/XX/XXXX



- **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 2023-24 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 is 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 33 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.



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

1.1 Around October 1, 2023, how many students were enrolled in each of the following grade levels?

🍏 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, 2023, 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"/> <input type="text"/> <input type="text"/> <input type="text"/>
m. 8th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
n. 9th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
o. 10th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
p. 11th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
q. 12th	<input type="checkbox"/> Yes → <input type="checkbox"/> No	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

1-2. Around October 1, 2023, what was the total number of students enrolled in this school?

🍏 *This item should equal the sum of entries in item 1-1a.*

Enrolled Students



1-3. Around October 1, 2023, how many students enrolled in grades K-12 and comparable ungraded levels 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.
- 🍎 Please only include each student in one category below.
- 🍎 Mark 'None' if there are no students in this school of a given racial and ethnic origin.

a. Hispanic or Latino Students

None or , K-12 Students

b. White

None or , K-12 Students

c. Black or African American

None or , K-12 Students

d. Asian

None or , K-12 Students

e. Native Hawaiian or other Pacific Islander

None or , K-12 Students

f. American Indian or Alaska Native

None or , K-12 Students

g. Two or more races

None or , K-12 Students

TOTAL number of students in grades K-12 , K-12 Students

1-4a. Is this school 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. Around October 1, 2023, how many students enrolled in K-12 and comparable ungraded levels 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.
- 🍎 Mark 'None' if there are no male students enrolled in this school.

None or , 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, world 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 ↴

1-10. Around October 1, 2023, how many persons were teaching in grades K-12 and/or comparable ungraded levels at this school 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.

🍏 **INCLUDE:**

- Regular classroom teachers.
- Teachers who teach subjects such as music, art, physical education, and special education.
- Teaching principals or administrators who teach a regularly scheduled class at this school.

🍏 **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.

🍏 *Mark 'None' if no person is teaching in a particular time category.*

- | | | | | |
|----|-------------------------------|----|--|---|
| a. | <input type="checkbox"/> None | or | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Teach full-time |
| b. | <input type="checkbox"/> None | or | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Teach at least 3/4 time but less than full-time |
| c. | <input type="checkbox"/> None | or | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Teach at least 1/2 time but less than 3/4 time |
| d. | <input type="checkbox"/> None | or | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Teach at least 1/4 time but less than 1/2 time |
| e. | <input type="checkbox"/> None | or | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Teach less than 1/4 time |
| f. | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | Total full- and part-time teachers |




1-11a. 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 1-12 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

1-12. 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

1-13. Which types of classes are currently available to students at this school?

- a. **IN-PERSON CLASSES.** Classes in which the teacher delivering instruction is in the same physical space as the students. These classes may offer some online resources (for example, homework submission, online textbooks, learning management systems [LMS] or supplemental online programs).

Yes

No

- b. **VIRTUAL CLASSES.** Classes in which the teacher delivering instruction is not in the same physical space as the students, and students may be in a classroom or in their own homes. Students and teachers may still meet in person for field trips, school-sponsored social events, or assessment purposes.

Yes

No

- c. **HYBRID CLASSES.** Classes that include a COMBINATION of in-person instruction and virtual instruction.

Yes

No



1-14. In which types of classes that ONLY include virtual instruction are students at this school currently enrolled?

🍏 *Mark (X) all that apply.*

- No students are currently enrolled in classes that ONLY include virtual instruction → GO TO item 1-17a on page 11
- Core classes
- Classes for additional advancement (such as Advanced Placement or college credits)
- Elective classes
- Credit recovery classes
- Classes for an alternative learning program
- Remedial classes
- Specialized classes for students with a formally-identified disability
- Other - please specify: →

1-15. About what percentage of students are currently enrolled in at least one class that ONLY includes virtual instruction?

🍏 *Mark (X) only one box.*

- 1-10% of students
- 11-25% of students
- 26-50% of students
- 51-75% of students
- 76% or more of students

1-16 What types of delivery do classes that ONLY include virtual instruction currently use in this school?

🍏 *Mark (X) all that apply.*

- Real time (synchronous) video or audio instruction
- Pre-recorded (asynchronous) video or audio instruction
- Independent learning modules
- Other - please specify: →




1-17. Does this school offer the following?

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

Yes

No

- b. A dual-language or world 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 to support homeschooling?

Yes

No

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

Yes

No



1-20a. Do any students board at this school?

- Yes
- No → GO TO item 1-21 below.



b. How many students board at this school?

, Students

1-21. Does this school charge tuition for any students?

- Yes
- No → GO TO item 1-24a below.



1-22a. Does this school have any policy for modifying or discounting tuition rates, such as on the basis of additional students from the same family, financial need, or church membership?

- Yes
- No → GO TO item 1-24 below.



b. How many students receive a modified or discounted tuition rate on the basis of FINANCIAL NEED?

🍏 Mark 'None' if no students receive a modified or discounted tuition rate on the basis of FINANCIAL NEED.

None or , Students

1-23. What is the highest ANNUAL tuition charged by this school for a full-time student?

- 🍏 Please report in whole dollars.
- 🍏 Do NOT include boarding fees.

\$, .00 Per year

1-24a. Does this school have a religious orientation or purpose?

- Yes
- No → GO TO item 1-25 on page 14.



b. Is this school affiliated with a religious organization or institution?

- Yes
- No



1-24c. What is this school'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 belong?

🍏 *Mark (X) all that apply.*

This school does NOT belong to ANY associations or organizations. → GO TO Section 2 on page 16.

RELIGIOUS

- Accelerated Christian Education (ACE) (or School of Tomorrow)
- Agudath Israel of America (AIA)
- 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 Schools Network (JSN)
- National Alliance of Christian Schools (NACS)
- 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 belong?

🍏 Mark (X) 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. STUDENT SUPPORT AND WELLNESS SERVICES

2-1. Does this school use a universal screening tool, such as an Early Warning System (EWS) or Multi-Tiered System of Supports (MTSS), to systematically identify any of the following risk factors in an entire student population (e.g., all students in a classroom, grade level, or school)?

a. Students with low academic achievement (e.g., failing or at risk of failing a grade or a subject, low standardized assessment scores)

Yes

No

b. Students with poor attendance

Yes

No

c. Students demonstrating symptoms of possible mental health or emotional issues (e.g., withdrawal, anxiety, depression, suicidal thoughts or planning)

Yes →

No

As assessed by a teacher, administrator, or school counselor

Yes

No

Self-reported by the student or stated by their peers

Yes

No



d. Students exhibiting behavioral issues (e.g., aggression, disciplinary incidents, office discipline referrals [ODRs], substance abuse)

Yes

No

e. Students experiencing social issues (e.g., peer rejection, avoiding or withdrawing from social situations)

Yes →

No

As assessed by a teacher, administrator, or school counselor

Yes

No

Self-reported by the student or stated by their peers

Yes

No



2-2. Does this school provide any of the following services or supports specifically for students exhibiting mental, emotional, behavioral, or social issues?

🍎 *Include services that are provided at school as well as services provided through a contract the school has with an outside provider.*

a. Diagnostic mental health assessments to evaluate students for a mental health disorder (e.g., anxiety, depression, ADHD)

Yes

No

b. Brief individualized interventions (e.g., short-term counseling or therapy, check-in check-out interventions, individual skill-building training or coaching)

Yes

No

c. Small group interventions for students with similar needs (e.g., students who have experienced trauma, students with depression, group skill building training or coaching)

Yes

No

d. Consultation or collaboration with parents/guardians about identified issues or risk factors

Yes

No



3-3. *Continued* – During a TYPICAL SCHOOL WEEK, approximately how many minutes per day do most THIRD GRADE students spend on the following activities at this school?

f. Physical education

None or Minutes per day for Days per week

g. Music

None or Minutes per day for Days per week

h. Art

None or Minutes per day for Days per week

i. Recess

🍏 *Do NOT include time allocated for lunch.*

None or Minutes per day for Days per week



4. STUDENTS AND CLASSROOM ORGANIZATION

4-1. During THIS school year (2023-24), does this school use the following methods to organize classes or students?

a. Traditional grades (e.g., 1st grade, 2nd grade) or academic discipline-based departments (e.g., math, science)

Yes

No

b. Students are assigned based on their ability (i.e., tracking)

Yes

No

c. Grades subdivided into small groups such as "teams", "houses", or "families"

Yes

No

d. Student groups assigned to stay in classes together for two or more years with the SAME teacher (i.e., looping)

Yes

No

e. Student groups assigned to stay in classes together for two or more years with DIFFERENT teachers

Yes

No

f. Multi-age grouping or composite classes (most students normally in different grades placed together)

Yes

No

g. Block scheduling (extended class periods scheduled to create blocks of instruction time)

Yes

No



4-2a. Do students attend this school across 12 months (i.e., year-round)? Yes No → GO TO item 4-3 below.**b. Do all students attend on the same cycle?** Yes No**4-3. Does this school have students enrolled in any of grades 9-12?** Yes No → GO TO Section 5 on page 23.**4-4. Are the following opportunities available for students in any of grades 9-12 attending this school?****a. Dual or concurrent enrollment that offers both high school and college credit** Yes → No**How is this funded?**

🍏 Mark (X) all that apply.

 By the school or state By the family or the student By some other entity

GO TO item 4-4b below.

b. Specialized career academy

🍏 A specialized career academy is a program that offers a set of specialized curricula organized around a specific career area, such as automotive, business, carpentry, communications, construction, cosmetology, culinary arts, education, electricity, engineering, health, hospitality, IT, manufacturing, plumbing, protective and legal services, repair transportation, etc.

 Yes No**c. Career and technical education courses**

🍏 If courses are available to students but not part of a specialized career academy in 4-4b, select 'Yes'.

 Yes No**d. Work-based learning or internships outside of school, in which students earn COURSE CREDITS for supervised learning activities that occur in paid or unpaid workplace assignments** Yes No

5. COMMUNITY SERVICE REQUIREMENTS

5-1. Does this school grant high school diplomas?

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

Yes

No → GO TO Section 6 on page 24.



5-2. For high school graduates of the class of 2024, does this school have a community service requirement for a standard diploma?

Yes

No → GO TO Section 6 on page 24.



5-3. What is the minimum number of community service hours required of the high school graduates in the class of 2024?

Minimum hours of community service



6. SPECIAL PROGRAMS AND SERVICES

6-1a. 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 6-3a on page 25.



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

6-2a. 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 6-3a on page 25.

No



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

🍏 The sum of entries in item 6-2b should equal the entry in item 6-1b above.

🍏 Mark 'None' if no student with a formally-identified disability is in a particular instructional setting.

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

None or , Students

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

None or , Students

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

None or , Students

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

None or , Students



6-3a. Of the students enrolled in this school as of October 1, 2023, have any been identified as English language learners (ELLs), 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 6-6a on page 26.



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

Students

6-4. Does this school have instruction specifically designed to address the needs of ELL or LEP students?

Yes

No → GO TO item 6-6a on page 26.



6-5a. 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



6-6a. 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 6-7 on page 27.*



b. Around October 1, 2023, did you have any PREKINDERGARTEN students enrolled in this school?

Yes

No → *GO TO item 6-6c 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, 2023, 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




6-7. Around October 1, 2023, 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 7 on page 28.](#)

6-8a. How many PREKINDERGARTEN students at this school participate in the Title I program?

 *Mark 'None' if no prekindergarten students participate in the Title I program.*

None or Prekindergarten students

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

 *Mark 'None' if no students in grades K-12 participate in the Title I program.*

None or K-12 students

6-9. 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



7. CONTACT INFORMATION

7-1 What is the name of the person who completed most of this questionnaire?

7-2. What is their job title?

7-3. What is their work e-mail address?

7-4. What is the school's phone number?

Area code Number

 - -

7-5. Please verify this school'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 name

Mailing address

City

State

ZIP Code

7-6a. Is the physical or street address of this school the same as the mailing address?

Yes → *GO TO item 7-7 on page 29.*

No



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

Street

City

State

ZIP Code



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

MM

DD

YYYY

7-8. Please indicate how much time it took this school to complete this form, not counting interruptions.

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

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 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001



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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>



**8. 2023-24 NTPS Public School Teacher Questionnaire
(NTPS-4A)**



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

NATIONAL TEACHER AND PRINCIPAL SURVEY

2023-24 SCHOOL YEAR

TEACHER QUESTIONNAIRE

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

**U.S. CENSUS BUREAU
ATTN: DCB 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).

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

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



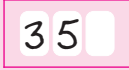
FORM **NTPS-4A**
(03-27-2023) D4

OMB No. 1850-0598: Approval Expires xx/xx/xxxx



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 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.

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 teachers who teach 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 4035, 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 teacher (i.e., filling the role of a regular teacher for 4 or more continuous weeks)
- 5 Short-term substitute teacher (i.e., filling the role of a regular teacher for less than 4 continuous weeks)
- 6 Student teacher
- 7 Teacher aide
- 8 Administrator (e.g., principal, assistant principal, director)
- 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 (2022-23), 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 ↴



1-6a. Have you ever worked as a substitute teacher?

🍏 Exclude times you covered a class for other teachers while working as a full-time teacher.

Yes

No → GO TO item 1-7 below.

**b. How many school years did you work as a substitute teacher?**

🍏 If you worked only part of a school year as a substitute teacher, please include the partial year as a full year.

School years

1-7. 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

1-8. 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

1-9. 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

1-10. 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?

🍏 Mark (X) 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 Program or Plan (IEP) because they have disabilities or have special needs?

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

🍏 Mark 'None' if you do NOT teach any students with an IEP.

None or Students with an IEP

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.

🍏 Mark 'None' if you do NOT teach any students that are ELL or LEP.

None or ELL or LEP Students

2-4. Using Table 1 on page 9, 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 9.

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 that helps with skills improvement in some or all of their lessons?

Yes

No → [GO TO item 2-7 below.](#)



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 10.](#)

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 8.](#)

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' and 'Days per week' boxes 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: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; 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: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; 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: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; 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: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; 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: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 20px; 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 11.



**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 7.

If you marked box 3, 4, or 5 for item 2-7 → **GO TO Section 3 on page 11.**

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.

00	Number of classes or sections
----	-------------------------------

2-13. Using Table 1 on page 9, 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	1 9 2	Algebra II	1 1	3 3
(1)	0 0 0		0 0	0 0 0
(2)	0 0 0		0 0	0 0 0
(3)	0 0 0		0 0	0 0 0
(4)	0 0 0		0 0	0 0 0
(5)	0 0 0		0 0	0 0 0
(6)	0 0 0		0 0	0 0 0
(7)	0 0 0		0 0	0 0 0
(8)	0 0 0		0 0	0 0 0
(9)	0 0 0		0 0	0 0 0
(10)	0 0 0		0 0	0 0 0

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 14.**



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 14.*

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 12, 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 13.**



g. Using Table 2 on page 12, 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 12, what was your minor field of study?

<input type="text"/>	Minor Field of Study Code		Minor Field of Study Label
----------------------	------------------------------	--	-------------------------------

3-2a. Do you have a master's degree?

- Yes
- No → *GO TO item 3-3 on page 14.*

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 14.*

- Yes
- No

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

<input type="text"/>	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 12, what was your major field of study for your master's degree?

<input type="text"/>	Major Field of Study Code		Major Field of Study Label
----------------------	------------------------------	--	-------------------------------



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

Yes
 No → GO TO item 3-4a on page 15.

a. Degree or certificate	b. Using Table 2 on page 12, 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

How often did you incorporate this into your teaching?

- Not often
- Somewhat often
- Very often

GO TO item 3-5b below.

b. Lesson planning?

- Yes →
- No

How often did you incorporate this into your teaching?

- Not often
- Somewhat often
- Very often

GO TO item 3-5c on page 16.



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

c. How to assess learning?

Yes →

No



How often did you incorporate this into your teaching?

Not often

Somewhat often

Very often

GO TO item 3-5d below.

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

Yes →

No



How often did you incorporate this into your teaching?

Not often

Somewhat often

Very often

GO TO item 3-5e below.

e. How to serve students from diverse economic backgrounds?

Yes →

No



How often did you incorporate this into your teaching?

Not often

Somewhat often

Very often

GO TO item 3-5f below.

f. How to serve students with special needs?

Yes →

No



How often did you incorporate this into your teaching?

Not often

Somewhat often

Very often

GO TO item 3-5g on page 17.



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

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

Yes →

No

How often did you incorporate this into your teaching?

Not often

Somewhat often

Very often

GO TO item 3-6a below.

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 who did not earn a four-year education degree or complete a traditional teacher preparation program 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 FIVE content areas or endorsements. These can be on one certificate or across multiple certificates, if applicable.

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.

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 21.

b. Using Table 3 on page 19, in what main content area(s) and grade range(s) are you certified or endorsed to teach in THIS state?

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

🍏 If you are not restricted to a specific grade range(s), mark (X) all three grade ranges.

(1) Main Content Area

Content Area Code

Content Area Label

(2) Certification Grade Range (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. Are you certified or endorsed to teach in additional content areas in THIS state?

Yes → GO TO item 4-2d on page 20.

No → GO TO Section 5 on page 21.



Table 3. Certification Content Area Codes and Labels For Questions 4-2b and 4-2d**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 Traumatically 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 Section 5 on page 21.

4-2d. Using Table 3 on page 19, please record all ADDITIONAL content areas and grade ranges in which you are certified or endorsed to teach in THIS state:

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

Content Area	Certification Grade Range (Mark (X) all that apply.)
<p>(1) Content Area Code</p> <div style="border: 1px solid black; width: 60px; height: 25px; margin: 5px 0;"></div> <p>Content Area Label</p> <div style="border: 1px solid black; width: 270px; height: 25px; margin: 5px 0;"></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; width: 60px; height: 25px; margin: 5px 0;"></div> <p>Content Area Label</p> <div style="border: 1px solid black; width: 270px; height: 25px; margin: 5px 0;"></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; width: 60px; height: 25px; margin: 5px 0;"></div> <p>Content Area Label</p> <div style="border: 1px solid black; width: 270px; height: 25px; margin: 5px 0;"></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; width: 60px; height: 25px; margin: 5px 0;"></div> <p>Content Area Label</p> <div style="border: 1px solid black; width: 270px; height: 25px; margin: 5px 0;"></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>



5. TEACHER EVALUATIONS

5-1. During the LAST school year (2022-23), were you evaluated at THIS school?

Yes

No →

During the LAST school year (2022-23), why were you not evaluated at THIS school?

I was not a teacher at this school last year.

I was not evaluated because I am only evaluated every 2 or more years.

This school does not conduct teacher evaluations.

I was not evaluated for another reason. Please specify ↴

GO TO Section 6 on page 23.

5-2. To what extent do you agree or disagree with the following statements about THIS school's evaluation process LAST school year (2022-23)?

🍏 Mark (X) one box on each line.

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. Overall, the evaluation process was fair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The evaluation process was based on what is known about good teaching practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I had a strong understanding of how I would be evaluated at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The evaluation process helped me to determine whether I had been successful with my students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. The evaluation process had a positive effect on my teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Overall, the evaluation process led to improved student learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. The results of my evaluation were accurate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



5-3. Did you receive feedback from your evaluation LAST school year (2022-23)?

- Yes
- No → *GO TO item 5-5 below.*

5-4a. Did you receive feedback on your teaching methods from your evaluation LAST school year (2022-23)?

- Yes
- No

b. Did you receive feedback on how well you were meeting the school's performance goals from your evaluation LAST school year (2022-23)?

- Yes
- No

c. Have you used the feedback you received from your evaluation LAST school year (2022-23) to improve your teaching?

- Yes
- No

5-5. Was participation in professional development considered during your evaluation LAST school year (2022-23)?

- Yes
- No



6. TEACHER PROFESSIONAL DEVELOPMENT

6-1. During the past 12 months, how frequently, if at all, did you participate in each of the following professional development activities?

🍏 If an activity occurred all day for several days, but less than one month of the year in total, please mark 'Once or a few times a year'.

🍏 Mark (X) one box on each line.

	Did not participate	Once or a few times a year	Once or a few times a month	Once or a few times a week
a. Planned lessons or courses with other teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consulted with other teachers about individual students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Collaborated with other teachers on issues of instruction, excluding administrative meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Acted as a coach or mentor to other teachers or staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Received coaching or mentoring from other teachers or staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



6-2. During the past 12 months, did you participate in any of the following types of professional development?

☛ *Select all that apply if a specific topic was covered in both an informational presentation (i.e., a lecture explaining general information) and a skill-building training (i.e., a training to develop and/or apply new skills).*

a. Professional development that directly relates to the content of your teaching assignment

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2b below.

b. Professional development on using technology to support instruction

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2c below.

c. Professional development on teaching virtually (or virtual teaching) or remote learning

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2d on page 25.



6-2. *Continued* – During the past 12 months, did you participate in any of the following types of professional development?

d. Professional development on teaching Science, Technology, Engineering or Mathematics (STEM), or incorporating STEM into other subjects

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2e below.

e. Professional development on classroom and behavior management

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2f below.

f. Professional development on Social Emotional Learning (SEL)

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2g on page 26.



6-2. Continued – During the past 12 months, did you participate in any of the following types of professional development?

g. Professional development on instruction strategies to teach students with disabilities or an IEP

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2h below.

h. Professional development on differentiated instruction for all students

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2i below.

i. Professional development on preparing students to take annual assessments

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2j on page 27.



6-2. Continued – During the past 12 months, did you participate in any of the following types of professional development?

j. Professional development on analyzing and interpreting student achievement data

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-3 below.

6-3. Considering all of the professional development you participated in during the past 12 months, how relevant was it to your teaching assignment?

🍏 *Mark (X) only one box.*

Did not complete any professional development in the past 12 months → *GO TO item 6-5 on page 28.*

- Not relevant at all
- Somewhat relevant
- Very relevant

6-4. As a result of completing any professional development activities in the past 12 months, did you receive credits toward re-certification or advanced certification?

- Yes
- No



6-5. To what extent do you agree or disagree with the following statements about YOUR professional development as a teacher at THIS school?

🍏 *Mark (X) one box on each line.*

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. I have sufficient resources available for my professional development.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I have access to about the same amount of resources for professional development as other teachers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. My professional development opportunities are aligned with this school's performance goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The techniques I am learning about in my professional development will help improve student learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I feel capable of incorporating the kinds of techniques I am learning about in my professional development.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The types of professional development available to me are consistent with my own professional goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. I have the opportunity to provide feedback to school leaders about my professional development experience to determine its value and impact.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



7. TEACHER ENGAGEMENT

7-1. To what extent do you agree or disagree with the following statements about your work at THIS school?

🍏 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. There are too many restrictions on what I can discuss in my classroom.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. 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"/>
f. I think about transferring to another school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. 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"/>
h. 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"/>

7-2. To what extent is your teaching impacted by the following:

🍏 Mark (X) one box on each line.

	Not at all	A small extent	A moderate extent	A great extent
a. Complaints from parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Lack of parental support for school policies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Fear of litigation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Insufficient teaching staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Insufficient non-teaching staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Insufficient school resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



8-11. How much do you typically pay each month on your student loans?

🍏 Please provide the amount you pay each month, even if it is different from your minimum monthly payment.

🍏 Please answer based on any federal, private, state, and school loans you have, including loans for your bachelor's degree and for any education since your bachelor's degree. If the amount changes, please report the most recent amount.

\$, .00 per month

8-12. Please indicate your level of stress regarding your student loan debt. Would you say your level of stress is:

- Very low
- Low
- Moderate
- High
- Very high

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 aware of any student debt forgiveness programs for teachers?

- Yes
- No → GO TO item 8-18 on page 34.

8-15. Are you currently, or have you ever been, enrolled in any student debt forgiveness programs for teachers?

- Yes → GO TO item 8-17 on page 34.
- No → GO TO item 8-16 on page 34.



8-16. Why have you not enrolled in any student debt forgiveness programs for teachers?

🍏 *Mark (X) all that apply.*

- I applied to a program(s) but did not qualify.
- I do not expect to qualify for any program(s).
- I have not had a chance to apply yet.
- I am not sure how to apply.
- I have not decided which program(s) to apply to.
- I do not think applying would be worth it.
- All my student debt has been paid off.
- I never had any student debt.

GO TO item 8-18 below.

8-17. What type of student debt forgiveness program are you currently enrolled in or have you ever been enrolled in?

🍏 *Mark (X) all that apply.*

- A federal program
- A state or county program
- A program through my school or school district
- A program through another entity – please specify ↴

8-18. Are you a member of a teachers' union or an employee association similar to a union?

- Yes
- No

8-19a. Does your school, district, or school system offer tenure?

- Yes
- No → GO TO Section 9 on page 35.

**b. Are you tenured at your current school?**

- Yes
- No




9. TEACHER DEMOGRAPHIC INFORMATION

9-1. Are you of Hispanic or Latino origin?

- Yes
- No

9-2. 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


9-3. What is your year of birth?

The next few questions will help us better understand the experiences of teachers of all gender identities and sexual orientations.


9-4. What sex were you assigned at birth (what was on your original birth certificate)?

- Female
- Male

9-5. What is your gender?

- Female
- Male
- Another gender – Please specify 

9-6. Which of the following do you think of yourself as?

- Straight
- Lesbian or gay
- Bisexual
- Another sexual orientation - Please specify 



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. We may contact you in the future for a short follow-up survey on teacher retention. Without your contact information, we may not be able to reach you, especially if you leave your current school before the next school year. This short follow-up survey will provide policymakers with information about why teachers stay in teaching, change schools, or leave the profession.

Please **PRINT** your name, your home address, your work and home e-mail addresses, and your cell and home telephone numbers.

a. First name

Middle name

Last name

Suffix

b. Home street address

c. City

d. State

e. ZIP Code



f. Work e-mail address

g. Home e-mail address

h. Cell phone number

Area code Number

I opt out of receiving text messages for follow-up purposes.

i. Home phone number

Area code Number



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**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 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

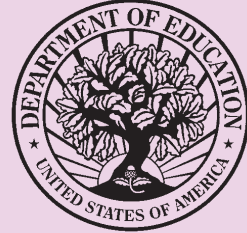
**To learn more about this survey and to
access reports from earlier collections, see the
National Teacher and Principal Survey (NTPS) website at:
<http://nces.ed.gov/surveys/ntps>**

**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>**



**9. 2023-24 NTPS Private School Teacher Questionnaire
(NTPS-4B)**



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

NATIONAL TEACHER AND PRINCIPAL SURVEY

2023-24 SCHOOL YEAR

PRIVATE SCHOOL TEACHER QUESTIONNAIRE

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

**U.S. CENSUS BUREAU
ATTN: DCB 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).

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

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

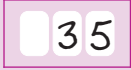

FORM **NTPS-4B**
(03-27-2023) D4

OMB No. 1850-0598: Approval Expires xx/xx/xxxx



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 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.

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 teachers who teach 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 4035, 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 teacher (i.e., filling the role of a regular teacher for 4 or more continuous weeks)
- 5 Short-term substitute teacher (i.e., filling the role of a regular teacher for less than 4 continuous weeks)
- 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 (2022-23), 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 ↴



1-6a. Have you ever worked as a substitute teacher?

🍏 Exclude times you covered a class for other teachers while working as a full-time teacher.

Yes

No → GO TO item 1-7 below.

b. How many school years did you work as a substitute teacher?

🍏 If you worked only part of a school year as a substitute teacher, please include the partial year as a full year.

School years

1-7. 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

1-8. 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

1-9. 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

1-10. 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?

🍎 Mark (X) 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?

🍎 Mark 'None' if you do NOT teach any students with a formally-identified disability.

None or 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.*

🍎 Mark 'None' if you do NOT teach any students that are ELL or LEP.

None or ELL or LEP Students

2-4. Using Table 1 on page 9, 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 9.

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 that helps with skills improvement in some or all of their lessons?

Yes

No → [GO TO item 2-7 below.](#)



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 10.](#)

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 8.](#)

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' and 'Days per week' boxes 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: 30px; 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: 30px; 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: 30px; 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: 30px; 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: 30px; height: 20px; border: 1px solid black;" type="text"/>

GO TO Section 3 on page 11.



**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 7.

If you marked box 3, 4, or 5 for item 2-7 → GO TO Section 3 on page 11.

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.

00
 Number of classes or sections

2-13. Using Table 1 on page 9, 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
<i>Example</i>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1 9 2</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">Algebra II</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">1 1</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">3 3</div>
(1)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(2)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(3)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(4)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(5)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(6)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(7)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(8)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(9)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(10)	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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 14.



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 14.

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 12, 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 13.



g. Using Table 2 on page 12, 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 12, what was your minor field of study?

<input type="text"/>	Minor Field of Study Code		Minor Field of Study Label
----------------------	---------------------------	--	----------------------------

3-2a. Do you have a master's degree?

- Yes
- No → **GO TO item 3-3 on page 14.**

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 14.*

- Yes
- No

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

<input type="text"/>	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 12, what was your major field of study for your master's degree?

<input type="text"/>	Major Field of Study Code		Major Field of Study Label
----------------------	---------------------------	--	----------------------------



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

Yes
 No → GO TO item 3-4a on page 15.

a. Degree or certificate	b. Using Table 2 on page 12, 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

How often did you incorporate this into your teaching?

- Not often
- Somewhat often
- Very often

GO TO item 3-5b below.

b. Lesson planning?

- Yes →
- No

How often did you incorporate this into your teaching?

- Not often
- Somewhat often
- Very often

GO TO item 3-5c on page 16.



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

c. How to assess learning?

Yes →

No



How often did you incorporate this into your teaching?

Not often

Somewhat often

Very often

GO TO item 3-5d below.

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

Yes →

No



How often did you incorporate this into your teaching?

Not often

Somewhat often

Very often

GO TO item 3-5e below.

e. How to serve students from diverse economic backgrounds?

Yes →

No



How often did you incorporate this into your teaching?

Not often

Somewhat often

Very often

GO TO item 3-5f below.

f. How to serve students with special needs?

Yes →

No



How often did you incorporate this into your teaching?

Not often

Somewhat often

Very often

GO TO item 3-5g on page 17.



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

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

Yes →

No

How often did you incorporate this into your teaching?

Not often

Somewhat often

Very often

GO TO item 3-6a below.

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 who did not earn a four-year education degree or complete a traditional teacher preparation program 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 FIVE content areas or endorsements. These can be on one certificate or across multiple certificates, if applicable.

4-2a. Do you have a current teaching certificate that certifies you to teach in THIS state?

- Yes
- No → GO TO item 4-2c below.

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. Do you currently hold regular or full certification by an accrediting or certifying body that is NOT a state?

- Yes
- No

d. Using Table 3 on page 19, in what main content area(s) and grade range(s) are you certified or endorsed to teach?

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

🍏 If you are not restricted to a specific grade range(s), mark (X) all three grade ranges.

(1) Main Content Area

Content Area Code

Content Area Label

(2) Certification Grade Range (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



Table 3. Certification Content Area Codes and Labels For Questions 4-2d and 4-2f**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



4-2e. Are you certified or endorsed to teach in additional content areas?

- Yes
- No → GO TO Section 5 on page 21.

f. Using Table 3 on page 19, please record all ADDITIONAL content areas and grade ranges in which you are certified or endorsed to teach:

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

Content Area	Certification Grade Range (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> <input style="width: 100%; height: 20px;" type="text"/>	<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> <input style="width: 100%; height: 20px;" type="text"/>	<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> <input style="width: 100%; height: 20px;" type="text"/>	<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> <input style="width: 100%; height: 20px;" type="text"/>	<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>



5. TEACHER EVALUATIONS

5-1. During the LAST school year (2022-23), were you evaluated at THIS school?

Yes

No →

During the LAST school year (2022-23), why were you not evaluated at THIS school?

I was not a teacher at this school last year.

I was not evaluated because I am only evaluated every 2 or more years.

This school does not conduct teacher evaluations.

I was not evaluated for another reason. Please specify ↴

GO TO Section 6 on page 23.

5-2. To what extent do you agree or disagree with the following statements about THIS school's evaluation process LAST school year (2022-23)?

🍏 Mark (X) one box on each line.

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. Overall, the evaluation process was fair.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The evaluation process was based on what is known about good teaching practice.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I had a strong understanding of how I would be evaluated at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The evaluation process helped me to determine whether I had been successful with my students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. The evaluation process had a positive effect on my teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Overall, the evaluation process led to improved student learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. The results of my evaluation were accurate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



5-3. Did you receive feedback from your evaluation LAST school year (2022-23)?

- Yes
- No → GO TO item 5-5 below.

5-4a. Did you receive feedback on your teaching methods from your evaluation LAST school year (2022-23)?

- Yes
- No

b. Did you receive feedback on how well you were meeting the school's performance goals from your evaluation LAST school year (2022-23)?

- Yes
- No

c. Have you used the feedback you received from your evaluation LAST school year (2022-23) to improve your teaching?

- Yes
- No

5-5. Was participation in professional development considered during your evaluation LAST school year (2022-23)?

- Yes
- No



6. TEACHER PROFESSIONAL DEVELOPMENT

6-1. During the past 12 months, how frequently, if at all, did you participate in each of the following professional development activities?

🍏 If an activity occurred all day for several days, but less than one month of the year in total, please mark 'Once or a few times a year'.

🍏 Mark (X) one box on each line.

	Did not participate	Once or a few times a year	Once or a few times a month	Once or a few times a week
a. Planned lessons or courses with other teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Consulted with other teachers about individual students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Collaborated with other teachers on issues of instruction, excluding administrative meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Acted as a coach or mentor to other teachers or staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Received coaching or mentoring from other teachers or staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



6-2. During the past 12 months, did you participate in any of the following types of professional development?

☛ *Select all that apply if a specific topic was covered in both an informational presentation (i.e., a lecture explaining general information) and a skill-building training (i.e., a training to develop and/or apply new skills).*

a. Professional development that directly relates to the content of your teaching assignment

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2b below.

b. Professional development on using technology to support instruction

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2c below.

c. Professional development on teaching virtually (or virtual teaching) or remote learning

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2d on page 25.



6-2. *Continued* – During the past 12 months, did you participate in any of the following types of professional development?

d. Professional development on teaching Science, Technology, Engineering or Mathematics (STEM), or incorporating STEM into other subjects

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2e below.

e. Professional development on classroom and behavior management

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2f below.

f. Professional development on Social Emotional Learning (SEL)

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2g on page 26.



6-2. *Continued* – During the past 12 months, did you participate in any of the following types of professional development?

g. Professional development on instruction strategies to teach students with disabilities

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2h below.

h. Professional development on differentiated instruction for all students

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2i below.

i. Professional development on preparing students to take annual assessments

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-2j on page 27.



6-2. Continued – During the past 12 months, did you participate in any of the following types of professional development?

j. Professional development on analyzing and interpreting student achievement data

- Yes, informational presentation(s) →
- Yes, skill-based training(s) →
- Did not participate

How often did you incorporate this type of professional development into your teaching?

- Never
- Incorporated once or a few times a year
- Incorporated once or a few times a month
- Incorporated once or a few times a week

GO TO item 6-3 below.

6-3. Considering all of the professional development you participated in during the past 12 months, how relevant was it to your teaching assignment?

🍏 *Mark (X) only one box.*

- Did not complete any professional development in the past 12 months → *GO TO item 6-5 on page 28.*
- Not relevant at all
- Somewhat relevant
- Very relevant

6-4. As a result of completing any professional development activities in the past 12 months, did you receive credits toward re-certification or advanced certification?

- Yes
- No



6-5. To what extent do you agree or disagree with the following statements about YOUR professional development as a teacher at THIS school?

🍏 *Mark (X) one box on each line.*

	Strongly disagree	Somewhat disagree	Somewhat agree	Strongly agree
a. I have sufficient resources available for my professional development.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I have access to about the same amount of resources for professional development as other teachers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. My professional development opportunities are aligned with this school's performance goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. The techniques I am learning about in my professional development will help improve student learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I feel capable of incorporating the kinds of techniques I am learning about in my professional development.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The types of professional development available to me are consistent with my own professional goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. I have the opportunity to provide feedback to school leaders about my professional development experience to determine its value and impact.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



7. TEACHER ENGAGEMENT

7-1. To what extent do you agree or disagree with the following statements about your work at THIS school?

🍏 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. There are too many restrictions on what I can discuss in my classroom.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. 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"/>
f. I think about transferring to another school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. 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"/>
h. 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"/>

7-2. To what extent is your teaching impacted by the following:

🍏 Mark (X) one box on each line.

	Not at all	A small extent	A moderate extent	A great extent
a. Complaints from parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Lack of parental support for school policies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Fear of litigation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Insufficient teaching staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Insufficient non-teaching staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Insufficient school resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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 2023, did you have any earnings from:

🍏 Report amounts in whole dollars.

a. Teaching summer school in this school or any other school?

Yes →

How much?

\$, .00

No

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 during the summer?

Yes →

How much?

\$, .00

No

Did all of these earnings come from your current school?

Yes

No

GO TO item 8-1c below.

c. Working in any NONSCHOOL job during the summer?

Yes →

How much?

\$, .00

No

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



8-11. How much do you typically pay each month on your student loans?

 Please provide the amount you pay each month, even if it is different from your minimum monthly payment.

 Please answer based on any federal, private, state, and school loans you have, including loans for your bachelor's degree and for any education since your bachelor's degree. If the amount changes, please report the most recent amount.

\$, .00 per month

8-12. Please indicate your level of stress regarding your student loan debt. Would you say your level of stress is:

- Very low
- Low
- Moderate
- High
- Very high

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 aware of any student debt forgiveness programs for teachers?

- Yes
- No → [GO TO item 8-18 on page 34.](#)

8-15. Are you currently, or have you ever been, enrolled in any student debt forgiveness programs for teachers?

- Yes → [GO TO item 8-17 on page 34.](#)
- No → [GO TO item 8-16 on page 34.](#)



8-16. Why have you not enrolled in any student debt forgiveness programs for teachers?

🍏 *Mark (X) all that apply.*

- I applied to a program(s) but did not qualify.
- I do not expect to qualify for any program(s).
- I have not had a chance to apply yet.
- I am not sure how to apply.
- I have not decided which program(s) to apply to.
- I do not think applying would be worth it.
- All my student debt has been paid off.
- I never had any student debt.

GO TO item 8-18 below.

8-17. What type of student debt forgiveness program are you currently enrolled in or have you ever been enrolled in?

🍏 *Mark (X) all that apply.*

- A federal program
- A state or county program
- A program through my school or school district
- A program through another entity – please specify ↴

8-18. Are you a member of a teachers' union or an employee association similar to a union?

- Yes
- No

8-19a. Does your school offer tenure?

- Yes
- No → GO TO Section 9 on page 35.

**b. Are you tenured at your current school?**

- Yes
- No




9. TEACHER DEMOGRAPHIC INFORMATION

9-1. Are you of Hispanic or Latino origin?

Yes

No

9-2. 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

9-3. What is your year of birth?

9-4. What is your gender?

Female

Male

Another gender – Please specify 



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. We may contact you in the future for a short follow-up survey on teacher retention. Without your contact information, we may not be able to reach you, especially if you leave your current school before the next school year. This short follow-up survey will provide policymakers with information about why teachers stay in teaching, change schools, or leave the profession.

Please **PRINT** your name, your home address, your work and home e-mail addresses, and your cell and home telephone numbers.

a. First name

Middle name

Last name

Suffix

b. Home street address

c. City

d. State

e. ZIP Code



f. Work e-mail address

g. Home e-mail address

h. Cell phone number

Area code Number

I opt out of receiving text messages for follow-up purposes.

i. Home phone number

Area code Number



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**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 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>**



**10. 2023-24 NTPS Public and Private School Principal
Instrument Login Page**



National Teacher and Principal Survey
Principal Questionnaire
2023-24 School Year



Welcome to the 2023-24 National Teacher and Principal Survey (NTPS) Principal Questionnaire

→ Enter the 8-digit User ID provided in the email and letter that we sent you.

User ID:

Login

Email us: ntps@census.gov

Call us: [1-888-595-1338](tel:1-888-595-1338)

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). 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).

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 25 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.

U.S. Census Bureau Notice and Consent Warning

You are accessing a United States Government computer network. Any information you enter into this system is confidential. It may be used by the Census Bureau for statistical purposes and to improve the website.

Use of this system indicates your consent to collection, monitoring, recording, and use of the information that you provide for any lawful government purpose. So that our website remains safe and available for its intended use, network traffic is monitored to identify unauthorized attempts to access, upload, change information, or otherwise cause damage to the web service. Use of the government computer network for unauthorized purposes is a violation of Federal law and can be punished with fines or imprisonment (PUBLIC LAW 99-474).

OMB No.: 1850-0598

OMB Expiration Date:

[Accessibility](#) | [Security](#)

**11. 2023-24 NTPS Public and Private School Instrument
Login and Confidentiality Pages**



National Teacher and Principal Survey
School Questionnaire
2023-24 School year



Welcome to the 2023-24 National Teacher and Principal Survey (NTPS) School Questionnaire

→ Enter the 8-digit User ID provided in the email and letter that we sent to you.

User ID:

Login

Email us: ntps@census.gov

Call us: [1-888-595-1338](tel:1-888-595-1338)

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 between **13 and 33** 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.

U.S. Census Bureau Notice and Consent Warning

You are accessing a United States Government computer network. Any information you enter into this system is confidential. It may be used by the Census Bureau for statistical purposes and to improve the website.

Use of this system indicates your consent to collection, monitoring, recording, and use of the information that you provide for any lawful government purpose. So that our website remains safe and available for its intended use, network traffic is monitored to identify unauthorized attempts to access, upload, change information, or otherwise cause damage to the web service. Use of the government computer network for unauthorized purposes is a violation of Federal law and can be punished with fines or imprisonment (PUBLIC LAW 99-474).

OMB No.: 1850-0598

OMB Expiration Date:

[Accessibility](#) | [Security](#)

Public School Instrument



School Questionnaire
National Teacher and Principal Survey
2023-24 School Year

[INSTRUCTIONS](#)[FAQs](#)[ENDORSERS](#)[CONTACT US](#)[SAVE AND CONTINUE LATER](#)

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

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).

[Next](#)

OMB NO.: 1850-0598
OMB EXPIRATION DATE:

[ACCESSIBILITY](#) | [SECURITY](#)

Private School Instrument



Private School School Questionnaire
National Teacher and Principal Survey
2023-24 School Year

[INSTRUCTIONS](#)[FAQs](#)[ENDORSERS](#)[CONTACT US](#)[SAVE AND CONTINUE LATER](#)

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, 20 U.S.C. §9543).

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).

[Next](#)

OMB NO.: 1850-0598
OMB EXPIRATION DATE:

[ACCESSIBILITY](#) | [SECURITY](#)

**12. 2023-24 NTPS Public and Private School Teacher
Instrument Login Page**



National Teacher and Principal Survey
Teacher Questionnaire
2023-24 School Year



Welcome to the 2023-24 National Teacher and Principal Survey (NTPS) Teacher Questionnaire

→ Enter the 8-digit User ID provided in the email and letter that we sent you.

User ID:

Login

Email us: ntps@census.gov

Call us: [1-888-595-1338](tel:1-888-595-1338)

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). 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).

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 #4035, Washington, DC 20202.

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Use of this system indicates your consent to collection, monitoring, recording, and use of the information that you provide for any lawful government purpose. So that our website remains safe and available for its intended use, network traffic is monitored to identify unauthorized attempts to access, upload, change information, or otherwise cause damage to the web service. Use of the government computer network for unauthorized purposes is a violation of Federal law and can be punished with fines or imprisonment (PUBLIC LAW 99-474).

OMB No.: 1850-0598

OMB Expiration Date:

[Accessibility](#) | [Security](#)