**School Pulse Panel**

**(SPP 2023-24)**

**OMB# 1850-0975 v.2**

**Supporting Statement**

**Appendix B**

**Item Bank**

**National Center for Education Statistics (NCES)**

**U.S. Department of Education**

**March 2023**

**revised June 2023**

*The School Pulse Panel is uniquely structured to be responsive to the needs of policymakers. The monthly survey will encompass broad content domains, each with a series of measurement items addressing a specific research question. Throughout early 2023, NCES has met with policymakers across government and solicited potential areas of inquiry (as well as specific items) for potential inclusion in the 2023-24 SPP. The item bank presented here is a collection of proposed items, as well as previously administered items from the 2021 SPP.*

*As described in Part A, the collection of items that will be used in each monthly data collection will be submitted for 30D public comment each quarter. The questionnaires to be administered in August, September, and October 2023 have been added to this package as Appendix C.*

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# Absenteeism (School-Level | Previously Approved)

*The following items will ask about your experiences with chronic absenteeism at your school during the 2021-22 school year. Chronic absenteeism is defined as students who are absent for at least 10 percent of the school year.*

**ABS1**. During the 2021-22 school year, approximately what percentage of students at your school have been chronically absent? Include excused and unexcused absences.

*Chronic absenteeism is defined as students who are absent for at least 10 percent the school year*

* \_\_\_\_ percent of students

**ABS2a**. Compared to **a typical school year BEFORE the start of the COVID-19 pandemic**, how has chronic absenteeism changed at your school during the 2021-22 school year? Include excused and unexcused absences.

* Chronic student absenteeism has decreased a lot
* Chronic student absenteeism has decreased a little
* Chronic student absenteeism has remained about the same
* Chronic student absenteeism has increased a little
* Chronic student absenteeism has increased a lot
* Don’t Know

**ABS2b**. Compared to the **LAST school year (2020-21)**, how has chronic absenteeism changed at your school during the 2021-22 school year? Include excused and unexcused absences.

* Chronic student absenteeism has decreased a lot
* Chronic student absenteeism has decreased a little
* Chronic student absenteeism has remained about the same
* Chronic student absenteeism has increased a little
* Chronic student absenteeism has increased a lot
* Don’t Know

*The following items will ask about your experiences with teacher absences and your ability to find substitute teachers.*

**ABS3a**. Compared to a **typical school year BEFORE the start of the COVID-19 pandemic**, how have teacher absences at your school changed during the 2021-22 school year? Include planned and unplanned absences.

* Teacher absences have decreased a lot
* Teacher absences have decreased a little
* Teacher absences have remained about the same
* Teacher absences have increased a little
* Teacher absences have increased a lot
* Don’t Know

**ABS3b**. Compared to the **LAST school year (2020-21)**, how have teacher absences at your school changed during the 2021-22 school year? Include planned and unplanned absences.

* Teacher absences have decreased a lot
* Teacher absences have decreased a little
* Teacher absences have remained about the same
* Teacher absences have increased a little
* Teacher absences have increased a lot
* Don’t Know

**ABS3c**. Please briefly describe why you have seen an increase in teacher absences at your school. {Display if ABS3b = “…increased a little” OR “…increased a lot”}

**ABS3d**. Please briefly describe why you have seen a decrease in teacher absences at your school, including any policies, practices, or strategies your school has implemented to decrease teacher absences. {Display if ABS3b = “…decreased a little” OR “…decreased a lot”}

**ABS4a**. Compared to a **typical year BEFORE the start of the COVID-19 pandemic**, how easy or difficult has it been for your school to get substitute teachers during the 2021-22 school year?

* Much easier
* Somewhat easier
* About the same
* Somewhat more difficult
* Much more difficult
* Don’t Know

**ABS4b**. Compared to the **last school year (2020-21)**, how easy or difficult has it been for your school to get substitute teachers during the 2021-22 school year?

* Much easier
* Somewhat easier
* About the same
* Somewhat more difficult
* Much more difficult
* Don’t Know

**ABS5a**. During the 2021-22 school year, how has your school covered classes when there are teacher absences and you cannot find a substitute teacher? *Select all that apply*.

* Administrators cover classes
* Non-teaching staff (e.g., media specialists, paraprofessionals, etc.) cover classes
* Other teachers cover classes during their prep periods
* Separate sections or classes are combined into one room
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Not Applicable – my school has always been able to find substitute teachers

**ABS5b**. During the 2021-22 school year, how frequently has your school needed to use the alternative class coverage strategies you indicated above? {Display if ABS5a ≠ N/A}

* Very Rarely
* Rarely
* Occasionally
* Very Frequently
* Always

**ABS6**. We’d like to learn more about what schools are experiencing while continuing to respond to the challenges of the COVID-19 pandemic. In the space below, please share any other information you would like the U.S. Department of Education and other federal policymakers to know about how you have dealt with **student and/or teacher absenteeism**.

# Absenteeism (School-Level | New)

**ABS#.** Does your school capture details on the reason(s) for a student’s absence, beyond excused versus unexcused?

* Yes
* No
* Don’t know

**ABS#.** Do you capture information on the following? Select all that apply {Display if *reason for absence item* = Yes}

* Fever (alone or in conjunction with any of the below illnesses)
* Respiratory illness generally (e.g., student has a cough/runny nose, but no specific diagnosis)
* COVID-19
* Gastrointestinal illness (e.g., nausea/vomiting and/or diarrhea)
* Mental health
* Other excused absence (e.g., doctor appointment)

**ABS#.** Do you share data on absence categories beyond excused versus unexcused totals with any of the following entities? {Display if *reason for absence item* = Yes}

* The school district
* The state education agency
* The state department of health
* Local healthcare systems/clinics

**ABS#.** Do you use a commercially available student information system to share absence data with your district or state? *Select all that apply.*

* Yes, with our district
* Yes, with our state
* No
* Don’t know

**ABS#.** Do you collaborate with any health entities (e.g., the department of health or a local hospital/clinic) to collect data on student health, for example, reasons for absence?

* Yes
* No
* Don’t know

# After-School Programs (School-Level | Previously Approved + New)

***The content of the items in this section has been previously approved, but have been reformatted to better fit the new items (following section)***

**ASP\_gate (formerly ASP1a)**. Which of the following after-school programs is your school offering during this school year? *Select all that apply.*

* **Academic assistance program**: After-school programs or services whose primary purpose is to provide instruction to students who need academic assistance{Display ASP\_aa items if selected}
* **Academic enrichment program**: After-school programs or services whose primary purpose is to provide instruction to students who seek academic enrichment{Display ASP\_ae items if selected}
* **Extended-day care** {Display ASP\_dc items if selected}
* **School-related activities and clubs** (e.g., athletics, student government, yearbook club, etc). {Display ASP\_ac items if selected}
* **Other**, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* We are **not offering** any after-school programming during this school year.

**ASP\_acad**. To the best of your knowledge, what percentage of your student body will participate in academically focused after-school program(s) offered by your school during the 2023-24 school year? {Display if ASP\_gate = assistance program OR enrichment program OR other}

*Academically focused after-school programs include assistance programs, enrichment programs, or other after-school programs. If a student participated in more than one of these programs, only count them once.*

\_\_\_\_\_\_\_\_ %

* Don’t know

*The following questions ask about your school’s* ***after-school******academic assistance program:***

**ASP\_aa1**. To the best of your knowledge, what percentage of your student body will participate in your school’s **academic assistance program** during the 2023-24 school year?

\_\_\_\_\_\_\_\_\_\_%

* Don’t know

**ASP\_aa2.** During a typical school week, how many days is the **academic assistance program** offered?

* 1 day per week
* 2 days per week
* 3 days per week
* 4 days per week
* 5 days per week
* Don’t know

**ASP\_aa3**. On a typical school day, how long do students spend in the **academic assistance program**?

* Up to 1 hour
* 1 – 2 hours
* 2 – 3 hours
* More than 3 hours
* Don’t know

**ASP\_aa4.** Which of the following best describes your school’s ability to provide its after-school **academic assistance program** to those who want to participate?

* We are able to provide our academic assistance program to ALL students who want to participate
* We are able to provide our academic assistance program to MOST students who want to participate
* We are able to provide our academic assistance program to SOME students who want to participate
* We are able to provide our academic assistance program to ONLY A FEW students who want to participate
* Don’t Know

**ASP\_aa5**. Do you partner, or have a contract, with any of the following types of organizations or groups to run your school’s after-school **academic assistance program**? *Select all that apply.*

* Other local K-12 schools
* Local colleges or universities
* Local libraries
* Academically focused groups (e.g., local museums, tutoring programs)
* Community businesses
* Community non-profit organizations
* Community health organizations
* City departments or agencies (e.g., parks department, mayor’s office, youth agencies, etc.)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**ASP\_aa6.** Which of the following personnel work in your school’s after-school **academic assistance program**? *Select all that apply.*

* Full-time teachers from your school
* Part-time teachers from your school
* Administrative staff from your school
* Tutors from your school
* Intervention specialists from your school
* Dedicated staff whose only job at your school is to work in your school’s after-school academic assistance program
* Staff from an outside organization you partner or contract with {Display if *ASP\_aa6* ≠ “None of the above” or “Don’t Know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**ASP\_aa7.** What sources of funding have been used to support your school’s after-school **academic assistance program** during this school year? *Select all that apply.*

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Other federal grants or programs
* State grants or programs
* Local grants or programs
* District or school financial funding
* Philanthropic support
* Partnerships or sponsorships with other organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**ASP\_aa8.** Which of the following best describes your school’s use of COVID-relief funds for your after-school **academic assistance program**? {Display if *ASP\_aa7* = ESSER and/or ARP ESSER}

* This is a new program funded by COVID-relief funds
* This program has been expanded or enhanced with funding from COVID-relief funds
* Don’t know

**ASP\_aa9.** What is the cost for the entire school year, per student, to run your school’s after-school **academic assistance program**?

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

**ASP\_aa10a**. Do families have to pay a fee for their child(ren) to participate in your school’s after-school **academic assistance program(s)**?

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

* Yes
* No
* Don’t know

**ASP\_aa10b**. How much does it cost for the entire school year, per student, for a family to send a child to your school’s after-school **academic assistance program**? {Display if *ASP\_aa10a* = Yes}

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs or purchasing materials necessary for participation.*

*If families could pay different fees based on certain factors (e.g., free- and reduced-price meal eligibility), report the highest cost a family could pay.*

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

*The following questions ask about your school’s* ***after-school******academic enrichment program:***

**ASP\_ae1**. To the best of your knowledge, what percentage of your student body will participate in your school’s **academic enrichment program** during the 2023-24 school year?

\_\_\_\_\_\_\_\_\_\_%

* Don’t know

**ASP\_ae2.** During a typical school week, how many days is the **academic enrichment program** offered?

* 1 day per week
* 2 days per week
* 3 days per week
* 4 days per week
* 5 days per week
* Don’t know

**ASP\_ae3**. On a typical school day, how long do students spend in the **academic enrichment program**?

* Up to 1 hour
* 1 – 2 hours
* 2 – 3 hours
* More than 3 hours
* Don’t know

**ASP\_ae4.** Which of the following best describes your school’s ability to provide its after-school **academic enrichment program** to those who want to participate?

* We are able to provide our academic enrichment program to ALL students who want to participate
* We are able to provide our academic enrichment program to MOST students who want to participate
* We are able to provide our academic enrichment program to SOME students who want to participate
* We are able to provide our academic enrichment program to ONLY A FEW students who want to participate
* Don’t Know

**ASP\_ae5**. Do you partner, or have a contract, with any of the following types of organizations or groups to run your school’s after-school **academic enrichment program**? *Select all that apply.*

* Other local K-12 schools
* Local colleges or universities
* Local libraries
* Academically focused groups (e.g., local museums, tutoring programs)
* Community businesses
* Community non-profit organizations
* Community health organizations
* City departments or agencies (e.g., parks department, mayor’s office, youth agencies, etc.)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**ASP\_ae6.** Which of the following personnel work in your school’s after-school **academic enrichment program**? *Select all that apply.*

* Full-time teachers from your school
* Part-time teachers from your school
* Administrative staff from your school
* Tutors from your school
* Intervention specialists from your school
* Dedicated staff whose only job at your school is to work in your school’s after-school academic enrichment program
* Staff from an outside organization you partner or contract with {Display if *ASP\_ae6* ≠ “None of the above” or “Don’t Know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**ASP\_ae7.** What sources of funding have been used to support your school’s after-school **academic enrichment program** during this school year? *Select all that apply.*

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Other federal grants or programs
* State grants or programs
* Local grants or programs
* District or school financial funding
* Philanthropic support
* Partnerships or sponsorships with other organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**ASP\_ae8.** Which of the following best describes your school’s use of COVID-relief funds for your after-school **academic enrichment program**? {Display if *ASP\_ae7* = ESSER and/or ARP ESSER}

* This is a new program funded by COVID-relief funds
* This program has been expanded or enhanced with funding from COVID-relief funds
* Don’t know

**ASP\_ae9.** What is the cost for the entire school year, per student, to run your school’s after-school **academic enrichment program**?

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

**ASP\_ae10a**. Do families have to pay a fee for their child(ren) to participate in your school’s after-school **academic enrichment program(s)**?

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

* Yes
* No
* Don’t know

**ASP\_ae10b**. How much does it cost for the entire school year, per student, for a family to send a child to your school’s after-school **academic enrichment program**? {Display if *ASP\_ae10a* = Yes}

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs or purchasing materials necessary for participation.*

*If families could pay different fees based on certain factors (e.g., free- and reduced-price meal eligibility), report the highest cost a family could pay.*

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

*The following questions are about your school’s* ***after-school extended-day care****:*

**ASP\_dc1**. To the best of your knowledge, what percentage of your student body will participate in your school’s **extended-day care** during the 2023-24 school year?

\_\_\_\_\_\_\_\_\_\_%

* Don’t know

**ASP\_dc2.** During a typical school week, how many days is **extended-day care** offered?

* 1 day per week
* 2 days per week
* 3 days per week
* 4 days per week
* 5 days per week
* Don’t know

**ASP\_dc3**. On a typical school day, how long do students spend in **extended-day care**?

* Up to 1 hour
* 1 – 2 hours
* 2 – 3 hours
* More than 3 hours
* Don’t know

**ASP\_dc4.** Which of the following best describes your school’s ability to provide its after-school **extended-day care program** to those who want to participate?

* We are able to provide our extended-day care program to ALL students who want to participate
* We are able to provide our extended-day care program to MOST students who want to participate
* We are able to provide our extended-day care program to SOME students who want to participate
* We are able to provide our extended-day care program to ONLY A FEW students who want to participate
* Don’t Know

**ASP\_dc5**. Do you partner, or have a contract, with any of the following types of organizations or groups to run your school’s after-school **extended-day program**? *Select all that apply.*

* Other local K-12 schools
* Local colleges or universities
* Local libraries
* Academically focused groups (e.g., local museums, tutoring programs)
* Community businesses
* Community non-profit organizations
* Community health organizations
* City departments or agencies (e.g., parks department, mayor’s office, youth agencies, etc.)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**ASP\_dc6.** Which of the following personnel work in your school’s after-school **extended-day care program**? *Select all that apply.*

* Full-time teachers from your school
* Part-time teachers from your school
* Administrative staff from your school
* Tutors from your school
* Intervention specialists from your school
* Dedicated staff whose only job at your school is to work in your school’s after-school extended-day care program
* Staff from an outside organization you partner or contract with {Display if *ASP\_dc6* ≠ “None of the above” or “Don’t Know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**ASP\_dc7.** What sources of funding have been used to support your school’s after-school **extended-day care program** during this school year? *Select all that apply.*

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Other federal grants or programs
* State grants or programs
* Local grants or programs
* District or school financial funding
* Philanthropic support
* Partnerships or sponsorships with other organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**ASP\_dc8.** Which of the following best describes your school’s use of COVID-relief funds for your after-school **extended-day care program**? {Display if *ASP\_dc7* = ESSER and/or ARP ESSER}

* This is a new program funded by COVID-relief funds
* This program has been expanded or enhanced with funding from COVID-relief funds
* Don’t know

**ASP\_dc9.** What is the cost for the entire school year, per student, to run your school’s after-school **extended-day care program**?

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

**ASP\_dc10a**. Do families have to pay a fee for their child(ren) to participate in your school’s after-school **extended-day care program**?

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

* Yes
* No
* Don’t know

**ASP\_dc10b**. How much does it cost for the entire school year, per student, for a family to send a child to your school’s after-school **extended-day care program**? {Display if *ASP\_dc10a* = Yes}

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs or purchasing materials necessary for participation.*

*If families could pay different fees based on certain factors (e.g., free- and reduced-price meal eligibility), report the highest cost a family could pay.*

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

*The following questions are about your school’s* ***after-school activities and clubs****:*

**ASP\_ac1**. Which of the following activities and clubs are offered at your school? *Select all that apply.*

* Academic clubs (e.g., Debate Team, Honor Society, Spanish Club, Math Club, or Computer Club)
* Athletic teams or clubs (e.g., basketball or soccer team; martial arts or yoga club)
* Class council or student government
* Performing arts (e.g., Band, Choir, Orchestra, or Drama)
* Spirit groups (e.g., Cheerleading, Dance Team, or Pep Club)
* Volunteer or community service clubs sponsored by the school (e.g., Peer Mediators, Environmental Club, Key Club, Interact, or Recycling Club)
* Inclusion clubs (e.g., Gay-Straight Alliance, Best Buddies, Cultural Awareness Club)
* Other school clubs or activities, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ASP\_ac2**. To the best of your knowledge, what percentage of your student body will participate in ANY your school’s **activities and clubs** during the 2023-24 school year?

\_\_\_\_\_\_\_\_\_\_%

* Don’t know

**ASP\_ac3.** Which of the following best describes your school’s ability to provide its after-school **activities and clubs** to those who want to participate?

* We are able to provide our activities and clubs to ALL students who want to participate
* We are able to provide our activities and clubs to MOST students who want to participate
* We are able to provide our activities and clubs to SOME students who want to participate
* We are able to provide our activities and clubs to ONLY A FEW students who want to participate
* Don’t know

**ASP\_more**. We’d like to learn more about your school’s experiences **operating after-school programs** during the 2023-24 school year. In the space below please share any other information you would like us to know on this topic.

*This item is optional*.

# Attendance (School-Level | Previously Approved)

**ATTENDANCE1**. As of ${e://Field/filldate}, what is the average daily attendance percentage for each ethnicity and race?

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Hispanic, of any race | White, not Hispanic | Black or African American, not Hispanic | Asian, not Hispanic | American Indian or Alaskan Native, not Hispanic | Native Hawaiian or Pacific Islander, not Hispanic | Two or more races, not Hispanic | Race/Ethnicity information not available |
| Average Daily Attendance Percentage |  |  |  |  |  |  |  |  |

**ATTENDANCE2**. As of ${e://Field/filldate}, what is the average daily attendance percentage for each learning environment?

|  |  |
| --- | --- |
|  | Average daily attendance percentage |
| Full-time in-person learning {Display if LEARNING1 = Yes} |  |
| Full-time remote learning {Display if LEARNING5 = Yes} |  |
| Hybrid of remote and in-person learning {Display if LEARNING12 = Yes} |  |

# College & Career Readiness (School-Level | New)

{Display these items only to Middle/Combined and High Schools}

**AdvC#.** Does your school offer Advanced Placement (AP), Pre-Advanced Placement (Pre-AP), International Baccalaureate (IB), or dual enrollment courses?

* Yes
* No
* Don’t Know
* This type of coursework is not applicable to students at my school

**AdvC#**. How many advanced courses are taught in your school? {Display if *advanced coursework item* = Yes}

|  |  |  |  |
| --- | --- | --- | --- |
|  | Number of courses | We do not offer this program at our school | Don’t Know |
| Advanced Placement (AP) |  |  |  |
| Pre-Advanced Placement (Pre-AP) |  |  |  |
| International Baccalaureate (IB) |  |  |  |
| Dual enrollment |  |  |  |

**AdvC#**. To the best of your knowledge, what percentage of students at your school are enrolled in advanced coursework?

|  |  |  |
| --- | --- | --- |
| {Display based on > 0 responses to *number of advanced courses item}* | Percentage of students | Don’t Know |
| Advanced Placement (AP) |  |  |
| Pre-Advanced Placement (Pre-AP) |  |  |
| International Baccalaureate (IB) |  |  |
| Dual enrollment |  |  |

**AdvC**. What percentage of students in each racial/ethnic group are enrolled in any advanced coursework?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| {Display COLUMNS based on > 0 responses to *number of advanced courses item}* | Percentage enrolled in AP courses | Percentage enrolled in Pre-AP courses | Percentage enrolled in IB courses | Percentage enrolled in dual enrollment | Don’t know |
| American Indian or Alaska Native |  |  |  |  |  |
| Asian |  |  |  |  |  |
| Black of African American |  |  |  |  |  |
| Hispanic/Latino |  |  |  |  |  |
| Native Hawaiian or Other Pacific Islander |  |  |  |  |  |
| White |  |  |  |  |  |
| Two or more races |  |  |  |  |  |

**AdvC#.** Does your school allow students to take courses above their grade level (e.g., allowing 8th graders to take Algebra I, allowing 9th graders to take Geometry)?

* Yes
* No
* Don’t know

**AdvC#.** How many of these courses are taught in your school? {Display if *above grade level item* = Yes}

\_\_\_\_\_\_ courses

* Don’t’ know

**AdvC#.** To the best of your knowledge, what percentage of students at your school are enrolled in course above their grade level? {Display if *above grade level item* = Yes}

\_\_\_\_\_\_\_ percent of students

* Don’t know

**AdvC#.** What percentage of students in each racial/ethnic group are enrolled in courses above their grade level? {Display if above grade level item = Yes}

|  |  |  |
| --- | --- | --- |
|  | Percentage of students | Don’t know |
| American Indian or Alaska Native |  |  |
| Asian |  |  |
| Black of African American |  |  |
| Hispanic/Latino |  |  |
| Native Hawaiian or Other Pacific Islander |  |  |
| White |  |  |
| Two or more races |  |  |

**CCP#**. To the best of your knowledge, what percentage of students in your school participate in the following:

|  |  |  |  |
| --- | --- | --- | --- |
|  | Percentage of students | We do not offer this | Don’t know |
| Work-based learning program |  |  |  |
| Workforce credential training program |  |  |  |
| Personalized learning plan |  |  |  |

**CCP#**. Does your school have a college and career readiness plan or goal?

* Yes
* No
* Don’t know

**CCP#**. Using the responses below, fill in the sentence that best describes your school: “My school does a(n) \_\_\_\_\_\_\_\_\_\_\_\_ job preparing students for college.”

* Very poor
* Below average
* Average
* Above average
* Exceptional
* Not applicable

**CCP#**. Using the responses below, fill in the sentence that best describes your school: “My school does a(n) \_\_\_\_\_\_\_\_\_\_\_\_ job preparing students for the workforce.”

* Very poor
* Below average
* Average
* Above average
* Exceptional
* Not applicable

**CCP#**. Do graduation requirements at your school include college and career milestones?

* Yes
* No
* Don’t know
* Not applicable – my school does not graduate students from high school

**CCP#.** Are graduation requirements at your school aligned to public postsecondary admissions requirements?

* Yes
* No
* Don’t know
* Not applicable – my school does not graduate students from high school

**CCP#.** Does your school employ any of the following staff to support college and career readiness? *Select all that apply.*

* Work-based learning coordinator
* Career advisors
* Counselors
* Workforce intermediary
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_
* We do not employ any staff to support college and career readiness
* Not applicable

**CCP#.** Does your school offer career and technical education?

* Yes
* No
* Don’t know

**CCP#.** To what degree does your school counseling office use your students’ college and career readiness data to inform their work and outreach to students and their families?

* Never
* Rarely
* Sometimes
* Often
* Always
* Don’t know
* Not applicable

# Community Collaboration (School-Level | Previously Approved + New)

**CSP1**. Does your school use a “community school” or “wraparound services” model?

*A community school or wraparound services model is when a school partners with other government agencies and/or local nonprofits to support and engage with the local community (e.g., providing mental and physical health care, nutrition, housing assistance, etc.)*

* Yes
* No
* Don’t Know

**CSP2a**. For the 2022-23 school year, which of the following services are available to the community through your school’s existing partnerships? *Select all that apply.* {Display if CSP1 = YES}

* Physical health care
* Mental health care
* Dental care
* Vision care
* Housing assistance
* Nutrition/food assistance
* Employment assistance
* Childcare
* Social work
* Adult education classes
* Parenting and family support
* Mentoring and tutoring programs
* Migrant and refugee support
* Volunteering opportunities
* Community resource fairs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t Know

**CSP2b**. Were these services added to address challenges or difficulties related to the COVID-19 pandemic?

|  |  |  |  |
| --- | --- | --- | --- |
| {Display based on responses to CSP2a} | Yes | No | Don’t Know |
| Physical health care |  |  |  |
| Mental health care |  |  |  |
| Dental care |  |  |  |
| Vision care |  |  |  |
| Housing assistance |  |  |  |
| Nutrition/food assistance |  |  |  |
| Employment assistance |  |  |  |
| Childcare |  |  |  |
| Social work |  |  |  |
| Adult education classes |  |  |  |
| Parenting and family support |  |  |  |
| Mentoring and tutoring programs |  |  |  |
| Migrant and refugee support |  |  |  |
| Volunteering opportunities |  |  |  |
| Community resource fairs |  |  |  |
| Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |

**CSP2c**. To the best of your knowledge, what percentage of your students and their families will participate in these programs during the 2023-24 school year?

|  |  |  |
| --- | --- | --- |
| {Answers populate based on selections to CSP2a} | Percentage of students and their families in 2023-24 | Don’t Know |
| Physical health care | % |  |
| Mental health care | % |  |
| Dental care | % |  |
| Vision care | % |  |
| Housing assistance | % |  |
| Nutrition/food assistance | % |  |
| Employment assistance | % |  |
| Childcare | % |  |
| Social work | % |  |
| Adult education classes | % |  |
| Family support and parenting | % |  |
| Mentoring and tutoring programs | % |  |
| Migrant and refugee support | % |  |
| Volunteering opportunities | % |  |
| Community resource fairs | % |  |

**CSP1**. Does your school use a “community school” or “wraparound services” model?

*A community school or wraparound services model is when a school partners with other government agencies and/or local nonprofits to support and engage with the local community (e.g., providing mental and physical health care, nutrition, housing assistance, etc.)*

* Yes
* No
* Don’t Know

**CSP2a**. For the 2023-24 school year, which of the following services, if any, are available to the community through your school’s existing partnerships? *Select all that apply.*

* Physical health care
* Mental health care
* Dental care
* Vision care
* Housing assistance
* Nutrition/food assistance
* Employment assistance
* Childcare
* Social work
* Adult education classes
* Parenting and family support
* Mentoring and tutoring programs
* Migrant and refugee support
* Volunteering opportunities
* Community resource fairs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t Know

**CSP2c**. To the best of your knowledge, what percentage of your students and their families will participate in these programs during the 2023-24 school year?

|  |  |  |
| --- | --- | --- |
| {Answers populate based on selections to CSP2a} | Percentage of students and their families in 2023-24 | Don’t Know |
| Physical health care | % |  |
| Mental health care | % |  |
| Dental care | % |  |
| Vision care | % |  |
| Housing assistance | % |  |
| Nutrition/food assistance | % |  |
| Employment assistance | % |  |
| Childcare | % |  |
| Social work | % |  |
| Adult education classes | % |  |
| Family support and parenting | % |  |
| Mentoring and tutoring programs | % |  |
| Migrant and refugee support | % |  |
| Volunteering opportunities | % |  |
| Community resource fairs | % |  |

**CS3.** For the 2023-24 school year, does your school have, or conduct, any of the following collaborative decision-making and continuous improvement practices, either directly or through a partnership? *Select all that apply*.

* An advisory board or local-decision-making committee that includes parents, teachers, students, and/or community members
* Assessment of student academic and non-academic needs and assets and family needs and assets
* Data system that monitors which students receive which services (e.g., after-school programs, counseling services, health care)
* Data system that monitors student progress (e.g., academic progress, classroom engagement, social and emotional skills)
* None of the above
* Don’t know

**CSP4**. For the 2023-24 school year, does your school use any of the following strategies to improve coordination of service delivery? *Select all that apply.*

* Employment of a community school coordinator, director, or manager
* Partnerships with community organizations to provide services
* Case management to connect students and families with services
* Service directory or other centralized list of family services
* None of the above
* Don’t know

**CSP5**. How important was each of the following factors in determining your school’s priorities for the 2023-24 school year?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not important | Slightly important | Important | Very important | N/A |
| Results from school’s comprehensive needs assessment |  |  |  |  |  |
| Input from parents |  |  |  |  |  |
| Input from students |  |  |  |  |  |
| Input from school administrators |  |  |  |  |  |
| Input from school staff |  |  |  |  |  |
| Input from community-based organizations, local government, or businesses |  |  |  |  |  |
| Input from tribes or tribal organizations |  |  |  |  |  |

**CSP3**. We’d like to learn more about how schools’ experiences **administering the community or wraparound services** at your school. In the space below, please share any other information you like us to know on this topic. {Display if CSP1 = YES}

*This item is optional.*

# Concerns (School-Level | Previously Approved)

**ParCon1.** Which of the following concerns have PARENTS/GUARDIANS expressed about their children during the 2021-22 school year? *Select all that apply.*

* Meeting academic needs for their children
* Meeting developmental needs or milestones (e.g., speech development, behavioral development)
* Learning options for children who are immunocompromised
* Physical health and safety for their children in classrooms
* Social, emotional, and mental health for their children
* Mitigation and prevention strategies and policies for COVID-19 implemented in school
* Safe participation in extracurricular activities and sports
* Safe lunch, recess, or other activities that involve large number of students
* Safe transportation
* Childcare during remote learning
* Other, please specify: \_\_\_\_\_
* Don’t know

**ParCon2.** To the best of your knowledge, how concerned are PARENTS/GUARDIANS with the following for their children?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| {Rows display based on selections made in ParCon2} | **Slightly concerned** | **Somewhat concerned** | **Moderately concerned** | **Extremely concerned** |
| Meeting academic needs for their children |  |  |  |  |
| Meeting developmental needs or milestones (e.g., speech development, behavioral development) |  |  |  |  |
| Learning options for children who are immunocompromised |  |  |  |  |
| Physical health and safety for their children in classrooms |  |  |  |  |
| Social, emotional, and mental health for their children |  |  |  |  |
| Mitigation and prevention strategies and policies for COVID-19 implemented in school |  |  |  |  |
| Safe participation in extracurricular activities and sports |  |  |  |  |
| Safe lunch, recess, or other activities that involve large number of students |  |  |  |  |
| Safe transportation |  |  |  |  |
| Childcare during remote learning |  |  |  |  |

**ParCon3.** Have PARENTS of students at your school staged any protests due to your school’s response to the COVID-19 pandemic?

* Yes
* No
* Don’t know

**StuCon1.** Which of the following concerns have STUDENTS expressed during 2021-22 school year? *Select all that apply.*

* Meeting academic standards
* Meeting developmental needs or milestones (e.g., speech development, behavioral development)
* Learning options for the immunocompromised
* Physical health and safety in classrooms
* Social, emotional, and mental health
* Mitigation and prevention strategies and policies for COVID-19 implemented in school
* Safe participation in extracurricular activities and sports
* Safe lunch, recess, or other activities that involve large number of students
* Safe transportation
* Missing out on social activities or events
* Missing out on extracurricular activities and sports
* Other, please specify: \_\_\_\_\_
* Don’t know

**StuCon2.** To the best of your knowledge, how concerned are students with the following?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| {Rows display based on selections made in StuCon2} | **Slightly concerned** | **Somewhat concerned** | **Moderately concerned** | **Extremely concerned** |
| Meeting academic standards |  |  |  |  |
| Meeting developmental needs or milestones (e.g., speech development, behavioral development) |  |  |  |  |
| Learning options for the immunocompromised |  |  |  |  |
| Physical health and safety in classrooms |  |  |  |  |
| Social, emotional, and mental health |  |  |  |  |
| Mitigation and prevention strategies and policies for COVID-19 implemented in school |  |  |  |  |
| Safe participation in extracurricular activities and sports |  |  |  |  |
| Safe lunch, recess, or other activities that involve large number of students |  |  |  |  |
| Safe transportation |  |  |  |  |
| Missing out on social activities or events |  |  |  |  |
| Missing out on extracurricular activities and sports |  |  |  |  |

**StuCon3.** Have STUDENTS at your school staged any protests, walk-outs, or strikes due to your school’s response to the COVID-19 pandemic?

* Yes
* No
* Don’t know

**StaffCon1.** Which of the following concerns have STAFF MEMBERS expressed during the 2021-22 school year? *Select all that apply.*

* Getting their students to meet academic standards
* Getting their students to meet developmental needs or milestones (e.g., speech development, behavioral development)
* Working conditions for the immunocompromised
* Transmitting COVID-19 to immunocompromised family members or co-habitants
* Their PERSONAL physical health and safety while in classroom or offices
* Their PERSONAL social, emotional, and mental health
* Their STUDENTS’ physical health and safety while in the classroom
* Their STUDENTS’ social, emotional, and mental health
* Access to COVID-19 mitigation materials (e.g., tests, masks)
* Use of sick and personal leave time
* Mitigation and prevention strategies and policies for COVID-19 implemented in school
* Safe administration of extracurricular activities and sports
* Safe lunch, recess, or other activities that involve large number of students and/or staff members
* Safe transportation
* Personal childcare needs during remote learning
* Providing instruction to students having to quarantine
* Lack of substitute teachers
* Other, please specify: \_\_\_\_\_
* Don’t know

**StaffCon2.** To the best of your knowledge, how concerned are STAFF MEMBERS with the following?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| {Rows display based on selections made in StaffCon2} | **Slightly concerned** | **Somewhat concerned** | **Moderately concerned** | **Extremely concerned** |
| Getting their students to meet academic standards |  |  |  |  |
| Getting their students to meet developmental needs or milestones (e.g., speech development, behavioral development) |  |  |  |  |
| Working conditions for the immunocompromised |  |  |  |  |
| Transmitting COVID-19 to immunocompromised family members or co-habitants |  |  |  |  |
| Their PERSONAL health and safety while in the classroom or offices |  |  |  |  |
| Their PERSONAL social, emotional, and mental health |  |  |  |  |
| Their STUDENTS’ health and safety while in the classroom |  |  |  |  |
| Their STUDENTS’ social, emotional, and mental health |  |  |  |  |
| Access to mitigation materials (e.g., tests, masks) |  |  |  |  |
| Mitigation and prevention strategies and policies for COVID-19 implemented in school |  |  |  |  |
| Safe administration of extracurricular activities and sports |  |  |  |  |
| Safe lunch, recess, or other activities that involve large number of students and/or staff members |  |  |  |  |
| Safe transportation |  |  |  |  |
| Use of sick and personal leave time |  |  |  |  |
| Personal childcare needs during remote learning |  |  |  |  |

**StaffCon3.** Have STAFF MEMBERS at your school staged any protests, walk-outs, or strikes due to your school’s response to the COVID-19 pandemic?

* Yes
* No
* Don’t know

**Concern4.** Thank you for completing this section of the survey. We’d like to learn more about what schools are experiencing while continuing to respond to the challenges of the COVID-19 pandemic. In the space below, please share any other information you would like the U.S. Department of Education and other federal policymakers to know about how you have dealt with **concerns from parents, students, and/or staff members about school operating full-time in-person.**

*This item is optional.*

# Concerns (School-Level | New)

***Italicized* responses have been previously approved**

**ParCon\_new**. To the best of your knowledge, what level of concern, if any, have parents expressed about their children’s experiences during the 2023-24 school year?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **I have not heard this concern expressed by parents/guardians at my school** | **Slightly concerned** | **Somewhat concerned** | **Moderately concerned** | **Extremely concerned** |
| *Meeting academic needs for their children* |  |  |  |  |  |
| The school’s use of evidence-based learning recovery strategies (e.g., high-dosage tutoring, tailored accelerated instruction) to support their children’s academic needs |  |  |  |  |  |
| *Meeting developmental needs or milestones (e.g., speech development, behavioral development)* |  |  |  |  |  |
| *Physical health and safety for their children in classrooms* |  |  |  |  |  |
| *Social, emotional, and mental health for their children* |  |  |  |  |  |
| *Safe and reliable transportation* |  |  |  |  |  |
| Their children’s engagement in the classroom |  |  |  |  |  |
| Their children’s engagement in extra-curricular activities |  |  |  |  |  |
| World or Dual Language Program offerings |  |  |  |  |  |
| Supporting college and career readiness or pathways |  |  |  |  |  |
| Filling teacher and staff vacancies |  |  |  |  |  |
| Family workshops to provide techniques and guidance to support learning recovery |  |  |  |  |  |
| Family engagement/outreach activities (e.g., home visits, communicating via text apps, video conference meetings, etc.) |  |  |  |  |  |
| Their children being able to utilize academic assistance and/or enrichment offerings outside of regular school hours (e.g., after-school programs, summer programs) |  |  |  |  |  |

**StuCon\_new**. To the best of your knowledge, what level of concern, if any, have students expressed about their experiences during the 2023-24 school year?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **I have not heard this concern expressed by students at my school** | **Slightly concerned** | **Somewhat concerned** | **Moderately concerned** | **Extremely concerned** |
| *Meeting academic standards* |  |  |  |  |  |
| *Meeting developmental needs or milestones (e.g., speech development, behavioral development)* |  |  |  |  |  |
| *Physical health and safety in classrooms* |  |  |  |  |  |
| *Social, emotional, and mental health* |  |  |  |  |  |
| *Safe and reliable transportation* |  |  |  |  |  |
| Engaging in the classroom |  |  |  |  |  |
| Engaging in extra-curricular activities |  |  |  |  |  |
| Accessing college and career readiness programs or pathways |  |  |  |  |  |
| Utilizing academic assistance and/or enrichment offerings outside of regular school hours (e.g., after-school programs, summer programs |  |  |  |  |  |

**StafCon\_new**. To the best of your knowledge, what level of concern, if any, have staff expressed about their experiences during the 2023-24 school year?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **I have not heard this concern expressed by staff at my school** | **Slightly concerned** | **Somewhat concerned** | **Moderately concerned** | **Extremely concerned** |
| *Getting their students to meet academic standards* |  |  |  |  |  |
| *Getting their students to meet developmental needs or milestones (e.g., speech development, behavioral development)* |  |  |  |  |  |
| *Their PERSONAL health and safety while in the classroom or offices* |  |  |  |  |  |
| *Their PERSONAL social, emotional, and mental health* |  |  |  |  |  |
| *Their STUDENTS’ health and safety while in the classroom* |  |  |  |  |  |
| *Their STUDENTS’ social, emotional, and mental health* |  |  |  |  |  |
| Student engagement in the classroom |  |  |  |  |  |
| Student engagement in extra-curricular activities |  |  |  |  |  |
| *Use of sick and personal leave* |  |  |  |  |  |
| Filling teacher and staff vacancies |  |  |  |  |  |
| Students being able to utilize academic assistance and/or enrichment offerings outside of regular school hours (e.g., after-school programs, summer programs) |  |  |  |  |  |

# Counts (School-Level | Previously Approved)

**TEACHER0.** Please enter an approximate total teacher count for your school as of today.

Please enter the ***number*** of teachers, including full-time and part-time teachers.

\_\_\_\_\_\_\_\_ Total number of teachers

**STAFF0.** Please enter an approximate total non-teacher staff count for your school as of today.

Please enter the ***number*** of non-teaching staff, including full-time and part-time non-teachers.

\_\_\_\_\_\_\_\_ Total number of non-teaching staff

**ENROLLMENT0.** As of today, please enter your **total** student enrollment count.

Please enter the ***number***of students.

\_\_\_\_\_\_\_\_ Total number of students

# COVID-19 Mitigation (School-Level | Previously Approved)

As of today, are there formal systems in place for the following?

**MITIGATION1**. A STAFF MEMBER to report if they have been clinically **diagnosed** with COVID-19?

* Yes
* No
* Don't know

**MITIGATION2**. A STAFF MEMBER to report if they have **symptoms** of COVID-19?

* Yes
* No
* Don't know

**MITIGATION3**. A STAFF MEMBER to report if they have a **student with symptoms** of COVID-19?

* Yes
* No
* Don't know

**MITIGATION4**. A STAFF MEMBER to report if they have been **exposed** to someone with COVID-19?

* Yes
* No
* Don't know

**MITIGATION5**. A PARENT OR GUARDIAN to report if their **child has been diagnosed** with COVID-19?

* Yes
* No
* Don't know

**MITIGATION6**. A PARENT OR GUARDIAN to report if their **child has symptoms** of COVID-19?

* Yes
* No
* Don't know

**MITIGATION7**. A PARENT OR GUARDIAN to report if their **child has been exposed** to someone with COVID-19 outside of school?

* Yes
* No
* Don't know

**MITIGATION8**. To notify PARENTS OR GUARDIANS when their **child may have been exposed** to COVID-19 at school?

* Yes
* No
* Don't know

**MITIGATION9**. How soon after the school knows of the exposure does a notification go out to parents? {Display if MITIGATION8 = YES}

* Same day
* Next day
* Within a week
* Within a month
* More than a month

**MITIGATION10**. Is there a formal system in place to notify STAFF when they **may have been exposed** to COVID-19 at school?

* Yes
* No
* Don't know

**MITIGATION11.** How soon after the school knows of the exposure does a notification go out to staff? {Display if MITIGATION10 = YES}

* Same day
* Next day
* Within a week
* Within a month
* More than a month

**MITIGATION12**. Is there a designated staff member(s) assigned to contact trace students who have tested positive for COVID-19?

* Yes
* No
* Don't know

**MITIGATION13**. Does your district or school have any kind of publicly available tracker documenting all COVID-19 cases in a given school or district to date?

*Do not include state-level case trackers.*

* Yes
* No
* Don't know

**MITIGATION14**. As of ${e://Field/filldate}, has your school requested or required any students to stay home from school after possible COVID-19 exposure?

*Please include situations where students or staff are sent home due to exposure to or illness with COVID-19.*

* Yes
* No
* Don't know

**MITIGATION15**. Were any of these students asked to stay home because they were exposed to COVID-19 outside of school? {Display if MITIGATION14 = YES}

* Yes
* No
* Don't know

**MITIGATION16**. As of ${e://Field/filldate}, is remote learning available for students who are asked to stay home from school? {Display if MITIGATION14 = YES}

* Yes
* No
* Don't know

**MITIGATION17**. As of ${e://Field/filldate}, does your school have a quarantine policy for staff and students who may have been exposed to COVID-19?

* Yes
* No

**MITIGATION18**. Which of the following are included in your school’s quarantine policy: {Display if MITIGATION17 = YES}

* A definition of what counts as a potential exposure to COVID-19
* Requirements about who must be contacted in the event of a potential exposure to COVID-19
* Requirements about the length of time that exposed students or staff must remain out of the school building
* Requirements for COVID-19 testing of potentially exposed students and staff
* Requirements about when an entire classroom or school must quarantine
* Any exceptions in the policy for vaccinated individuals
* Other requirements, please specify
* Unsure what is included in policy

**MITIGATION19**. Does this policy apply to any potential exposure to COVID-19, or only to exposures that occur within the school setting? {Display if MITIGATION17 = YES}

* Any potential exposure
* Only exposures that occur within the school setting
* Don’t know

*The next questions are about whether your school does screening or testing for COVID-19. Screening includes asking about COVID-19 symptoms and/or checking temperatures. Testing includes PCR (Polymerase Chain Reaction) and rapid (antigen) COVID-19 testing. Do not include antibody testing.*

As of today:

**MITIGATION20.** Does your school require daily COVID-19 **symptom screening** with STAFF?

*Screening includes asking about COVID-19 symptoms and/or checking temperatures.*

* Yes
* No
* Don't know

**MITIGATION21.** Does your school require daily COVID-19 **symptom screening** with STUDENTS?

*Screening includes asking about COVID-19 symptoms and/or checking temperatures.*

* Yes
* No
* Don't know

**MITIGATION22**. Does your school have on-site COVID-19 **testing** for STAFF when they **have symptoms or possible COVID-19 exposure**?

* Yes
* No
* Don't know

**MITIGATION23**. Does your school have on-site COVID-19 **testing** for STUDENTS when they **have symptoms or possible COVID-19 exposure**?

* Yes
* No
* Don't know

**MITIGATION24**. Does your school have on-site COVID-19**testing** for STAFF **even if they have no symptoms or possible exposure**?

* Yes
* No
* Don't know

**MITIGATION25.** Does your school have on-site COVID-19 **testing** for STUDENTS **even if they have no symptoms or possible exposure**?

* Yes
* No
* Don't know

**MITIGATION26**. Does your school require that any STAFF wear a mask inside the school?

* Yes
* No
* Don't know

**MITIGATION27**. Are STAFF who are vaccinated against COVID-19 required to wear a mask? {Display if MITIGATION26 4-19 = YES}

* Yes
* No
* Don't know

**MITIGATION28**. Does your school require proof of vaccination against COVID-19 to exempt STAFF from wearing a mask? {Display if MITIGATION27 4-19a = YES}

* Yes
* No
* Don't know

**MITIGATION29.** Does your school require that any PARENTS OR GUARDIANS wear a mask inside the school?

* Yes
* No
* Don't know
* Not applicable - parents or guardians are not allowed inside the building at this time

**MITIGATION30**. Are PARENTS OR GUARDIANS who are vaccinated against COVID-19 required to wear a mask? {Display if MITIGATION30 4-20 = YES}

* Yes
* No
* Don't know

**MITIGATION31**. Does your school require proof of vaccination against COVID-19 to exempt PARENTS OR GUARDIANS from wearing a mask? {Display if MITIGATION30 4-20a = YES}

* Yes
* No
* Don't know

**MITIGATION32**. Does your school require that any STUDENTS wear a mask inside the school building?

* Yes
* No
* Don't know

**MITIGATION33**. Are STUDENTS who are vaccinated against COVID-19 required to wear a mask? {Display if MITIGATION32 4-21 = YES}

* Yes
* No
* Don't know

**MITIGATION34**. Does your school require proof of vaccination against COVID-19 to exempt STUDENTS from wearing a mask? {Display if MITIGATION32 4-21a = YES}

* Yes
* No
* Don't know

**MITIGATION35**. Does your school require that all students who are not yet eligible for a vaccine wear a mask inside the building?

* Yes
* No
* Don't know
* Not applicable - All students in this school are eligible for the COVID-19 vaccine

**MITIGATION36**. As of today, is your school doing any of the following to decrease the spread of COVID-19? *Please select all that apply.*

* Spaced desks and seating at least 3 feet apart
* Faced student desks and seating in the same direction
* Decreased class size
* Placed physical guides (e.g., tape, marks) and signs for distancing to account for movement of staff and students in the hallways or classrooms
* Encouraged social distancing during recess or physical education
* Installed physical barriers (i.e., plastic or other dividers) between students and staff
* Installed physical barriers (i.e., plastic or other dividers) between students
* Increased ventilation by opening windows and doors, using fans, and/or making improvements or upgrades to the school’s ventilation system
* Increased how often surfaces are cleaned
* Added additional handwashing stations or hand sanitizer stations
* None of the above
* Don't know

**MITIGATION37**. As of today, is your school modifying any of the following for food service? *Please select all that apply.*

* Closed the cafeteria
* Changed lunch schedule to decrease the number of students in the cafeteria
* Offered only grab and go food items
* Blocked off seats in the cafeteria to increase distance between students
* Installed plastic or other dividers in the cafeteria
* Moved eating to classrooms for some or all students
* Moved eating outside for some or all students
* None of the above
* Don't know

**MITIGATION38**. During the ${e://Field/CurrentAcademicYear} school year, has your school done any of the following to help students handle the COVID-19 pandemic?

* Hired new staff to focus on student social/emotional/mental wellbeing
* Encouraged existing staff to address student social/emotional/mental well-being
* Added student classes on social/emotional/mental well-being
* Created or expanded a program for students' social/emotional/mental well-being
* Offered guest speakers for students on social/emotional/mental well-being
* Offered professional development to train teachers on helping students with their social/emotional/mental well-being
* Held assemblies for students on social/emotional/mental well-being
* Created community events and partnerships for students on social/emotional/mental well-being
* Took other actions to improve student social/emotional/mental well-being
* None of the above
* Don't know

**MITIGATION39.** Does your school or district require staff to be vaccinated unless they have a religious or medical waiver?

* Yes
* No
* Don't know

**MITIGATION40**. To the best of your knowledge, what percentage of your school staff has received a COVID-19 vaccination?

* 0-25%
* 26-50%
* 51-75%
* 76-100%
* Don't know

**ALTMITIGATION40**. To the best of your knowledge, what percentage of your school's teaching and non-teaching STAFF are fully vaccinated against COVID-19?

\_\_\_\_\_\_\_ percentage of staff

* Don't Know

**ALTMITIGATION40**. To the best of your knowledge, what percentage of your school's STUDENTS are fully vaccinated against COVID-19?

\_\_\_\_\_\_\_ percentage of students

* Don't Know

**MITIGATION41.** Has your school offered, or is your school planning to offer, onsite COVID-19 vaccination or a mobile vaccination unit for staff or students who are eligible?

* Yes
* We are considering it but have not decided
* No
* Don't know

**MITIGATION42.** Are eligible students required to be vaccinated against COVID-19 in order to attend school in person?

* Yes
* No
* Don't know

**MITIGATION43.** For the 2021-22 school year, does your school have a formal plan in place to prepare for and respond to a pandemic (including the COVID-19 pandemic)?

*Exclude plans that address only community or school-based outbreaks such as seasonal flu or chicken pox.*

* Yes
* No
* Don't know

**MITIGATION44**. BEFORE the COVID-19 pandemic began in the 2019-20 school year, did your school have a formal plan in place to prepare for and respond to multi-country or worldwide pandemic diseases such as SARS or H1N1?

*Exclude plans that addressed only community or school-based outbreaks such as seasonal flu or chicken pox.*

* Yes
* No
* Don't know

**MITIGATION45**. Thank you for completing this section of the survey. Thank you for completing this section. We’d like to learn more about what schools are experiencing while continuing to respond to the challenges of the COVID-19 pandemic. In the space below, please share any other information you would like the U.S. Department of Education and other federal policymakers to know about how you have dealt with **mitigating the spread of COVID-19 in your school.**

*This item is optional.*

**Mitigation46**. For the 2022-23 school year, has your school taken any of the following steps to increase ventilation or filter/clean air in school?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t Know |
| Inspected and validated existing HVAC systems for cleanliness, function, and code-compliant operation |  |  |  |
| Replaced/upgraded HVAC systems |  |  |  |
| Installed ultraviolet germicidal irradiation (UVGI) in high-risk areas, where students eat, or where options for ventilation are limited |  |  |  |
| Maintained continuous HVAC air supply during occupied building hours by adjusting thermostat fan controls, central controls, or deactivating other demand-controlled ventilation (DCV) controls that may reduce air supply based on room occupancy, temperature, or energy conservation |  |  |  |
| Installed or used high-efficiency particulate air (HEPA) filtration systems in areas where students eat |  |  |  |
| Installed or used HEPA filtration systems in classrooms |  |  |  |

**Mitigation47**. As of today, does your school take any of the following steps to increase ventilation or filter/clean air in school?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t Know |
| Open doors to hallway or outside when safe to do so |  |  |  |
| Open windows when safe to do so |  |  |  |
| Use fans to increase the effectiveness of open windows when safe to do so |  |  |  |
| Decrease occupancy in areas where outdoor ventilation cannot be increased |  |  |  |
| Relocate activities to outdoors when possible to do so |  |  |  |
| Increase ventilation in areas where students eat |  |  |  |
| Use HEPA filtration systems in areas where students eat |  |  |  |
| Use HEPA filtration systems in classrooms |  |  |  |
| Use portable HEPA filtration systems for high-risk areas, such as nurse’s office, isolation areas, or rooms where people are less likely to follow mask guidance |  |  |  |

**Mitigation48**. Does your school have COVID-19 vaccination requirements for teaching and non-teaching STAFF to be in the building for the 2022-23 school year?

*Fully vaccinated means that an individual has received all doses in their primary COVID-19 vaccination series.*

* Yes, teaching and non-teaching staff are required to be fully vaccinated against COVID-19 in order to be in the school building
* Yes, teaching and non-teaching staff are required to be fully vaccinated against COVID-19 **AND have received at least one booster shot** in order to be in the school building
* No, teaching and non-teaching staff are NOT required to be fully vaccinated against COVID-19 in order to be in the school building
* Other COVID-19 vaccination-related requirement, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t Know

**Mitigation49.** Does your school have COVID-19 vaccination requirements for STUDENTS to be in the building for the 2022-23 school year?

*Fully vaccinated means that an individual has received all doses in their primary COVID-19 vaccination series.*

* Yes, students are required to be fully vaccinated against COVID-19 in order to be in the school building
* Yes, students are required to be fully vaccinated against COVID-19 **AND have received at least one booster shot** in order to be in the school building
* No, students are NOT required to be fully vaccinated against COVID-19 in order to be in the school building
* Other COVID-19 vaccination-related requirement, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t Know

*The next questions are about whether your school uses the* ***Test to Stay (TTS) program****. TTS is a COVID-19 testing program that allows unvaccinated or partially vaccinated individuals who are identified as a close contact to a case of COVID-19 in certain school settings to continue to come to school if they are asymptomatic and serially test negative for COVID-19.*

**NEWMITIGATION**. Does your school use the Test to Stay (TTS) program in order to keep individuals in school?

* Yes {Display NEWMITIGATION2-6 if “Yes” selected}
* No
* Don’t Know

**NEWMITIGATION2.** Who is eligible to participate in the TTS program? *Select all that apply.*

* Students
* Staff
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_

**NEWMITIGATION3**. Which of the following criteria are required for close contact individuals to **begin** **participating** in TTS? *Select all that apply.*

* Their COVID-19 exposure occurred in school
* Close contact individuals were masked during the entire exposure event
* Close contact individuals are asymptomatic
* Close contact individuals must test negative for COVID-19
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NEWMITIGATION4.** Which of the following criteria are necessary for close contact individuals to **remain** **participating** in TTS? *Select all that apply.*

* Close contact individuals must continue to test negative for COVID-19
* Close contact individuals must remain masked in school
* Close contact individuals must remain asymptomatic
* Close contact individuals must adhere to applicable quarantine guidance (e.g., city, state, or federal guidance) outside of school
* Close contact individuals must physically distance in school, when feasible
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NEWMITIGATION5.** Which of the following best describes how often individuals participating in TTS are tested for COVID-19?

* Daily
* Four times per week
* Three times per week
* Two times per week
* Once per week
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_

**NEWMITIGATION6**. If an individual remains asymptomatic and continues to test negative for COVID-19, how long are they required to participate in TTS?

* Less than one week after initial exposure
* One week after initial exposure
* Two weeks after initial exposure
* More than two weeks after initial exposure

**NEWMITGATION7**. What type(s) of COVID-19 testing does your school conduct? *Select all that apply.* {Display if any of MITIGATION22-25 = YES}

* Polymerase Chain Reaction (PCR) testing
* Rapid (antigen) testing
* Pooled sample testing
* Antibody testing
* Don’t know

**NEWMITIGATION8.** Who is primarily responsible for administering COVID-19 tests at your school? {Display if any of MITIGATION22-25 = YES}

* School medical professional(s) (e.g., school nurse, nurse’s aide)
* An outside vendor (e.g., a contracted COVID-19 testing service)
* School administrator(s) (e.g., principal, vice principal)
* School staff (e.g., teacher, secretary)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NewMitigation12**. As of today, is your school conducting (or partnering with another organization to conduct) contact tracing for COVID-19 infected students, teachers, or staff?

* Yes
* No
* Don’t Know

**SumMit1**. Did your school require that students test negative for COVID-19 before returning to in-person learning after the summer break?

* Yes
* No
* Don’t Know

**SumMit2**. Did your school or district provide COVID-19 tests to each student prior to returning to in-person learning after the summer break?

* Yes
* No
* Don’t Know

# Crime and Safety (School-Level | Previously Approved)

**CS1**. During the 2022-23 school year, is it a practice at your school to do the following?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t Know |
| Require visitors to sign or check in and wear badges |  |  |  |
| Control access to school buildings during school hours (e.g., locked or monitored doors, loading docks) |  |  |  |
| Control access to school grounds during school hours (e.g., locked or monitored gates) |  |  |  |
| Equip classrooms with locks so that doors can be locked from the inside |  |  |  |
| Close the campus for most or all students during lunch |  |  |  |
| Have “panic button(s)” or silent alarm(s) that directly connect to law enforcement in the event of an incident |  |  |  |
| Provide an electronic notification system that notifies parents in case of a school-wide emergency |  |  |  |
| Require faculty and staff to wear badges or picture IDs |  |  |  |
| Use one or more security cameras to monitor the school |  |  |  |
| Provide two-way radios to all or select staff |  |  |  |
| Require metal detector checks on all or most students every day |  |  |  |
| Perform random metal detector checks on students |  |  |  |
| Perform one or more random sweeps (e.g., locker checks, dog sniffs) for contraband (e.g., drugs or weapons) |  |  |  |
| Require students to wear uniforms |  |  |  |
| Enforce a strict dress code |  |  |  |
| Require clear book bags or ban book bags on school grounds |  |  |  |
| Provide a structured anonymous or confidential threat reporting system (e.g., tip line, online submission, telephone hotline, or written submission via drop box) |  |  |  |
| Require students to wear badges or picture IDs |  |  |  |
| Prohibit non-academic use of cell phones or smartphones during school hours |  |  |  |

**CS2**. As of today, have any of the following contraband items been confiscated from students at your school during the 2022-23 school year? *Select all that apply.*

* Firearms
* Explosive devices
* Tasers or stun guns
* Knives or other sharp objects that are used as a weapon
* Blunt objects that can be used as weapon (e.g., brass knuckles)
* Aerosol sprays (e.g., Mace, pepper spray)
* Other weapons
* Illegal drugs or drug paraphernalia
* Prescription drugs
* Alcohol
* Tobacco products or paraphernalia (e.g., cigarettes, vaping products)
* None of the Above
* Don’t Know

**CS3**. Does your school have a written plan (e.g., emergency operations plans (EOP)) that describes procedures to be performed in the following scenarios?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t Know |
| Active Shooter |  |  |  |
| Natural disasters (e.g., earthquakes, tornadoes) |  |  |  |
| Hostages |  |  |  |
| Bomb threats or incidents |  |  |  |
| Chemical, biological, or radiological threats or incidents (e.g., release of mustard gas, anthrax, smallpox, or radioactive materials) |  |  |  |
| Suicide threats or incidents |  |  |  |
| Pandemic disease |  |  |  |
| Post-crisis reunification of students with their families |  |  |  |

**CS4a**. During the 2022-23 school year, has your school drilled (or will they drill) students on the use of the following emergency procedures?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t Know |
| Evacuation (i.e., students and staff are required to leave the building due to an incident) |  |  |  |
| Lockdown (i.e., securing the school building and grounds during incidents that pose an immediate threat of violence) |  |  |  |
| Shelter-in-place (i.e., students and staff are required to remain indoors because it is safer in inside the building or a room than outside) |  |  |  |

**CS4b.** How often does (or will) your school drill students in these emergency procedures?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| {Display based on responses to CS4a} | Once a school year | Twice a school year | 3-5 times a school year | 6 – 8 times a school year | Nine or more times a school year | Don’t Know |
| Evacuation (i.e., students and staff are required to leave the building due to an incident) |  |  |  |  |  |  |
| Lockdown (i.e., securing the school building and grounds during incidents that pose an immediate threat of violence) |  |  |  |  |  |  |
| Shelter-in-place (i.e., students and staff are required to remain indoors because it is safer in inside the building or a room than outside) |  |  |  |  |  |  |

**CS13.** How prepared do you feel your school is to deal with the following emergency events?

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

**CS5a**. During the 2022–23 school year, does your school have a behavioral threat assessment team or any other formal group of persons to identify students who might be a potential risk for violent or harmful behavior (toward themselves or others)?

* Yes
* No
* Don’t Know

**CS5b.** Have any students been found to be a potential risk for violent or harmful behavior (toward themselves or others)?

|  |  |  |  |
| --- | --- | --- | --- |
| {Display if CS5a = YES} | Yes | No | Don’t Know |
| Toward themselves |  |  |  |
| Toward others |  |  |  |

*For the next set of items, use the following definitions:*

**Sworn Law Enforcement Officer (SLEO)**: an individual who ordinarily carries a firearm and a badge, has full arrest powers, and is paid from governmental funds.

**School Resource Officer (SRO)**: A sworn law enforcement officer with arrest authority, **who has specialized training** and is assigned to **work in collaboration with school organizations**; all SROs are SLEOs, but not all SLEOs are SROs.

**Security Officer:** an individual who works to maintain safety and security at school but is NOT a SLEO and does not have the same authority as SLEOs (e.g., cannot make arrests).

**CS6a**. During 2022-23 school year, does your school have any sworn law enforcement officers (SLEOs), including School Resource Officers (SROs), present at your school at least once a week?

*Do NOT include security officers who are not sworn law enforcement officers.*

* Yes
* No
* Don’t Know

**CS6b**. Are SLEOs (including SROs) present at least once a week in or around your school at the following times? {Display if CS6a = YES}

*Do NOT include security officers who are not sworn law enforcement officers.*

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t Know |
| While students are arriving or leaving |  |  |  |
| At selected school activities (e.g., athletic and social events, open houses) |  |  |  |
| When school or school activities are not occurring |  |  |  |

**CS6c**. Do any of the SLEOs (including SROs) at your school routinely: {Display if CS6a = YES}

*Do NOT include security officers who are not sworn law enforcement officers.*

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t Know |
| Carry physical restraints (e.g., handcuffs, tasers) |  |  |  |
| Carry chemical aerosol sprays (e.g., Mace, pepper spray) |  |  |  |
| Carry a firearm |  |  |  |
| Wear a body camera |  |  |  |

**CS6d**. Do these SLEOs (including SROs) participate in the following activities at your school? {Display if CS6a = YES}

*Do NOT include security officers who are not sworn law enforcement officers.*

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t Know |
| Monitoring student behavior |  |  |  |
| Maintaining student discipline |  |  |  |
| Recording or reporting discipline problems to school authorities |  |  |  |
| Mentoring students |  |  |  |
| Teaching a law-related education course or training students (e.g., drug-related education, criminal law, or crime prevention courses) |  |  |  |
| Training teachers and staff in school safety or crime prevention |  |  |  |
| Providing information to school authorities about the legal definitions of behavior for recording or reporting purposes (e.g., defining “assault” for school authorities) |  |  |  |
| Emergency management (i.e., developing and implementing comprehensive safety plans and strategies in consultation with other first responders and school administrators) |  |  |  |
| Identifying problems in the school and proactively seeking solutions to those problems |  |  |  |
| Motor vehicle traffic control |  |  |  |
| Security enforcement and patrol |  |  |  |

**CS6e**. During the 2022-23 school year, does your school or district have any formalized policies or written documents (e.g., Memorandum of Understanding, Memorandum of Agreement), that outline the roles, responsibilities, and expectations of SLEOs (including SROs) at school? {Display if CS6a = YES}

* Yes
* No
* Don’t Know

**CS6ee**. Do these formalized policies or written documents include language defining the role of SLEOs (including SROs) at school in the following areas? {Display if CS6a **&** CS6e= YES}

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t Know |
| Student discipline |  |  |  |
| Use of physical restraints (e.g., handcuffs, Tasers) or chemical aerosol sprays (e.g., Mace, pepper spray) |  |  |  |
| Use of firearms |  |  |  |
| Making arrests on school grounds |  |  |  |
| Reporting of criminal offenses to a law enforcement agency |  |  |  |

*Continue using these definitions as your respond to the next set of items:*

**Sworn Law Enforcement Officer (SLEO)**: an individual who ordinarily carries a firearm and a badge, has full arrest powers, and is paid from governmental funds.

**School Resource Officer (SRO)**: A sworn law enforcement officer with arrest authority, **who has specialized training** and is assigned to **work in collaboration with school organizations**; all SROs are SLEOs, but not all SLEOs are SROs.

**Security Officer:** an individual who works to maintain safety and security at school but is NOT a SLEO and does not have the same authority as SLEOs (e.g., cannot make arrests).

**CS7a**. How many of the following security personnel are present at your school at least once a week?

*If an officer works full-time across various schools in the district, please count the officer as “part-time” for your school.*

*If your school does not have any officers present at your school at least once a week, enter 0.*

* **Full-time** School Resource Officer: \_\_\_\_\_\_\_\_\_\_
* **Part-time** School Resource Officer: \_\_\_\_\_\_\_\_\_\_
* **Full-time** sworn law enforcement officer (NOT a School Resource Officer): \_\_\_\_\_\_\_\_
* **Part-time** sworn law enforcement officer (NOT a School Resource Officer): \_\_\_\_\_\_\_\_
* **Full-time** security officer: \_\_\_\_\_\_\_\_\_\_
* **Part-time** security officer: \_\_\_\_\_\_\_\_\_\_

**CS7b.** To what extent do you agree or disagree with the following statement: “The **School Resource Officer(s)** at my school make(s) a positive impact on our school community.” {Display if CS7a Full- or Part-time SROs > 0}

* Strongly Disagree
* Somewhat Disagree
* Neither Agree nor Disagree
* Somewhat Agree
* Strongly Agree
* Don’t Know

**CS7bb**. Briefly describe why you selected “[Answer from CS7b]” for the previous item. {Display if CS7b ≠ don’t know}

**CS7c.** To what extent do you agree or disagree with the following statement: “The **sworn law enforcement officer(s)** at my school make(s) a positive impact on our school community.” {Display if CS7a Full- or Part-time sworn law enforcement officer > 0}

* Strongly Disagree
* Somewhat Disagree
* Neither Agree nor Disagree
* Somewhat Agree
* Strongly Agree
* Don’t Know

**CS7cc**. Briefly describe why you selected “[Answer to CS7c]” for the previous item. {Display if CS7c ≠ don’t know}

**CS7d.** To what extent do you agree or disagree with the following statement: “The **security officer(s)** at my school make(s) a positive impact on our school community.” {Display if CS7a Full- or Part-time security officer > 0}

* Strongly Disagree
* Somewhat Disagree
* Neither Agree nor Disagree
* Somewhat Agree
* Strongly Agree
* Don’t Know

**CS7dd**. Briefly describe why you selected “[Answer to CS7d]” for the previous item. {Display if CS7d ≠ don’t know}

**CS8**. Aside from SLEOs (including SROs) or other security officers or personnel who carry firearms, during the 2022-23 school year, are there any staff at your school who legally carry a firearm on school property?

* Yes
* No
* Don’t Know

**CS9**. During the 2022–23 school year, has your school or school district provided (or will they provide) any of the following trainings for classroom teachers or aides at this school?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t Know |
| Classroom management for teachers |  |  |  |
| School-wide discipline policies and practices related to violence |  |  |  |
| School-wide discipline policies and practices related to cyberbullying |  |  |  |
| School-wide discipline policies and practices related to bullying other than cyberbullying |  |  |  |
| School-wide discipline policies and practices related to alcohol and/or drug use |  |  |  |
| Safety procedures (e.g., how to handle emergencies) |  |  |  |
| Recognizing early warning signs of students likely to exhibit violent behavior |  |  |  |
| Recognizing signs of self-harm or suicidal tendencies |  |  |  |
| Intervention and referral strategies for students displaying signs of mental health disorders (e.g., depression, mood disorders, ADHD) |  |  |  |
| Recognizing physical, social, and verbal bullying behaviors |  |  |  |
| Recognizing signs of students using/abusing alcohol and/or drugs |  |  |  |
| Positive behavioral intervention strategies |  |  |  |
| Crisis prevention and intervention |  |  |  |
| Recognizing or responding to behaviors involving bias or hate crimes against traditionally marginalized groups |  |  |  |
| Diversity, equity, and inclusion (DEI) |  |  |  |

**CS10**. To what extent, if any, do the following factors limit your school’s efforts to reduce or prevent disruptive behavioral issues, including crimes, from occurring on school grounds?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Limits in a major way | Limits in a minor way | Does not limit |
| Lack of or inadequate teacher training in classroom management |  |  |  |
| Lack of or inadequate alternative placement or programs for disruptive students |  |  |  |
| Likelihood of complaints from parents |  |  |  |
| Lack of teacher support for school policies |  |  |  |
| Lack of parental support for school policies |  |  |  |
| Teachers’ fear of student retaliation |  |  |  |
| Fear of litigation |  |  |  |
| Inadequate funds |  |  |  |
| Inconsistent application of school policies by faculty or staff |  |  |  |

**CS11**. During the 2022-23 school year, does your school allow for the use of the following disciplinary actions?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t Know |
| Removal with no continuing school services for at least the remainder of the school year |  |  |  |
| Removal with school-provided tutoring/home instruction for at least the remainder of the school year |  |  |  |
| Transfer to an alternative school for disciplinary reasons |  |  |  |
| Transfer to another regular school for disciplinary reasons |  |  |  |
| Out-of-school suspension or removal for less than the remainder of the school year with **NO** curriculum or services provided |  |  |  |
| Out-of-school suspension or removal for less than the remainder of the school year with curriculum or services **provided** |  |  |  |
| Referral to a school counselor |  |  |  |
| Assignment to a program (during school hours) designed to reduce disciplinary problems |  |  |  |
| Assignment to a program (outside of school hours) designed to reduce disciplinary problems |  |  |  |
| Loss of school bus privileges due to misbehavior |  |  |  |
| Corporal punishment |  |  |  |
| Placement on school probation with consequences if another incident occurs |  |  |  |
| Detention and/or Saturday school |  |  |  |
| Loss of student privileges |  |  |  |
| Requirement of participation in community service |  |  |  |

**CS12**. We’d like to learn more about what schools are experiencing with regard to school crime and safety. In the space below, please share any other information you would like us to know about **school safety and discipline** at your school.

*This item is optional.*

# Enrollment (School-Level | Previously Approved)

**ENROLLMENT1**. As of ${e://Field/filldate}, please enter your total student enrollment count by ethnicity and race.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Hispanic, of any race | White, not Hispanic | Black or African American, not Hispanic | Asian, not Hispanic | American Indian or Alaskan Native, not Hispanic | Native Hawaiian or Pacific Islander, not Hispanic | Two or more races, not Hispanic | Race/Ethnicity information not available |
| Total Enrollment Count |  |  |  |  |  |  |  |  |

**ENROLLMENT2**. As of ${e://Field/filldate}, what is the enrollment by learning environment for students in your school?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Full-time in-person learning  {Display if LEARNING1 = Yes} | Full-time remote learning  {Display if LEARNING5 = Yes} | Hybrid of remote and in-person learning  {Display if LEARNING11 = Yes} |
| Hispanic, of any race |  |  |  |
| White, not Hispanic |  |  |  |
| Black or African American, not Hispanic |  |  |  |
| Asian, not Hispanic |  |  |  |
| American Indian or Alaskan Native, not Hispanic |  |  |  |
| Native Hawaiian or Pacific Islander, not Hispanic |  |  |  |
| Two or more races, not Hispanic |  |  |  |
| Race/Ethnicity information not available |  |  |  |
| All students |  |  |  |

**ENROLLMENT3**. As of ${e://Field/filldate}, what is the enrollment by learning environment for students in your school?

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

|  |  |  |  |
| --- | --- | --- | --- |
|  | Full-time in-person learning  {Display if LEARNING1 = Yes} | Full-time remote learning  {Display if LEARNING5 = Yes} | Hybrid of remote and in-person learning  {Display if LEARNING11 = Yes} |
| Students with an IEP who spend 80% or more of their time in a general education classroom |  |  |  |
| Students with an IEP who spend between 40-79% of their time in a general education classroom |  |  |  |
| Students with an IEP who spend less than 40% of their time in a general education classroom |  |  |  |

**ENROLLMENT4**. Are students who are enrolled in full-time remote learning required to come into the school for testing if it is suspected they may need an Individualized Education Plan (IEP)? {Display if LEARNING5 = 1}

* Yes
* No
* Don't know

**ENROLLMENT5**. As of ${e://Field/filldate}, what is the enrollment count by learning environment for students with medical conditions, or in families with a medical condition, that put them at high risk for COVID-19?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Full-time in-person learning  {Display if LEARNING1 = Yes} | Full-time remote learning  {Display if LEARNING5 = Yes} | Hybrid of remote and in-person learning  {Display if LEARNING11 = Yes} |
| Number of students with medical conditions, or in families with a medical condition, that put them at high risk for COVID-19 |  |  |  |

**ENROLLMENT6**. As of ${e://Field/filldate}, what is the enrollment count by learning environment for economically disadvantaged students?

*Economically disadvantaged students are typically those who are eligible for free or reduced price lunch.*

|  |  |  |  |
| --- | --- | --- | --- |
|  | Full-time in-person learning  {Display if LEARNING1 = Yes} | Full-time remote learning  {Display if LEARNING5 = Yes} | Hybrid of remote and in-person learning  {Display if LEARNING11 = Yes} |
| Number of economically disadvantaged students |  |  |  |

**ENROLLMENT7**. As of ${e://Field/filldate}, what is the enrollment count by learning environment for English Language Learner (ELL) or English as a Second Language (ESL) students?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Full-time in-person learning  {Display if LEARNING1 = Yes} | Full-time remote learning  {Display if LEARNING5 = Yes} | Hybrid of remote and in-person learning  {Display if LEARNING11 = Yes} |
| Number of students who are ELL or ESL |  |  |  |

**ENROLLMENT8**. As of ${e://Field/filldate}, what is the enrollment count by learning environment for students experiencing homelessness?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Full-time in-person learning  {Display if LEARNING1 = Yes} | Full-time remote learning  {Display if LEARNING5 = Yes} | Hybrid of remote and in-person learning  {Display if LEARNING11 = Yes} |
| Number of students experiencing homelessness |  |  |  |

**ENROLLMENT9**. As of ${e://Field/filldate}, what is the enrollment count by learning environment for migrant students?

*Migrant students are students who move from school to school because they are children of migrant agricultural workers, including migratory dairy workers and migratory fishers.*

|  |  |  |  |
| --- | --- | --- | --- |
|  | Full-time in-person learning  {Display if LEARNING1 = Yes} | Full-time remote learning  {Display if LEARNING5 = Yes} | Hybrid of remote and in-person learning  {Display if LEARNING11 = Yes} |
| Number of migrant students |  |  |  |

# Extra-Curriculars (School-Level | Previously Approved)

**EXTRA1**. As of [Field-filldate], is your school offering any of the following activities? *Please select all that apply.*

* Athletic teams at school
* Performing arts (for example, Band, Choir, Orchestra, or Drama
* Spirit groups (for example, Cheerleading, Dance Team, or Pep Club)
* Academic clubs (for example, Debate Team, Honor Society, Spanish Club, Math Club, or Computer Club
* Class council or student government
* Volunteer or community service clubs sponsored by the school (for example, Peer Mediators, Environmental Club, Key Club, Interact, or Recycling Club
* Other school clubs or activities
* None of the above

**EXTRA2**. As of [Field-filldate], have any activities been modified because of the COVID-19 pandemic? {Display if EXTRA1 ≠ None of the above}

*This could include social distancing, using other cleaning or safety protocols, or adding an online option for remote-learning students.*

* Yes
* No
* Don't know

**EXTRA3**. As of [Field-filldate], how has this activity been modified because of the COVID-19 pandemic?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| {Display based on responses to EXTRA1} | No changes | Socially distanced/no contact | Additional cleaning of surfaces and equipment | Masks required | Online option for remote-learning students | Testing or vaccination required for participation | Other changes |
| Athletic teams at school |  |  |  |  |  |  |  |
| Performing arts (for example, Band, Choir, Orchestra, or Drama) |  |  |  |  |  |  |  |
| Spirit groups (for example, Cheerleading, Dance Team, or Pep Club |  |  |  |  |  |  |  |
| Academic clubs (for example, Debate Team, Honor Society, Spanish Club, Math Club, or Computer Club) |  |  |  |  |  |  |  |
| Class council or student government |  |  |  |  |  |  |  |
| Volunteer or community service clubs sponsored by the school (for example, Peer Mediators, Environmental Club, Key Club, Interact, or Recycling Club) |  |  |  |  |  |  |  |
| ${EXTRA1/ChoiceTextEntryValue/9} |  |  |  |  |  |  |  |

# Facilities (School-Level | New)

**Fac#**. What is the approximate percentage of hardscape (asphalt, concrete) versus landscape (porous surface, plants, other) in the outdoor areas designated for play at your school?

\_\_\_\_\_\_\_\_\_percentage of hardscape

* Don’t know

**Fac**#. Does the school have an outdoor space designed for teaching available?

* Yes
* No
* Don’t Know

**Fac**#. Is training for educators about teaching/learning outdoors available at least once per year?

* Yes
* No
* Don’t know

**Fac**#. Are play areas available to the surrounding community when school is not in session?

* Yes
* No
* Don’t Know

**Fac#.** Does the school employ a dedicated groundskeeper position?

* Yes
* No
* Don’t know

**Fac#.** Does the school employ a school garden coordinator?

* Yes
* No
* Don’t know

**Fac#.** Does the school have outdoor space designed for student gardening available?

* Yes
* No
* Don’t know

**Fac**#. Has your school employed, or designated an employee to serve as, an Indoor Air Quality Coordinator? *An Indoor Air Quality Coordinator monitors air quality conditions at the school and is responsible for reporting air quality issues and complaints.*

* Yes
* No
* Don’t Know

**Fac**#. Are carbon dioxide sensors installed in classrooms and other gathering spaces to monitor for effective ventilation?

* Yes
* No
* Don’t Know

**Fac**#. How many permanent buildings are in use at your school?

\_\_\_\_\_\_\_\_\_ buildings

**Fac#a**. How many of these buildings have received third-party green building certification?  
 \_\_\_\_\_\_ buildings {Display if *permanent building item* > 0}

* Don’t know

**Fac**#. How many non-permanent (portable) buildings are in use at your school?

\_\_\_\_\_\_\_\_\_\_\_ buildings

**Fac#a.** How many of these non-permanent buildings have received third-party green building certification? {Display if *non-permanent building item* > 0}

\_\_\_\_\_\_ buildings

* Don’t know

**Fac#.** Does your school have carbon **monoxide** alarms installed?

* Yes
* No
* Don’t know

**Fac#.** Do the carbon **monoxide** alarms at your school meet the requirements of the National Fire Protection Association, code 720?

* Yes
* No
* Don’t know

**Fac**#. Are carbon **dioxide** sensors installed in classrooms and other gathering spaces to monitor for effective ventilation?

* Yes
* No
* Don’t Know

**Fac#.** Does the school have a policy in place to have local exhaust systems installed at airborne contaminant sources, such as science labs, copy/printing facilities, and chemical storage rooms?

* Yes
* No
* Don’t know

**Fac#.** Does the school have an anti-idling program in place, including signage and active monitoring during pick-up and drop-off?

* Yes
* No
* Don’t know

**Fac#.** Are the designated vehicle loading & unloading areas at least 25 feet from all building air intakes (including doors and windows)?

* Yes
* No
* Don’t know

**Fac#.** Does the school have an auditorium or cafetorium (mix of cafeteria and auditorium) on-site?

* Yes
* No
* Don’t know

**Fac#.** Does the school have dedicated library space available?

* Yes
* No
* Don’t know

**Fac**#. Please indicate which of the following athletic amenities your school has on-site. *Select all that apply.*

* All-purpose grass field (e.g., football field, soccer field, lacrosse field)
* All-purpose turf field (e.g., football field, soccer field, lacrosse field)
* Baseball field
* Gymnasium (e.g., basketball court, volleyball court)
* Outdoor basketball
* Pool
* Softball field
* Tennis courts
* Track
* Weight room
* Other, please specify: \_\_\_\_\_\_\_
* None of the above

**Fac#.** How many STEM labs are on your campus?

\_\_\_\_\_\_\_\_\_ STEM labs

* Don’t know

**Fac22.** In what year was your school’s **main instructional building** constructed?

* Year: \_\_\_\_\_\_\_

**Fac23.** In what year was the last major renovation of the **main instructional building**?

* Year: \_\_\_\_\_\_\_
* The main instructional building has never undergone a major renovation

**Fac24.** In what year was the last major building replacement or addition made to this school?

* Year: \_\_\_\_\_\_\_
* The school has never had a major addition or replacement

**Fac25.** Is any major repair/renovation/modernization work currently being performed at this school?

* Yes
* No

# Facilities (District-Level | New)

**Fac#.** How many schools are in your district?

\_\_\_\_\_ schools

**Fac#.** In the last 10 years, has your school district conducted a **facilities condition assessment** of school facilities? *A facilities condition assessment is a systematic inspection of facilities using a standardized method for recording observations*

* Yes
* No
* Don’t know

**Fac#.** How does your school district select schools for these **facilities condition assessments**? {Display if *facilities condition assessment item* = Yes}

* We assess every school
* We select a random selection of schools
* We select targeted schools by conditions (e.g., by age of school, known condition concerns, planned projects, or complaints)
* We select targeted schools by percentage (e.g., 20% of schools in the district are assessed annually so all schools are assessed over a 5-year period)
* Other, please specify: \_\_\_\_\_\_
* Don’t know

**Fac#.** How frequently does your district conduct its **facilities condition assessments**? {Display if *facilities condition assessment item* = Yes}

* Every 1-2 years
* Every 3-5 years
* Every 6 or more years
* Conducted once, no plans to reassess
* Other, please specify: \_\_\_\_\_\_\_\_
* Don’t know

**Fac#.** Who primarily conducts these **facilities condition assessments**? {Display if *facilities condition assessment item* = Yes}

* School staff
* School district staff
* State officials
* Contractor/professional firm
* Other, please specify: \_\_\_\_\_\_
* Don’t know

**Fac#.** Does your district conduct the **facilities condition assessments** for any of the following purposes? {Display if *facilities condition assessment item* = Yes}

* Assessing equitable access to resources
* Budget formulation
* Capital planning purposes (e.g., project prioritization)
* Determining physical accessibility
* Disaster planning (e.g., emergency sheltering)
* Fulfilling a state requirement or mandate
* In response to complaints or litigation
* Providing facilities information to the public
* Safety and hazard assessments
* Other, please specify: \_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**Fac#.** Does your district use a facilities condition index for capital planning purposes (such as for prioritizing projects or formulating capital budgets)? *A facilities condition index is the ratio of the total cost to correct identified building deficiencies to the current replacement value of the building.* {Display if *facilities condition assessment item* = Yes}

* Yes
* No
* Don’t know

**Fac#.** Which of the following reasons describe why your district decided not to conduct a **facilities condition assessment**? *Select all that apply.* {Display if *facilities condition assessment item* = No}

* Funding is not available to conduct a facilities condition assessment
* Condition is assessed through other mechanisms
* Our district is not responsible for the condition of/addressing deficiencies with school facilities
* Other, please specify: \_\_\_\_\_\_

**Fac#.** In the last 10 years, has your district assessed the **physical accessibility** of its school facilities?

* Yes
* No
* Don’t know

**Fac#.** How does your school district select schools to receive a **physical accessibility** assessment? {Display if *physical accessibility item* = Yes}

* We assess every school
* We select a random selection of schools
* We select targeted schools by conditions (e.g., by age of school, known condition concerns, planned projects, or complaints)
* We select targeted schools by percentage (e.g., 20% of schools in the district are assessed annually so all schools are assessed over a 5-year period)
* Other, please specify: \_\_\_\_\_\_
* Don’t know

**Fac#.** How frequently does your district assess the **physical accessibility** of its school facilities? {Display if *physical accessibility item* = Yes}

* Every 1-2 years
* Every 3-5 years
* Every 6 or more years
* Conducted once, no plans to reassess
* Other, please specify: \_\_\_\_\_\_\_\_
* Don’t know

**Fac#.** Does your district conduct **physical accessibility** assessments for any of the following purposes? {Display if *physical accessibility item* = Yes}

* Assessing equitable access to resources
* Budget formulation
* Capital planning purposes (e.g., project prioritization)
* Disaster planning (e.g., emergency sheltering)
* Fulfilling a state requirement or mandate
* In response to complaints or litigation
* Providing school accessibility information to the public
* Safety and hazard assessments
* Other, please specify: \_\_\_\_\_\_\_\_\_
* None of the above

**Fac#.** How would you rate the priority of the following systems or features when your district updates or renovates its school facilities?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Not a priority | Somewhat a priority | Moderately a priority | Very much a priority | Top priority | Don’t know |
| Access to natural light |  |  |  |  |  |  |
| Accessibility projects (e.g., features or retrofits for physical accessibility |  |  |  |  |  |  |
| Building resilience (i.e., ability to withstand or recover from natural disasters) |  |  |  |  |  |  |
| Environmental conditions and monitoring (e.g., air quality, water quality, and/or exposure to asbestos, lead, mold) |  |  |  |  |  |  |
| Flexible educational space (e.g., classrooms are adaptable to different needs |  |  |  |  |  |  |
| High performance, sustainable buildings or systems (e.g., building automation, energy management systems |  |  |  |  |  |  |
| Interior design features (e.g., acoustics, furniture, and/or finishes, such as paint or flooring |  |  |  |  |  |  |
| Safety and security (e.g., cameras, alarms, access controls) |  |  |  |  |  |  |
| Student access to technology (e.g., laptops, tablets) |  |  |  |  |  |  |
| Sufficient and usable outdoor common-use and recreational space (e.g., outdoor classrooms, athletic fields, playgrounds) |  |  |  |  |  |  |
| Sufficient and useable indoor common-use and recreational space (e.g., gym, auditorium, cafeteria) |  |  |  |  |  |  |
| Telecom systems (e.g., phone, cable, WiFi) |  |  |  |  |  |  |
| Other, please specify: \_\_\_\_\_ |  |  |  |  |  |  |

**Fac#.** Approximately what percentage of schools in your district currently need the following systems or features to be updated or replaced?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | None | 1-25% | 25-49% | 50-74% | 75-100% | Don’t Know |
| Conveyance (e.g., elevators and lifts) |  |  |  |  |  |  |
| Doors |  |  |  |  |  |  |
| Electrical systems |  |  |  |  |  |  |
| Environmental conditions (e.g., exposure to asbestos, lead, mold) |  |  |  |  |  |  |
| Exterior light fixtures |  |  |  |  |  |  |
| Fire protection (e.g., alarms and suppression systems) |  |  |  |  |  |  |
| Indoor air quality monitoring |  |  |  |  |  |  |
| Heating, ventilation, and air conditioning (HVAC) systems |  |  |  |  |  |  |
| Interior light fixtures |  |  |  |  |  |  |
| Other features or retrofits for physical accessibility |  |  |  |  |  |  |
| Plumbing |  |  |  |  |  |  |
| Roofing |  |  |  |  |  |  |
| Safety and security (e.g., cameras, alarms, access control) |  |  |  |  |  |  |
| Structural integrity (e.g., walls, foundation) |  |  |  |  |  |  |
| Telecom systems (e.g., phone, cable, WiFi) |  |  |  |  |  |  |
| Water quality monitoring |  |  |  |  |  |  |
| Windows |  |  |  |  |  |  |
| Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  |

**Fac#.** Approximately what percentage of schools in your district have the following barrier(s) that may impede access to, or use of, a facility for a person with a disability?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | None | 1-25% | 25-49% | 50-74% | 75-100% | Don’t Know |
| Assembly stages requiring steps |  |  |  |  |  |  |
| Athletic field barriers |  |  |  |  |  |  |
| Auditorium barriers (e.g., no wheelchair spaces) |  |  |  |  |  |  |
| Cafeteria barriers |  |  |  |  |  |  |
| Classroom barriers |  |  |  |  |  |  |
| Door hardware that requires tight grasping, pinching, or twisting of the wrist |  |  |  |  |  |  |
| Door openings that are less than 32 inches wide |  |  |  |  |  |  |
| Door thresholds that exceed ½ inch in height |  |  |  |  |  |  |
| Gymnasium barriers |  |  |  |  |  |  |
| Lack of accessible parking |  |  |  |  |  |  |
| Library/media room barriers |  |  |  |  |  |  |
| Locker room barriers |  |  |  |  |  |  |
| Main entrance barriers (e.g., a main entrance that includes stairs with no ramp) |  |  |  |  |  |  |
| Multi-story building(s) without a ramp, elevator, or chair lift) |  |  |  |  |  |  |
| No signs that designate the accessible route and include braille |  |  |  |  |  |  |
| Playground barriers (e.g., mulch or other ground surface barriers) |  |  |  |  |  |  |
| Portable classroom barriers |  |  |  |  |  |  |
| Protruding objects in circulation paths (circulation paths include interior and exterior walkways, hallways, courtyards, stairways, and landings) |  |  |  |  |  |  |
| Stadium barriers |  |  |  |  |  |  |
| Toilet room barriers (e.g., no side or rear grab bars, uninsulated lavatory pipes) |  |  |  |  |  |  |
| Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  |

**Fac#.** Does your district have an accessibility/ADA transition plan?

* Yes
* No
* Don’t know

**Fac#.** Is your district planning any of the following actions to improve the physical accessibility of its school facilities (including school grounds) in the next three years? *Select all that apply.*

* Large-scale renovations or modernizations
* Small-scale upgrades, such as door hardware and signage
* Accessibility evaluations by district officials
* Accessibility evaluations by a contractor or outside organization
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Fac#.** How challenging, if at all, are the following factors to your district’s efforts to improve the physical accessibility of its school facilities?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Not at all challenging | Somewhat challenging | Moderately challenging | Very challenging | Extremely challenging | Don’t know |
| Age of school buildings |  |  |  |  |  |  |
| Funding constraints |  |  |  |  |  |  |
| Historic designation of school buildings |  |  |  |  |  |  |
| Lack of guidance/knowledge of accessibility standards |  |  |  |  |  |  |
| Needs of emerging populations of students/people with disabilities |  |  |  |  |  |  |
| Other capital improvement needs |  |  |  |  |  |  |
| Terrain/topography |  |  |  |  |  |  |
| Other, please specify: \_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  |

**Fac#.** Does your district have a designated Americans with Disabilities Act (ADA) Coordinator to receive and respond to ADA complaints or concerns?

* Yes
* No
* Don’t know

**Fac#.** How often do your district’s ADA Coordinator and facilities department work together to respond to ADA complaints and concerns? {Display if *ADA Coordinator item* = Yes}

* On an as-needed basis
* Often (on a weekly basis)
* Regularly (at least once a month)
* Infrequently (less than once a month)
* Don’t know

**Fac#.** Does your district’s facilities department receive and respond to ADA complaints or concerns?

* Yes
* No
* Don’t know

**Fac#.** Has your facilities department received training on accessibility standards or guidelines?

* Yes
* No
* Don’t know

**Fac#.** Would additional training on accessibility standards or guidelines be helpful for you or others in your department?

* Yes
* No
* Don’t know

**Fac#.** What is your district’s primary method of funding to address facility needs?

* Local funding
* State funding
* Federal funding
* Other, please specify: \_\_\_\_\_\_\_\_
* Don’t know

**Fac#.** Does your district use any of the following local funding methods to address facilities needs? *Select all that apply*. {Display if *primary method of funding item* = Local funding}

* Property tax revenue
* Sales tax revenue
* Other tax revenue
* Local bonds
* Grants
* Public-private partnerships
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_

# Food Services (School-Level | Previously Approved)

**SchLun1.** As of today, how does your school provide students with breakfast and lunch?

* Students can participate in USDA School Meal programs (e.g., the National School Lunch Program, School Breakfast Program)
* Students can buy meals at school but not part of USDA School Meal programs
* All students must bring meals from home
* Don’t Know

**SchLun2**. You indicated your school operates the USDA School Meal program. As of today, about what percentage of students in your school participate in these programs? {Display if SchLun1 = …PARTICIPATE IN USDA}

* 0% {If selected, no other food items are displayed}
* 1-25%
* 26-50%
* 51-75%
* 76-99%
* 100%
* Don’t Know

**SchLun3**. As of today, how does your school operate the school lunch and/or breakfast programs? {Display if SchLun1 = “Students can participate in USDA…” or “Students can buy meals…”}

1. Community Eligibility Provision (CEP) or other special provision
2. Other option through state or local initiative that offers all students free lunches and/or breakfasts
3. Standard school meal program operations
4. Summer Food Service Program (SFSP) – our school is currently operating under an unanticipated school closure
5. Partnerships or sponsorships with local food organizations
6. Other, please specify: \_\_\_\_\_
7. Don’t Know

**SchLun4**. Since the beginning of the 2022-23 school year, what are the ways that your school has provided meals to students? *Select all that apply.*

* Meals are (or have been) provided in the school building
* Meals are (or have been) picked up from school-designated locations
* Meals are (or have been) dropped off using bus routes
* Meals are (or have been) delivered directly to households
* Meals are (or have been) prepared and delivered through local partnerships
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t Know

**SchLun6**. How easy or difficult has it been for your school to operate USDA School Meal programs during this school year (2022-23) compared to last school year (2021-22) {Display if SchLun1 = “Students can participate in USDA…” or “Students can buy meals…”}

* Much more difficult
* A little more difficult
* About the same
* A little easier
* Much easier

**SchLun7**. Is your school experiencing challenges with obtaining enough food, beverages, and/or meal service supplies for students participating in school meal programs?

* Yes
* No
* Don’t Know

**SchLun8**. Is your school experiencing challenges with serving specific types of foods that were planned to be on school meal program menus?

* Yes
* No
* Don’t Know

**SchLun9** What category(s) are you experiencing issues with procuring? *Select all that apply.* {Display if SchLun13 = “Challenges obtaining enough food…” selected}

* Fruits
* Vegetables
* Grains
* Whole Grain Rich items
* Milk
* Meat/Meat Alternates
* Low-sodium foods
* Meal service supplies (e.g., food trays)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_
* Don’t Know

**SchLun10**. Are the challenges you are experiencing with school meal program food due to any of the following? *Select all that apply.* {Display if SchLun13 if “Challenges serving specific types…” selected}

* Shipment delays
* Orders arriving with missing items, reduced quantities, or product substitutions
* Limited product availability
* Food or supply costs
* Labor shortages
* Limited or no vendors available
* Limited or restricted food delivery day or times
* Vendor surcharges or increased purchasing minimums
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t Know

**SchLun11 5-9**. We’d like to learn more about what schools are experiencing while continuing to respond to the challenges of the COVID-19 pandemic. In the space below, please share any other information you would like us to know about how you are **providing your students with breakfast and/or lunch**.

*This item is optional.*

**SchLun12**. For the 2022-23 school year, did your school collect household applications for free or reduced-price school meals?

* Yes
* No
* Don’t Know

**SchLun13.** What, if any, challenges have your school experienced with school meal program operations during the 2022-23 school year? *Select all that apply.* {Display if SchLun1 = “Students can participate in USDA…” or “Students can buy meals…”}

* Decreased student participation **compared to last school year (2021-22)**
* Decreased student participation **compared to a typical school year prior to the start of the COVID-19 pandemic**
* Increased program costs
* School food service staffing shortages
* Challenges convincing parents to submit applications for free or reduced-price meals
* Challenges processing applications for free or reduced-price meals
* Additional questions or confusion from parents regarding the shift from free meals for all students to traditional program operations
* Challenges obtaining enough food, beverages and/or meal service supplies for students participating in the school meal programs
* Challenges serving specific types of foods that were planned to be on school meal program menus
* Difficulty maintaining compliance with meal pattern requirements
* Increased negative feedback or complaints about school meals from parents or students
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* Don’t Know
* My school has not experienced any challenges with school meal program operations this year

**SchLun14**. As a result of the challenges you just indicated, have you had to make any of the adjustments listed below to the school meals programs? {Display if SchLun13 ≠ “My school has not experienced…”}

* Reducing menu options
* Increasing paid lunch prices
* Seeking external funding to cover excess costs of serving school meals
* Limiting service options (e.g., stopping breakfast in the classroom)
* No longer participating in National School Lunch Program
* No longer participating in School Breakfast Program
* No longer participating in other USDA child nutrition programs (e.g., afterschool snack programs)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know
* We have not had to make any adjustments to our school meal program

# Health Partnerships (District-Level | New)

**HP#**. Does your district partner with local health departments to provide support with student and staff wellness? (Consider local hospitals and local health clinics in your response).

* Yes
* No
* Don’t Know

**HP#**. As part of this partnership, does your local health department provide support for any of the following? *Select all that apply*. {If *local health dept item* = Yes}

* Immunizations
* Monitoring and providing information on communicable diseases
* Food safety
* Health promotion and education
* Community health
* Nutrition
* Mental health
* Oral health
* Environmental health
* Wellness-focused policy
* development

**HP#**. As part of this partnership, does your district share student illness-related absence information with your local education department? {If *local health dept item* = Yes}

* Yes
* No
* Don’t Know

**HP#**. Does your district partner with universities to provide support with student and staff wellness?

* Yes
* No
* Don’t Know

**HP#**. As part of this partnership, does the university provide support for any of the following? Select all that apply. {If *university partner item* = Yes}

* Immunizations
* Monitoring and providing information on communicable diseases
* Food safety
* Health promotion and education
* Community health
* Nutrition
* Mental health
* Oral health
* Environmental health
* Wellness-focused policy development

**HP#**. As part of this partnership, does your district share student illness-related absence information with the university? {If *university partner item* = Yes}

* Yes
* No
* Don’t Know

# Internet & Technology (School-Level | Previously Approved)

**INTERNET1**. For the 2023-24 school year, are students who need internet access provided internet access **at home**?

* Yes
* No
* Don’t Know

**INTERNET2**. For the 2023-24 school year, are students who need internet access provided internet access at a location **other** than their home (e.g., library, parking lot, or other location)?

* Yes
* No
* Don’t Know

**INTERNET3**. For the 2023-24 school year, are students who need them provided with digital devices (e.g., laptops, tables, Chromebooks, etc.)?

* Yes
* No
* Don’t Know

**INTERNET4**. For the 2023-24 school year, are **students** provided IT or technical support for problems with their internet or computers?

*Include formal support or staff who are dedicated to help with IT. Do not include teachers who may help during lessons.*

* Yes
* No
* Don’t Know

**INTERNET5**. For the 2023-24 school year, are **teachers or non-teaching staff** provided IT or technical support for problems with their internet or computers?

*Include formal support or staff who are dedicated to help with IT. Do not include teachers who may help during lessons.*

* Yes
* No
* Don’t Know

**INTERNET6**. We’d like to learn more about how schools’ experiences **ensuring internet access for students and developing their digital literacy**. In the space below, please share any other information you like us to know on this topic..

*This item is optional.*

**DL1**. Does your school offer training on digital literacy for your students?

* Yes
* No
* Don’t Know

**DL2**. Does your school provide additional training for any of the following subgroups beyond what all students are offered? *Select all that apply.* {Display if DL1 = YES}

* Migrant students
* English Learner (EL) or English as a Second Language (ESL) students
* Students with Individualized Education Programs (IEPs) or 504 plans
* Economically disadvantaged students (such as those that qualify for free or reduced-price lunch)
* Students experiencing homelessness
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the Above

**DL3**. Does your school offer trainingon digital literacy for your students’ **families**?

* Yes
* No
* Don’t Know

# Learning Modes (School-Level | Previously Approved)

**LEARNING1.** As of [today / *date*], did your school offer full-time in-person learning for any students?

*Full-time in-person learning refers to students learning in the school building every day of the school week full-time. Include students who take remote classes while in the school building*

* Yes
* No

**LEARNING2.** As of [today / *date*], was full-time in-person learning offered to all students or only some students? {Display if LEARNING1 = Yes}

* All students
* Some students

**LEARNING3.** As of [today / *date*], which students were offered full-time in-person learning?{Display if LEARNING2 = Some Students}

* Students in certain grades
* Students with Individualized Education Plans (IEPs)
* Economically disadvantaged students
* English Language Learner (ELL) or English as a Second Language (ESL) students
* Students experiencing homelessness
* Migrant students

**LEARNING4.** As of [today / *date*], which grades were offered full-time in-person learning? *Select all that apply.* {Display if LEARNING3 = Students in certain grades}

* Preschool
* Kindergarten
* 1st grade
* 2nd grade
* 3rd grade
* 4th grade
* 5th grade
* 6th grade
* 7th grade
* 8th grade
* 9th grade
* 10th grade
* 11th grade
* 12th grade

**LEARNING5.** As of [today / *date*], did your school offer full-time remote learning for any students?

*Remote learning refers to students using online and/or paper materials to learn only from home or a location other than the school building. Include students who come into the building only for state testing or who come in for services no more than one day a month.*

* Yes
* No

**LEARNING6.** As of [today / *date*], did your district offer a full-time remote academy or school? {Display if LEARNING5 = No}

* Yes
* No
* Don't know

**LEARNING7.** Are students who attend the district remote academy or school still enrolled at your school? {Display if LEARNING6 = Yes}

* Yes
* No
* Don't know

**LEARNING8.** As of [today / *date*], was remote learning offered to all students or only some students? {Display if LEARNING5 or LEARNING7 = Yes}

* All students
* Some students

**LEARNING9.** As of [today / *date*], which students were offered full-time remote learning? {Display if LEARNING8 = Some Students}

* Students in certain grades
* Students with Individualized Education Plans (IEPs)
* Economically disadvantaged students
* English Language Learner (ELL) or English as a Second Language (ESL) students
* Students experiencing homelessness
* Migrant students

**LEARNING10.** As of [today / *date*], which grades were offered full-time remote learning? *Select all that apply.* {Display if LEARNING9 = Students in certain grades}

* Preschool
* Kindergarten
* 1st grade
* 2nd grade
* 3rd grade
* 4th grade
* 5th grade
* 6th grade
* 7th grade
* 8th grade
* 9th grade
* 10th grade
* 11th grade
* 12th grade

**LEARNING11.** As of [today / *date*], did your school offer a hybrid of remote and in-person learning for any students?

* Yes
* No

**LEARNING12.** As of [today / *date*], was a hybrid of remote and in-person learning offered to all students or only some students? {Display if LEARNING11 = Yes}

* All students
* Some students

**LEARNING13.** As of [today / *date*], which students were offered a hybrid of remote and in-person learning?{Display if LEARNING12 = Some Students}

* Students in certain grades
* Students with Individualized Education Plans (IEPs)
* Economically disadvantaged students
* English Language Learner (ELL) or English as a Second Language (ESL) students
* Students experiencing homelessness
* Migrant students

**LEARNING14.** As of [today / *date*], which grades were offered a hybrid of remote and in-person learning?{Display if LEARNING13 = Students in certain grades}

* Preschool
* Kindergarten
* 1st grade
* 2nd grade
* 3rd grade
* 4th grade
* 5th grade
* 6th grade
* 7th grade
* 8th grade
* 9th grade
* 10th grade
* 11th grade
* 12th grade

**LEARNING15.** How many days a week does your school offer in-person instruction for hybrid students? {Display if LEARNING11 = Yes}

0 - 7

**LEARNING16.** You indicated that your school offers in-person instruction 5 days a week for hybrid students. Is this because the school is open every day, but students have different schedules which allow them to attend school in-person on alternate days or weeks? {Display if LEARNING15 = 5}

* Yes
* No

**LEARNING17.** Some schools offer instruction in which students learn in-person in the school building while the instructor teaches from another location and not in the same classroom as the students. As of [today / date], did your school offer this type of learning because of the COVID-19 pandemic? {Display if LEARNING1, LEARNING5, AND LEARNING11 = No}

*Exclude remote learning courses that were offered before the COVID-19 pandemic.*

* Yes
* No

**LEARNING18.** You indicated that your school is not offering in-person, remote, or hybrid learning as of September 14th, 2021. Would you briefly explain how your school is operating below? Please also note if your school is closed because of COVID-19.

[Text Entry]

**FEBLEARNING19.** Did your school delay the return to learning (i.e., school was closed, no instruction was offered) after winter break because of COVID-19?

* Yes
* No
* Don't know

**FEBLEARNING20.** Which of the following reasons was your school delayed in returning from winter break? Select all that apply {Display if FEBLEARNING19 = Yes}

* Provide additional time for students and staff to get tested for COVID-19
* Concerns from district leaders or administrators over the ability to reduce the spread of COVID-19 at your school
* Concerns from school leaders or administrators over the ability to reduce the spread of COVID-19 at your school
* Concerns from school staff over the ability to reduce the spread of COVID-19 at your school
* High transmission rates of COVID-19 in the community
* High transmission rates of COVID-19 among students, staff, and/or their families
* Staffing shortages
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FEBLEARNING21.** Did your school require that students test negative for COVID-19 before returning to in-person learning after winter break?

* Yes
* No
* Don't know
* Not applicable - school has not returned to in-person learning

**FEBLEARNING22.** Did your school or district provide COVID-19 tests to each student prior to returning to school after winter break?

* Yes
* No
* Don't know
* Not applicable - school has not returned to in-person learning

**FEBLEARNING23.** At any time since returning from winter break, did your school switch from in-person learning to either remote or hybrid learning?

* Yes, switched to remote learning
* Yes, switched to hybrid learning
* No, remained in-person
* Don't know

# Learning Modes (School-Level | New)

**Learning#.** During this school year, have you had to close school for at least one day unexpectedly?

* Yes
* No
* Don’t know

**Learning#.** When you had to close unexpectedly, how many days did you do the following? {Display if unexpectedly close item= yes}

* Switch to virtual learning: \_\_\_\_\_\_\_\_\_ days
* Not hold any classes: \_\_\_\_\_\_\_\_days

**Learning#.** Which of the following reasons caused your school to close or move to virtual learning?

* Excessive illness among students
* Excessive illness among staff
* Excessive illness in the general community (e.g., COVID-19, Influenza)
* Excessive staff absence (reasons not collected)
* Excessive student absence (reasons not collected)
* Natural disaster/weather event
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Learning#.** What method(s) do you use to inform families and staff of unplanned closures or change to virtual learning? Select all that apply:

* School website
* Twitter
* Facebook
* Instagram
* Dedicated school app
* School text messaging service
* Email
* Local news media
* Other

# Learning Strategies & Recovery (School-Level | Previously Approved)

**SR0**. To the best of your knowledge, **entering a typical school year before the pandemic**, what percentage of students **BEGIN** the school year behind grade level in at least one academic subject?

* \_\_\_\_\_\_ percent of students
* Don’t Know

**SR1a**. To the best of your knowledge, what percentage of students **BEGAN the 20## - ## school year** behind grade level in at least one academic subject?

* \_\_\_\_\_\_ percent of students
* Don’t Know

**SR1b.** Which statement below most closely applies to your school? {Display if SR1a > 0}

* The COVID-19 pandemic played a **major role** as to why students were behind grade level at the beginning of the 2021-22 school year
* The COVID-19 pandemic played a **moderate role** as to why students were behind grade level at the beginning of the 2021-22 school year
* The COVID-19 pandemic played a **minor role** as to why students were behind grade level at the beginning of the 2021-22 school year
* The COVID-19 pandemic played **no role** as to why students were behind grade level at the beginning of the 2021-22 school year

**SR1c**. In which of the following academic subjects did students at your school **begin the 20##-## school year** behind grade level? {Display if SR1a > 0}

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | No students were behind grade level in this subject | At least some students were behind grade level in this subject | Not Applicable – this subject is not offered at my school | Not Applicable – we do not have this type of data in this subject area |
| English or Language Arts |  |  |  |  |
| Mathematics |  |  |  |  |
| Sciences (e.g., general science, biology, chemistry, etc.) |  |  |  |  |
| Computer Science |  |  |  |  |
| Foreign Language |  |  |  |  |
| Social Studies |  |  |  |  |

*The following items ask about students AT THE END of the 20##-## school year behind grade level who are behind grade level*

**SR2a**. To the best of your knowledge, what percentage of students at your school **will or have ENDED the 20##-## school year** behind grade level in at least one academic subject?

* \_\_\_\_\_ percent of students
* Don’t Know

**SR2b.** Which statement below most closely applies to your school? {Display if SR2a > 0}

* The COVID-19 pandemic played a **major role** as to why students were behind grade level at the end of the 2021-22 school year
* The COVID-19 pandemic played a **moderate role** as to why students were behind grade level at the end of the 2021-22 school year
* The COVID-19 pandemic played a **minor role** as to why students were behind grade level at the end of the 2021-22 school year
* The COVID-19 pandemic played **no role** as to why students were behind grade level at the end of the 2021-22 school year

**SR2c**. In which of the following academic subjects did students at your school **end the 20##-## school year** behind grade level? {Display if SR2a > 0}

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | No students were behind grade level in this subject | At least some students were behind grade level in this subject | Not Applicable – this subject is not offered at my school | Not Applicable – we do not have this type of data in this subject area |
| English or Language Arts |  |  |  |  |
| Mathematics |  |  |  |  |
| Sciences (e.g., general science, biology, chemistry, etc.) |  |  |  |  |
| Computer Science |  |  |  |  |
| Foreign Language |  |  |  |  |
| Social Studies |  |  |  |  |

**SR3a**. As of today, what strategies have your school used to support learning recovery for students? *Select all that apply*.

* Tailored accelerated instruction (i.e., teacher-led individualized learning, using new, grade-level content to teach prior-grade concepts or skills)
* Remedial instruction (i.e., using content from prior years to teach concepts or skills)
* Identifying individual student academic needs with diagnostic assessment data
* Identifying individual student academic needs with formative assessment data
* Extending class time spent on targeted subject areas during the school day
* Extending the school day to accommodate learning recovery activities
* Extending the school week to accommodate learning recovery activities
* Extending the school year to accommodate learning recovery activities
* Professional development for teachers/staff on learning recovery
* Family workshops to provide techniques and guidance to support learning recovery
* Family engagement/outreach activities (e.g., home visits, communicating via text apps, video conference meetings, etc.)
* Hiring additional educators to provide more small-group and individual instruction
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_
* We have not implemented any strategies to support learning recovery
* Don’t Know

**SR3b.** How effective have these strategies been in supporting pandemic-related learning recovery for your students during the 20##-## school year?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| {Rows populate based on answers in SR3a} | Not at all effective | Slightly effective | Moderately Effective | Very Effective | Extremely Effective |
| Tailored accelerated instruction (i.e., teacher-led individualized learning, using new, grade-level content to teach prior-grade concepts or skills) |  |  |  |  |  |
| Remedial instruction (i.e., using content from prior years to teach concepts or skills) |  |  |  |  |  |
| Identifying individual student academic needs with diagnostic assessment data |  |  |  |  |  |
| Identifying individual student academic needs with formative assessment data |  |  |  |  |  |
| Extending class time spent on targeted subject areas during the school day |  |  |  |  |  |
| Extending the school day to accommodate learning recovery activities |  |  |  |  |  |
| Extending the school week to accommodate learning recovery activities |  |  |  |  |  |
| Extending the school year to accommodate learning recovery activities |  |  |  |  |  |
| Professional development for teachers/staff on learning recovery |  |  |  |  |  |
| Family workshops to provide techniques and guidance to support learning recovery |  |  |  |  |  |
| Family engagement/outreach activities (e.g., home visits, communicating via text apps, video conference meetings, etc.) |  |  |  |  |  |
| Hiring additional educators to provide more small-group and individual instruction |  |  |  |  |  |

**SR4**. During the 2021-22 school year, did any of the following learning disruptions inhibited teaching and learning at your school? *Select all that apply.*

* School closures (i.e., no instruction was offered to students) caused by COVID-19
* Forced changes in learning modes (i.e., switching from in-person to remote learning)
* Staffing vacancies (i.e., unfilled teaching positions)
* COVID-19 quarantine/isolation policies requiring students to stay home and not attend school in person
* COVID-19 quarantine/isolation policies requiring staff to stay home
* Student trauma and experiences related to the COVID-19 pandemic
* Chronic or extended staff absences
* Chronic or extended student absences
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the Above
* Don’t Know

**SR5**. We’d like to learn more about what schools are experiencing while continuing to respond to the challenges of the COVID-19 pandemic. In the space below, please share any other information you would like us to know about how you have dealt with **students’ learning recovery**.

# Learning Strategies & Recovery (School-Level | New)

**SR#.** Does your school provide training for teachers in any of the following? *Select all that apply.*

* Using **formative** assessments to inform instruction
* Using **diagnostic** assessments to inform instruction
* Using tailored accelerated instruction
* None of the above
* Don’t know

**SR#.** Are parents informed of their child’s learning progress throughout the school year, beyond receiving report cards/summative assessments?

* Yes
* No
* Don’t know

**Plan**#. Are teachers at your school provided dedicated time for **collaborative** planning?

* Yes
* No
* Don’t know

Plan#. On average, how many minutes per week do your teachers have for dedicated **collaborative** planning? {Display if *collaborative planning item* = Yes}

\_\_\_\_\_\_\_\_\_\_ average minutes per week

* Don’t know

**Plan**#. On average, how many times per week do your teachers have for dedicated **collaborative** planning? {Display if *collaborative planning item* = Yes}

\_\_\_\_\_\_\_\_ average number of times per week

* Don’t know

**Plan**#. To the best of your knowledge, has your school increased the amount of dedicated time teachers have for **collaborative** planning since the 2019-20 school year? {Display if *collaborative planning item* = Yes}

* Yes
* No
* Don’t know

**Plan**#. To the best of your knowledge, on average, how much had dedicated **collaborative** planning time increased peer week since the 2019-20 school year? {Display if *collaborative planning increase item* = Yes}

\_\_\_\_\_\_\_\_\_\_\_ average number of minutes

* Don’t know

**Plan**#. Are teachers at your school provided dedicated time for **individual** planning?

* Yes
* No
* Don’t know

**Plan**#. On average, how many minutes per week do your teachers have for dedicated **individual** planning? {Display if *individual planning item* = Yes}

\_\_\_\_\_\_\_\_\_\_ average minutes per week

* Don’t know

**Plan**#. On average, how many times per week do your teachers have for dedicated **individual** planning? {Display if *individual planning item* = Yes}

\_\_\_\_\_\_\_\_ average number of times per week

* Don’t know

**Plan**#. To the best of your knowledge, has your school increased the amount of dedicated time teachers have for **individual** planning since the 2019-20 school year? {Display if *individual planning item* = Yes}

* Yes
* No
* Don’t know

**ParEng#.** Which of the following methods, if any, does your school use to engage with parents? *Select all that apply.*

* Email
* Phone or web-based applications
* In-person meetings
* Parent-teacher associations or organizations
* At-home visits
* None of the above
* Don’t know

**ParEng#.** Do you have staff focused on parent engagement in your school?

* Yes
* No
* Don’t know

**ParEng#.** Have you added new parent engagement positions since the 2019-20 school year?

* Yes
* No
* Don’t know

**ParEng#.** Have COVID-relief funds (e.g., ESSER funds) been used to support these hires? {Display if *new parent engagement* = Yes}

* Yes
* No
* Don’t know

**CSP#.** For the 2023-24 school year, does your school either of the following family and community engagement opportunities? *Select all that apply.*

* A family engagement specialist or family outreach worker at the school
* Opportunities for families and community members to use school facilities (e.g., classrooms, gym, auditorium, etc.)
* None of the above
* Don’t know

**ParEng#.** To the best of your knowledge, what percentage of students had at least one parent or guardian participate in the following events during the 2023-24 school year?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | 0-25% | 26-50% | 51-75% | 76-100% |
| Open house or back-to-school night |  |  |  |  |
| Regularly scheduled parent-teacher conferences |  |  |  |  |
| Special subject-area events (e.g., science fair, concerts) |  |  |  |  |
| Volunteers at school or served on a committee |  |  |  |  |

# Mental Health & Well-Being (School-Level | Previously Approved)

*The following items focus on mental health services provided to* ***students during the 2021-22 school year****.*

**MH1**. During the 2021-22 school year, which of the following, if any, school-based mental health services have been provided to STUDENTS?

* Outreach (e.g., a screening of all students for mental health concerns)
* Case management (e.g., identifying and coordinating mental health support for individual students)
* Needs assessment (e.g., evaluating the gaps in resources for an individual student’s well-being)
* Individual-based intervention (e.g., providing one-on-one counseling or therapy to student)
* Group-based intervention (e.g., providing services to a group of students who are all seeking help for the same issue)
* Family-based intervention (e.g., providing resources to caregivers for supporting their student’s health)
* Telehealth delivery (e.g., meeting between mental service provider at school and students via video or phone)
* External referrals (e.g., referring students to mental health professionals outside of school)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* We have not provided any school-based mental health services during the 2021-22 school year
* Don’t Know

**MH2**. Who provides the mental health services offered at your school? *Select all that apply.* {Display if MH1 ≠ “We have not provided any…” OR “Don’t Know”}

* School- or district-employed licensed mental health professional (e.g., school psychologist, social worker)
* School counselor (e.g., academic or general counselor)
* School nurse
* Outside practice or program that provides services at your school (e.g., university programs, contracted services)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_

**MH3**. Does your school provide resources (e.g., information on providers or therapy, emergency hotlines, support groups) for students to seek services outside of school?

* Yes
* No
* Don’t Know

**MH4**. For the 2021-22 school year, did your school make any changes to the daily or yearly academic calendar in order to mitigate potential mental health issues for students and staff?

*Include actions like designating time during the school day to focus on mental wellness and adding designated days off for students and staff to focus on their mental health. Please do not include changes due to physical health concerns.*

* Yes
* No
* Don’t Know

*The following items focus on mental health services provided to* ***STUDENTS since the start of the COVID-19 pandemic,*** *which began in March 2020*

**MH5**. Since the start of the COVID-19 pandemic, has your school increased the types or amount of mental health services you provide?

* Yes
* No
* Don’t Know

**MH6**. Since the start of the COVID-19 pandemic, has your school provided staff with any resources (e.g., trainings or professional development) to help identify mental health issues among STUDENTS?

* Yes
* No
* Don’t Know

**MH7**. To the best of your knowledge, how has the percentage of STUDENTS who have sought mental health services from your school changed since the start of the COVID-19 pandemic?

* It has decreased
* It has not changed
* It has increased
* Don’t Know

**MH8**. To the best of your knowledge, how has the percentage of STAFF expressing concerns with STUDENTS exhibiting depression, anxiety, trauma, or emotional dysregulation/disturbance changed since the start of the COVID-19 pandemic?

* It has decreased
* It has not changed
* It has increased
* Don’t Know

**MH9**. Since the start of the COVID-19 pandemic, has your school done any of the following to help students cope with the pandemic? *Select all that apply.*

* Hired new staff to focus on student social/emotional/mental well-being
* Encouraged existing staff to address student social/emotional/mental well-being
* Added student classes on social/emotional/mental well-being
* Created or expanded a program for students’ social/emotional/mental well-being
* Offered guest speakers for students on social/emotional/mental well-being
* Offered professional development to train teachers on helping students with their social/emotional/mental well-being
* Held assemblies for students on social/emotional/mental well-being
* Created community events and partnerships for students on social/emotional/mental well-being
* Other, please specify:
* None of the above
* Don't know

**MH10a**. To the best of your knowledge, have any of the following groups of students sought out mental health services more than others since the start of the COVID-19 pandemic? *Select all that apply.*

* Students from particular racial/ethnic backgrounds (indicate in next item)
* Students with Individualized Education Programs (IEPs) or 504 plans
* Students with medical conditions, or in families with medical conditions, that put them at high risk for COVID-19
* Economically disadvantaged students (such as those that qualify for free or reduced-price lunch)
* English Learner (EL) or English as a Second Language (ESL) students
* Students experiencing homelessness
* Migrant students
* Students in Gifted and Talented programs (aka GATE, TAG, G/T)
* LGBTQ+ students
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t Know

**MH10b**. Which of the following racial/ethnic student groups have sought out mental health services more than others? *Select all that apply.* {Display if MH10a = “…particular racial/ethnic backgrounds”}

* American Indian or Alaska Native
* Asian
* Black or African American
* Hispanic/Latino
* Native Hawaiian or Other Pacific Islander
* Two or more races
* White
* Not Specified

**MH11**. Does your school have a specific program for social and emotional learning (SEL) for STUDENTS?

* Yes
* No
* Don’t Know

**MH12a**. To what extent do you agree with the following statement: “My school is able to effectively provide mental health services to all students in need.”

* Strongly disagree
* Moderately disagree
* Neither agree nor disagree
* Moderately agree
* Strongly agree
* Don’t know

**MH12b**. Which of the following factors, if any, limit your school’s efforts to effectively provide mental health services to all students in need? *Select all that apply*. {Display if MH12a ≠ Strongly Agree}

* Inadequate access to licensed mental health professionals
* Insufficient mental health professional staff coverage to manage caseload
* Inadequate funding
* Potential legal issues for school or district (e.g., malpractice, insufficient supervision, confidentiality)
* Concerns about reactions from parents
* Lack of community support for providing mental health services to students in your school
* Requirements that the school pay for the mental health services
* Reluctance among school staff to label students with mental health disordersto avoid stigmatizing the child
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t Know

**MH13**. Which of the following sources of funding have been used to support mental health services for STUDENTS during the COVID-19 pandemic? *Select all that apply.*

* Federal grants or other federal programs
* State grants or other state programs
* District or school financial funding
* Partnerships or sponsorships with organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

*The following items focus on mental health services provided to* ***STAFF since the start of the COVID-19 pandemic,*** *which began in March 2020*

**MH14**. Which of the following sources of funding have been used to support mental health services for STAFF during the COVID-19 pandemic? *Select all that apply.*

* Federal grants or other federal programs
* State grants or other state programs
* District or school financial funding
* Partnerships or sponsorships with organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**MH15**. Does your school provide STAFF with COVID-specific leave in addition to regular sick leave?

* Yes
* No
* Don’t Know

**MH16**. Has your school provided STAFF with any resources to self-identify mental health issues since the start of the COVID-19 pandemic?

* Yes
* No
* Don’t Know

**MH17**. Which of the following benefits, if any, have been offered to STAFF in your school in response to the COVID-19 pandemic? *Select all that apply.*

* Individual mental health counseling at the school
* Group-based/peer support interventions
* Referrals for mental health services outside of school
* Additional sick leave or paid time off
* Increased compensation
* Mental health-related professional development
* Other, please specify: \_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**MH18**. Which of the following approaches, if any, have been used by your school during the pandemic to address the mental health of STAFF? *Select all that apply.*

* Regular staff self-assessments
* Proactive outreach to staff members
* Additional professional development focused on mental health
* Increased preparation time for staff
* Other, please specify: \_\_\_\_\_
* None of the above
* Don’t know

**MH19**. To the best of your knowledge, how has the percentage of STAFF who have sought mental health services from your school changed since the start of the COVID-19 pandemic?

* It has decreased
* It has not changed
* It has increased
* Don’t know

**MH20**. To the best of your knowledge, how has the percentage of staff expressing concerns with THEMSELVES or THEIR COLLEAGUES exhibiting depression, anxiety, trauma, or emotional dysregulation/disturbance changed since the start of the COVID-19 pandemic?

* It has decreased
* It has not changed
* It has increased
* Don’t know

**MH21**. Thank you for completing this section of the survey. We’d like to learn more about what schools are experiencing while continuing to respond to the challenges of the COVID-19 pandemic. In the space below, please share any other information you would like the U.S. Department of Education and other federal policymakers to know about how you have dealt with **mental health and well-being issues among students and staff at your school.**

*This item is optional*.

# Mental Health & Well-Being (School-Level | New)

**MH#.** Is your school able to use federal funding on programs supporting your students social, emotional, and mental health?

* Yes
* No
* Don’t know

**MH#.** In which of the following areas related to accessing/utilizing federal funds for student support services has your school experienced challenges?

* Grant execution
* Distribution of funds
* Documentation of funds usage
* Needs analysis
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_
* We have not experienced any challenges in this area
* Don’t know

**MH#.** To the best of your knowledge, what percentage of students at your school utilize mental, emotional, and/or social services?

\_\_\_\_\_\_\_\_ percent

* Don’t know

# Needs (School-Level | Previously Approved)

**NEEDS1**. As of [Field-filldate], have your school's teachers conducted any diagnostic assessments with students?

* Yes
* No
* Don’t Know

**NEEDS2**. Which students have participated in these diagnostic assessments? {Display if NEEDS1 = Yes}

* All or most students
* Some students

**NEEDS3**. What groups of students have participated in these diagnostic assessments? *Please select all that apply*. {Display if NEEDS2 = Some students}

* Newly enrolled students
* Students with Individualized Education Programs (IEPs)- not including students with 504 plans
* Students who may need IEPs but do not currently have them
* Students who are English Learners (EL) or in English as a Second Language (ESL)
* Economically disadvantaged students (such as those who qualify for free or reduced price lunch)
* Students in certain grades
* Other students

**NEEDS4**. What grades of students have participated in these diagnostic assessments? *Please select all that apply*. {Display if NEEDS3 = Students in certain grades}

* Preschool
* Kindergarten
* 1st grade
* 2nd grade
* 3rd grade
* 4th grade
* 5th grade
* 6th grade
* 7th grade
* 8th grade
* 9th grade
* 10th grade
* 11th grade
* 12th grade

**NEEDS5**. Will the results of the diagnostic assessments at the beginning of the [Field-CurrentAcademicYear] school year be used to address pandemic-related learning needs? {Display if NEEDS1 = Yes}

* Yes
* No
* Don’t Know

**NEEDS6**. Over the summer of 2021, did your school do any of the following because of the COVID-19 pandemic? *Please select all that apply.*

* Create or expand an existing summer school
* Create or expand an existing summer camp program
* Offer virtual educational resources for students to help with pandemic-related learning needs
* Other summer enrichment activities
* Did not make any adjustments; offered same summer enrichment offered previously
* Did not make any adjustments; did not offer summer enrichment

**NEEDS7**. During the [Field-CurrentAcademicYear] school year, will the school day be extended for any or all students because of the COVID-19 pandemic?

* Yes
* No
* Don’t Know

**NEEDS8**. During the [Field-CurrentAcademicYear] school year, will the number of school days be increased for any or all students because of the COVID-19 pandemic?

* Yes
* No
* Don’t Know

**NEEDS9**. During the [Field-CurrentAcademicYear] school year, will additional before-school or after-school programs be offered because of the COVID-19 pandemic?

* Yes
* No
* Don’t Know

**NEEDS10**. During the [Field-CurrentAcademicYear] school year, will additional virtual educational resources be available for students who need it because of the COVID-19 pandemic?

* Yes
* No
* Don’t Know

**NEEDS11**. Were the above additional services or programs offered to all/most students or only some students during the [Field-CurrentAcademicYear] school year?

* All or most students
* Some students

**NEEDS12**. What groups of students will be offered any of the above additional services or programs during the [Field-CurrentAcademicYear] school year? {Display if NEEDS11 = Some students}

* Newly enrolled students
* Students with Individualized Education Programs (IEPs)- not including students with 504 plans
* Students who may need IEPs but do not currently have them
* Students who are English Learners (EL) or in English as a Second Language (ESL)
* Economically disadvantaged students (such as those who qualify for free or reduced price lunch)
* Students in certain grades
* Other students

**NEEDS13**. What grades of students will be offered any of the above additional services during the ${e://Field/CurrentAcademicYear} school year? *Please select all that apply*. {Display if NEEDS12 = Students in certain grades}

* Preschool
* Kindergarten
* 1st grade
* 2nd grade
* 3rd grade
* 4th grade
* 5th grade
* 6th grade
* 7th grade
* 8th grade
* 9th grade
* 10th grade
* 11th grade
* 12th grade

**NEEDS14**. As of [Field-filldate], are any changes to the typical administration of federally mandated student assessments (i.e., standardized tests) expected at your school?

* Yes
* No
* Don’t Know

**NEEDS15**. As of [Field-filldate], what changes are expected to the typical administration of federally mandated student assessments (i.e., standardized tests) at your school? *Please select all that apply*. {Display if NEEDS14 = Yes}

* Assessments will be canceled
* Assessments will be delayed
* Social distancing or other safety measures will be implemented during testing
* Local assessments will be substituted for federally mandated assessments
* Fewer assessments will be administered to students
* Assessments will be abbreviated (e.g., by testing students in fewer subject areas)
* The requirement for 95% of students to take assessments will be waived
* Students attending school 100% virtually will not be required to take assessments
* Assessments will be administered virtually
* Other

**NEEDS16**. As of [Field-filldate], has there been any change to your school’s grading policies because of the COVID-19 pandemic?

* Yes
* No
* Don’t Know

**NEEDS17**. Was there any change to the process by which students were promoted to the next grade in your school during last school year ([Field-PreviousAcademicYear])) because of the COVID-19 pandemic?

* Yes
* No
* Don’t Know

# Quarantine (School-Level | Previously Approved)

**Quar1**. As of today, do you have a formal policy that indicates when students are required to stay home and not allowed to attend school in person for reasons related to COVID-19? This could be because they display COVID-19-like symptoms, have potentially been exposed to someone with COVID-19, or have tested positive for COVID-19.

* Yes
* No {If ‘No’, no other Quarantine items are displayed}

**Quar2**. Which of the following are included in your school’s quarantine policy? *Select all that apply.*

* A definition of what counts as a potential exposure to COVID-19
* Requirements about who must be contacted in the event of a potential exposure to COVID-19
* Requirements about the length of time that exposed students or staff must remain out of the school building
* Requirements for COVID-19 testing of potentially exposed students and staff
* Requirements about when an entire classroom or school must quarantine
* Any exceptions in the policy for vaccinated individuals
* Other requirements
* Unsure what is included in policy

**Quar3**. Does this policy apply to any potential exposure to COVID-19, or only to exposures that occur within the school setting?

* Any potential exposure
* Only exposures that occur within the school setting
* Don’t know

**Quar4**. Does your school have a way of tracking which students are required to stay home and not attend school in person for reasons related to COVID-19? This could be because they display COVID-19-like symptoms, have potentially been exposed to someone with COVID-19, or have tested positive for COVID-19.

* Yes
* No

**Quar5**. Have students in your school been required to stay home and not attend school in person for any of the following reasons? *Select all that apply.*

* Student displayed COVID-19-like symptoms
* Student was potentially exposed to someone with COVID-19
* Student tested positive for COVID-19
* None of the above

**Quar6a**. Today (or the most recent day you have information), are any students currently at home and not allowed to attend school in person because they have been potentially exposed to COVID-19, displayed COVID-19 like symptoms, or have tested positive for COVID-19?

* Yes
* No
* Don’t Know
* Not Applicable – all students are currently receiving full-time remote instruction

**Quar6b.** Today (or the most recent day you have information), how many students are currently at home and not allowed to attend school in person because they have been potentially exposed to COVID-19, displayed COVID-19 like symptoms, or have tested positive for COVID-19? {Display if Quar6 2-3 = YES}

students

**Quar7**. What type of instruction is offered to students who are required to stay home and not attend school in person because they have potentially exposed to COVID-19, displayed COVID-19 like symptoms, or have tested positive for COVID-19? {Display if Quar9 2-5a = NO}

* Full-time remote learning or remote academy/school
* Paper worksheets and packets only
* No formal instruction is offered to these students
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Quar8**. Does your school have a way of tracking which students have received the COVID-19 vaccine? {Display if Quar6b 2-3b = YES}

* Yes
* No

**Quar9**. Does your school’s policy on when students are required to stay home and not attend school differ for students who are fully vaccinated versus those who are not vaccinated? {Display if Quar5 3-3 ≠ NONE OF THE ABOVE}

* Yes
* No
* Don’t Know

**Quar10**. For students who are required to stay home and not attend school in person because they have **displayed COVID-19-like symptoms or have tested positive for COVID-19**, what must they do in order to return to school? *Select all that apply.* {Display if Quar9 2-5a = YES}

* Test negative for COVID-19 once
* Test negative for COVID-19 more than once
* Stay home for a fixed number of days (indicate in next question)
* No longer have COVID-19-like symptoms
* Obtain a doctor’s note indicating the student is no longer sick or displaying symptoms
* There are no requirements for a student to return to school in person.
* Other, please specify: \_\_\_\_\_\_\_\_\_\_

**Quar10num.** How many days must these students stay home? {Display if Quar10 2-6a = … “fixed number”}

days

Dropdown with options 1-14+

**Quar11**. For students who are required to stay home and not attend school in person because they have **been potentially exposed to COVID-19**, what must they do in order to return to school? *Select all that apply.* {Display if Quar9 2-5a = NO}

* Test negative for COVID-19 once
* Test negative for COVID-19 more than once
* Stay home for a fixed number of days (indicate in next question)
* No longer have COVID-19-like symptoms
* Obtain a doctor’s note indicating the student is no longer sick or displaying symptoms
* There are no requirements for a student to return to school in person.
* Other, please specify: \_\_\_\_\_\_\_\_\_\_

**Quar11num.** How many days must these students stay home? {Display if Quar10 2-6a = … “fixed number”}

days

Dropdown with options 1-14+

**Quar12**. For **vaccinated** students who are required to stay home and not attend school in person because they have **displayed COVID-19-like symptoms, or have tested positive for COVID-19**, what must they do in order to return to school? *Select all that apply.* {Display if Quar9 2-5a = YES}

* Test negative for COVID-19 once
* Test negative for COVID-19 more than once
* Stay home for a fixed number of days (indicate in next question)
* No longer have COVID-19-like symptoms
* Obtain a doctor’s note indicating the student is no longer sick or displaying symptoms
* There are no requirements for a student to return to school in person.
* Other, please specify: \_\_\_\_\_\_\_\_\_\_

**Quar12num.** How many days must these students stay home? {Display if Quar10 2-6a = … “fixed number”}

days

Dropdown with options 1-14+

**Quar13**. For **vaccinated** students who are required to stay home and not attend school in person because they have been **potentially exposed to COVID-19**, what must they do in order to return to school? *Select all that apply.* {Display if Quar9 2-5a = YES}

* Test negative for COVID-19 once
* Test negative for COVID-19 more than once
* Stay home for a fixed number of days (indicate in next question)
* No longer have COVID-19-like symptoms
* Obtain a doctor’s note indicating the student is no longer sick or displaying symptoms
* There are no requirements for a student to return to school in person.
* Other, please specify: \_\_\_\_\_\_\_\_\_\_

**Quar13num.** How many days must these students stay home? {Display if Quar13 2-6b = … “fixed number”}

days

Dropdown with options 1-14+

**Quar14**. For **unvaccinated** students who are required to stay home and not attend school in person because they have **displayed COVID-19-like symptoms, or have tested positive for COVID-19**, what must they do in order to return to school? *Select all that apply.* {Display if Quar9 2-5a = YES}

* Test negative for COVID-19 once
* Test negative for COVID-19 more than once
* Stay home for a fixed number of days (indicate in next question)
* No longer have COVID-19-like symptoms
* Obtain a doctor’s note indicating the student is no longer sick or displaying symptoms
* There are no requirements for a student to return to school in person.
* Other, please specify: \_\_\_\_\_\_\_\_\_\_

**Quar14num.** How many days must a student stay home? {Display if Quar14 2-6c = … “fixed number”}

days

Dropdown with options 1-14+

**Quar15**. For **unvaccinated** students who are required to stay home and not attend school in person because they have been **potentially exposed to COVID-19**, what must they do in order to return to school? *Select all that apply.* {Display if Quar9 2-5a = YES}

* Test negative for COVID-19 once
* Test negative for COVID-19 more than once
* Stay home for a fixed number of days (indicate in next question)
* No longer have COVID-19-like symptoms
* Obtain a doctor’s note indicating the student is no longer sick or displaying symptoms
* There are no requirements for a student to return to school in person.
* Other, please specify: \_\_\_\_\_\_\_\_\_\_

**Quar15num.** How many days must these students stay home? {Display if Quar15 2-6d = … “fixed number”}

days

Dropdown with options 1-14+

**Quar16**. If a student **displays COVID-19-like symptoms or has tested positive for COVID-19**, who is required to stay home and not attend school in person? *Select all that apply.*

* The student
* Those who have been in close contact with the student
* The student’s entire class
* No one is required to stay home
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Quar17**. If a student was **potentially exposed to someone with COVID-19**, who is required to stay home and not attend school in-person? *Select all that apply.*

* The student
* Those who have been in close contact with the student
* The student’s entire class
* No one is required to stay home
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Quar18**. We’d like to learn more about what schools are experiencing while continuing to respond to the challenges of the COVID-19 pandemic. In the space below, please share any other information you would like the U.S. Department of Education and other federal policymakers to know about how you have dealt with **requiring students to stay home and not attend school in-person**.

*This item is optional*.

**Quar19a**. Today (or the most recent day you have information), are any TEACHERS and/or NON-TEACHING STAFF members currently at home and not allowed to be in the school building because they have been potentially exposed to COVID-19, displayed COVID-19 like symptoms, or have tested positive for COVID-19?

* Yes
* No
* Don’t Know
* Not Applicable – we are only providing full-time remote learning at this time

**Quar19b.** Today (or the most recent day you have information), how many TEACHERS and NON-TEACHING STAFF members are currently at home and not allowed to be in the school building because they have been potentially exposed to COVID-19, displayed COVID-19 like symptoms, or have tested positive for COVID-19? {Display if Quar19a 3-3 = Yes}

teachers and non-teaching staff members

**Quar20**. As of today, does your school require any of the following individuals to stay home and not be in the school building for COVID-19 related reasons? *Select all that apply.*

* Vaccinated individuals who have potentially been exposed to COVID-19
* Vaccinated individuals who display COVID-19-like symptoms
* Vaccinated individuals who have tested positive for COVID-19
* Unvaccinated individuals who have potentially been exposed to COVID-19
* Unvaccinated individuals who display COVID-19-like symptoms
* Unvaccinated individuals who have tested positive for COVID-19
* We do not require any individuals to stay home for COVID-19-related reasons
* Don’t Know

# Reflections on School Year (School-Level | Previously Approved)

**RSY1**. As a result of the ongoing COVID-19 pandemic, did any of the following concerns related to teaching and staffing at your school have become more pressing during the 2021-22 school year? *Select all that apply.*

* Teacher and staff burnout (i.e., exhaustion and cynicism towards their work)
* Teacher and staff mental health
* Teacher and staff physical health
* Teachers and staff retiring early
* Teachers and staff leaving the profession
* Inability to fill vacant teaching and staff positions with qualified applicants
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**RSY2a**. How prepared do you feel your school is to provide full-time remote learning to students if your school were to close for an extended period of time?

*Remote learning refers to students using online and/or paper materials to learn only from home or a location other than the*

*school building. Include students who come into the building only for state testing or who come in for services no more than one*

*day a month.*

* Not prepared at all
* Somewhat prepared
* Well prepared
* Very well prepared
* Not applicable – remote learning is not allowed for our school

**RSY2b**. What does your school need in order to be better prepared to provide full-time remote learning to students if your school were to close for an extended period of time? {Display if RSY2a = “Not prepared at all” or “Somewhat prepared”}

# School Improvement Plans (School-Level | New)

*The following items are focused on school improvement plans. Some of these items may require assistance from staff at the district level. Remember to enlist in any assistance from staff to help with responding to items for which you may not know the answer.*

**SIP#.** For the 2023-24 school year, has your school been identified for any of the following support and improvement programs?

* Yes, for comprehensive support and improvement
* Yes, for targeted support and improvement
* Yes, for additional targeted support and improvement
* No
* Don’t know

**SIP#.** For what reason was your school identified for comprehensive support and improvement {display if *support and improvement programs* = “Comprehensive…”}

* Low performing (CSI)
* Low graduation rate (CSI-Grad)
* Student group (CSI-SG)
* Don’t know

**SIP#.** Which of the following, if any, is your school prioritizing for your school improvement plan? {Display if *identified item* = Yes}

* Curriculum, Assessment, or Instructional Materials – English Language Arts
* Curriculum, Assessment, or Instructional Materials – Math
* Curriculum, Assessment, or Instructional Materials – Special populations (e.g., English Learners and Students with Disabilities)
* Curriculum, Assessment, or Instructional Materials – Other
* Family or Community Engagement
* Educator Professional Development or Mentoring
* Instructional Technology
* School Climate and Culture
* School Leadership
* Student Engagement
* Supplemental Instructional Services (e.g., Tutoring, Out-Of-School Time Programs, Summer Learning and Enrichment)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above

**SIP#.** What resource inequities, if any, did your school identify to be addressed as part of your school improvement plans? {Display if *identified item* = Yes}

* Funding sources (e.g., funds received under specific Federal programs, State funds for school improvement activities)
* Staffing resources (e.g., distribution of effective, experienced, and in-field teachers; access to counselors, social workers, psychologists, librarians, and school nurses; school leadership; pupil-teacher ratios; professional development; staff compensation; staff attendance; staff turnover)
* Instructional resources (e.g., access to prekindergarten and early learning programs; access to rigorous coursework; access to high quality instructional materials; instructional time and type; access to career and technical education; access to instructional technology)
* Physical resources (e.g., facility condition; facility design; utilization of space; broadband)
* Other, please specify: \_\_\_\_\_\_\_\_\_

**SIP#**. To the best of your knowledge, has the State informed your district that it may apply for school improvement funds under ESEA section 1003? {Display if *identified item* = Yes}

* Yes
* No
* Don’t know

**SIP#**. To the best of your knowledge, has your district submitted an application for school improvement funds under ESEA section 1003 and if so, when? Please enter a month and year if you answer “yes”. {Display if *ESEA section 1003 item* = Yes}

* Yes, \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* No
* Don’t know

**SIP#**. To the best of your knowledge, has your district been awarded school improvement funds under ESEA section 1003 and if so, when? Please enter a month and year if you answer “yes”. {Display if *ESEA section 1003 app item* = Yes}

* Yes, \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* No
* Don’t know

**SIP#**. To the best of your knowledge, what school improvement plan improvements is your district funding with its award under ESEA section 1003? {Display if *ESEA section 1003 awarded item* = Yes}

* Curriculum, Assessment, or Instructional Materials – English Language Arts
* Curriculum, Assessment, or Instructional Materials –Math
* Curriculum, Assessment, or Instructional Materials – Special populations (e.g., English Learners and Students with Disabilities)
* Curriculum, Assessment, or Instructional Materials – Other
* Family or Community Engagement
* Educator Professional Development or Mentoring
* Instructional Technology
* School Climate and Culture
* School Leadership
* Student Engagement
* Supplemental Instructional Services (e.g., Tutoring, Out-Of-School Time Programs, Summer Learning and Enrichment)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

# School Preparedness (School-Level | New)

**Prep#.** How often are school staff trained on safety and security procedures (including the school’s emergency operations plan) to follow in an emergency?

* We review portions of our safety and security procedures on a scheduled frequency (e.g., a section every 2 months)
* We review our procedures with staff at least annually
* We conduct tabletop exercises with staff at least annually
* We conduct drills/functional exercises with staff at least annually
* We conduct full-scale exercises with staff at least annually

**Prep#.** How often does your school review and revise its emergency operations plan (EOP)?

* After an emergency occurs
* Annually
* Bi-annually (every 6 months)
* Review and revise portions on a scheduled frequency (i.e., a section every 2 months)
* Never

**Prep#.** How often does your school collaborate with local public/private health agencies to evaluate the school's emergency prevention measures?

* Never
* Rarely
* Occasionally
* Regularly
* Don’t know

**Prep#.** How often do you send communications to parents about emergency operations plans?

* Only during an active emergency event
* Weekly
* Bi-weekly
* Monthly
* Annually
* Never

**Prep#.** Does your school include external expert partners on workgroups or committees to provide input into the emergency operations plan from any of the below local community partners? (Check all that apply)

* Healthcare providers (e.g., local physicians, nurses)
* Law enforcement groups (e.g., local police or bureau of investigation)
* Local or state department of health representatives
* Local media groups
* Local emergency management services
* Local social services providers

**Prep#.** Does your school website include a page where parents/guardians can review the school's emergency operations plan, response protocols, and/or procedures?

* Yes
* No
* Don’t know

**Prep#.** Does your school have a dedicated person who is responsible for coordinating and managing emergency preparedness?

* Yes
* No
* Don’t know

**Prep#.** During the 2022-23 school year, has your school conducted (or will they conduct) an active assailant drill?

* Yes, with staff only
* Yes, with students and staff
* No
* Don’t know

**Prep#.** How often does your school conduct active assailant drills? {Display if *active assailant item* = Yes}

* Once a school year
* Twice a school year
* 3-5 times a school year
* 6-8 times a school year
* Nine or more times a school year
* Don’t Know

# School Environment (District-Level | New)

**Wat#**. Do any schools in your district obtain drinking water from a public water system such as a city or municipal water plan?

* Yes
* No
* Don’t know

**Wat#**. Is there a requirement that the drinking water in your district’s schools be tested for lead? (Please answer “Yes” regardless of whether that requirement comes from your state, municipality, local educational agency, or any other governmental entity.)

* Yes
* No
* Don’t know

**Wat#**. Regardless of whether your district is required to test for lead in school drinking water, have tests been conducted for lead in the drinking water in at least one of your schools in the past 12 months?

* Yes
* No
* Don’t know

**Wat#**. In the past 12 months, were tests conducted in all schools in your district or only some schools? {Display if *have tests been conducted item* = Yes}

* All schools
* Some schools

**Wat#**. Which of the following factors were considered when deciding which schools would be tested? {Display if *all or some schools item* = Some schools}

* Age of school
* Whether school was an elementary school
* Number of students in the school
* Our district tests some schools, but not all schools, every year; all schools are tested over the course of several years
* Other, please specify: \_\_\_\_\_\_\_\_
* Don’t know

**Wat#**. How much do you estimate your district has spent on testing for lead in school drinking water in the last 12 months? *Include materials, labor, and any other expenditures related to lead testing in your estimate*. {Display if *have tests been conducted item* = Yes}

$\_\_\_\_\_\_\_\_\_

* Don’t know

**Wat#**. Did your district use any of the following sources of funding for lead testing in the past 12 months? *Select all that apply.* {Display if *have tests been conducted item* = Yes}

* Your district
* State government agency
* Federal government agency
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_

**Wat#**. In the past 12 months, did your district notify any of the following groups that it was planning to test for lead in school drinking water before conducting the tests? *Select all that apply.* {Display if *have tests been conducted item* = Yes}

* Local school board
* Parents
* General public (e.g., media)
* A state government agency
* Other, please specify: \_\_\_\_\_\_\_\_\_
* None of the above

**Wat#**. In the past 12 months, did your district report the testing results to any of the following groups after completing the tests? *Select all that apply.* {Display if *have tests been conducted item* = Yes}

* Local school board
* Parents
* General public (e.g., media)
* A state government agency
* Other, please specify: \_\_\_\_\_\_\_\_\_
* None of the above

**Wat#**. Were any of the following reasons why your district did not conduct any tests in the last 12 months? *Select all that apply.* {Display if *have tests been conducted item* = No}

* District did not identify a need to test
* District tested over 12 months ago
* District was not required to test
* District lacked funds for testing
* District lacked authority to conduct tests
* Schools were responsible to test, not the district
* Other, please specify: \_\_\_\_\_\_\_\_\_

**Wat#**. In the last 12 months, has your district discovered any level of lead in the drinking water at any of your schools (as a result of testing)?

* Yes
* No, we tested but did not discover any lead in school drinking water
* No, our district has not tested
* Don’t know

**Wat#**. In the last 12 months, how many schools had at least one test result – including as few as one sample in one school – greater than the lead level your district used to initiate action? {Display if *discovered lead item* = Yes}

\_\_\_\_\_\_ schools

* Don’t know

**Wat#**. To address lead discovered in school drinking water, has your district taken any of the following actions in any of your schools in the last 12 months? *Select all that apply.* {Display if *discovered lead item* = Yes}

* Water system was flushed
* Filters were installed
* Drinking fountains (bubblers) or faucets were replaced
* Drinking fountains (bubblers) or faucets were taken out of service but not replaced
* Pipes were replaced
* Bottled water was provided or students were told to bring in their own bottled water
* Some other action(s) was taken
* None of the above
* Don’t know

**Wat#**. How much do you estimate your district has spent on taking any actions in the past 12 months? *Please include materials, labor, and any other expenditures related to lead remediation in your estimates.* {Display if *discovered lead item* = Yes}

$\_\_\_\_\_\_\_\_\_\_

* Don’t know

**Wat#**. Did your district use any of the following sources of funding to take actions in the past 12 months? *Select all that apply.* {Display if *discovered lead item* = Yes}

* Your district
* State government agency
* Federal government agency
* Other, please specify: \_\_\_\_\_\_\_\_\_

**Wat#**. Did your district notify the following groups about its lead remediation actions in the past 12 months? *Select all that apply.* {Display if *discovered lead item* = Yes}

* Local school board
* Parents
* General public (e.g., media)
* A state government agency
* Other

**Wat#**. Does your district have plans to take actions to eliminate or reduce lead in school drinking water (e.g., replace drinking water fountains, replace pipes) in at least of one of your schools? {Display if *discovered lead item* = Yes}

* As needed
* According to a schedule
* Not now, but our district is developing plans
* No
* Don’t know

**Env#.** Does your school have an asbestos management plan?

* Yes
* No
* Don’t know

**Env#.** Have all building operations and maintenance staff reviewed the asbestos management plan? {Display if asbestos management item = Yes}

* Yes
* No
* Don’t know

**Env#.** Does your school’s cleaning staff use environmentally friendly cleaning products and “wet” dusting techniques whenever possible? *Wet dusting is a cleaning method where a cloth is lightly sprayed with a cleaning solution or water before dusting a surface.*

* Yes
* No
* Don’t know

**Env#.** Have anti-idling policies been implemented for buses that serve your school?

* Yes
* No
* Don’t know

**Env#.** Have anti-idling zones been established for all vehicles at your school (e.g., school buses, delivery trucks, parents’ cars)?

* Yes
* No
* Don’t know

**Env#.** Are passenger pickup/drop off areas located away from your school’s air intake supply, classroom windows, and exist doors?

* Yes
* No
* Don’t know

**Env#.** Does your school’s maintenance staff inspect and document the condition and findings for gas burning appliances, furnaces, and water heaters to ensure they are properly operating?

* Yes, once a week or more frequently
* Yes, once a month or more frequently, but not every week
* Yes, once a year or more frequently, but not once a month
* Yes, less frequently than once a year
* No
* Don’t know

**Env#.** Are carbon monoxide (CO) detectors installed in your school near appliances that burn natural gas, oil, wood, or gas?

* Yes
* No
* Don’t know

**Env#.** Does your school conduct an inventory of all chemicals present on school grounds?

* Yes, once a week or more frequently
* Yes, once a month or more frequently, but not every week
* Yes, once a year or more frequently, but not once a month
* Yes, less frequently than once a year
* No
* Don’t know

**Env#.** Does your school have a policy that prohibits any unauthorized toxic or hazardous chemicals from being brought onto school grounds?

* Yes
* No
* Don’t know

**Env#.** Are all chemicals on your school grounds properly labeled, stored in original containers, and dated as to when they enter the school?

* Yes
* No
* Don’t know

**Env#.** Does your school have Safety Data Sheets (SDSs) on site for all chemicals present on your school grounds?

* Yes
* No
* Don’t know

**Env#.** Are all toxic or hazardous chemicals present on your school grounds stored in appropriate containers, separated by hazard category, in a ventilated, fire resistant, and locked area or cabinet?

* Yes
* No
* Don’t know

**Env#.** Does your school conduct cleanouts of all chemicals that are unnecessary, outdated, and/or posing a health risk?

* Yes, once a week or more frequently
* Yes, once a month or more frequently, but not every week
* Yes, once a year or more frequently, but not once a month
* Yes, less frequently than once a year
* No
* Don’t know

**Env#.** Does your school provide training to staff that are involved with chemical management?

* Yes
* No
* Don’t know

**Env#.** Does your school provide training to students before they handle toxic or hazardous chemicals?

* Yes
* No
* Don’t know

**Env#.** Is it a regular practice at your school to turn off lights when not in use or when natural daylight can be used?

* Yes
* No
* Don’t know

**Env#.** Is it a regular practice at your school to set thermostats back in the evening and at other times when the building is unoccupied?

* Yes
* No
* Don’t know

**Env#.** Which of the following practices, if any, are performed at your school? *Select all that apply.*

* Track energy performance and consumption
* Perform monthly maintenance of heating, ventilation, and air conditioning (HVAC) systems and equipment
* Educate students and staff on how their behaviors affect energy use
* Implement an energy efficiency program

**Env#.** Does your school limit physical exertion outdoors during days with unhealthy air conditions or periods of extreme heat?

* Yes
* No
* Don’t know

**Env#.** Does your school currently implement a proactive Indoor Air Quality (IAQ) management program?

* Yes
* No
* Don’t know

**Env#.** Does your school have a tobacco-free campus policy?

* Yes
* No
* Don’t know

**Env#.** Does your school maintenance staff have a regular cleaning schedule for the following systems?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Yes, once a week or more frequently | Yes, once a month or more frequently, but not every week | Yes, once a year or more frequently, but not once a month | Yes, less frequently than once a year | No | Don’t Know |
| Unit ventilators |  |  |  |  |  |  |
| Supply air diffusers |  |  |  |  |  |  |
| Return registers |  |  |  |  |  |  |
| Outside air intakes |  |  |  |  |  |  |

**Env#.** In the last 12 months, has your school conducted an inventory all chemicals, materials, and equipment containing mercury?

* Yes
* No
* Don’t know

**Env#.** Does your school have a mercury spill kit and spill response plan readily available on site?

* Yes
* No
* Don’t know

**Env#.** Is the humidity in the buildings at your school maintained below 60 percent?

* Yes
* No
* Don’t know

**Env#.** Do all floors in the food service area and classrooms where food is served get cleaned and mopped daily?

* Yes
* No
* Don’t know

**Env#**. Are all food items stored in securely sealable containers or canisters?

* Yes
* No
* Don’t know

**Env#.** In the last 12 months, have all first floor and basement classrooms of the school been tested for the presence of radon?

* Yes
* No
* Don’t know

**Env#.** If a classroom’s radon level was found to exceed 4pCi/L, has your school or district installed a radon mitigation system?

* Yes
* No, we have not implemented a radon mitigation system
* No, we did not find any classrooms to exceed 4pCi/L
* Don’t know

**Env#.** Which of the following procedures, if any, does your school use? *Select all that apply.*

* Recycling in classrooms
* Recycling in the cafeteria and/or other areas where eating occurs
* Purchasing environmentally friendly products when available
* Pre-post waste reduction audits
* A curriculum that supports waste reduction and recycling

# Staffing (School-Level | Previously Approved)

**StaffVac1**. Please enter the following information on staffing at your school.

*Please only enter numbers in first two columns. For “****total number of positions****”, include positions that are filled and that are currently vacant. For “****number of vacancies****”, enter ‘0’ if your school offers the position and is fully staffed.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Total number of positions at my school (filled + vacant) | Number of vacancies | This position is not offered at my school | Don’t Know |
| General Elementary |  |  |  |  |
| Special Education |  |  |  |  |
| English or language arts |  |  |  |  |
| Social studies |  |  |  |  |
| Computer science |  |  |  |  |
| Mathematics |  |  |  |  |
| Biology or life sciences |  |  |  |  |
| Physical sciences (e.g., chemistry, physics, earth sciences) |  |  |  |  |
| English as a Second Language (ESL) or bilingual education |  |  |  |  |
| Foreign languages |  |  |  |  |
| Music or arts |  |  |  |  |
| Career or technical education |  |  |  |  |
| Physical education or health |  |  |  |  |
| Other teachers not listed |  |  |  |  |

**StaffVac2.** Please enter the following information on staffing at your school.

*Please only enter numbers in first two columns. For “****total number of positions****”, include positions that are filled and that are currently vacant. For “****number of vacancies****”, enter ‘0’ if your school offers the position and is fully staffed.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Total number of positions at my school (filled + vacant) | Number of vacancies | This position is not offered at my school | Don’t Know |
| Mental health professional (e.g., psychologist, social worker) |  |  |  |  |
| Medical professional (e.g., nurse, nurse’s aide) |  |  |  |  |
| Administrative staff |  |  |  |  |
| Technology specialist |  |  |  |  |
| Transportation staff |  |  |  |  |
| Custodial staff |  |  |  |  |
| Nutrition staff (e.g., food preparation, cafeteria workers) |  |  |  |  |
| Academic Counselor |  |  |  |  |
| Academic Interventionist |  |  |  |  |
| Tutor |  |  |  |  |
| Instructional Coaches |  |  |  |  |
| Classroom aide |  |  |  |  |

**StaffVac3**. To the best of your knowledge, why do you have teacher vacancies at this point in the school year? *Select all that apply.*

* Teacher attrition due to resignation
* Teacher attrition due to retirement
* New teaching positions were created
* Other reason
* Don’t Know/Unsure

**StaffVac4**. To the best of your knowledge, why do you have non-teaching staff vacancies at this point in the school year? *Select all that apply.*

* Staff attrition due to resignation
* Staff attrition due to retirement
* New staff positions were created
* Other reason
* Don’t Know/Unsure

**StaffVac5.** How have teacher and staff vacancies impacted your school? *Select all that apply.*

* ~~Forced change in learning modes (e.g., switching from in-person to hybrid learning)~~
* Disruptions in student transportation
* Disruptions in administration of school meals
* Disruptions in administration of medical care or response
* Offering fewer extra-curricular opportunities (e.g., athletics, clubs)
* Offering fewer student services (e.g., counseling, guidance)
* Increased class sizes
* Sharing of teachers and/or staff with other schools
* Increased need to use teachers outside of their intended duties (i.e., needing teachers to cover duties they were not hired to do)
* Increased need to use non-teaching staff outside of their intended duties (i.e., needing staff to cover duties they were not hired to do)

**STAFFING4\_1.** How have teacher and staff COVID-related absences impacted your school? *Select all that apply.* {Display if Quar19a = Yes}

* Forced change in learning modes (e.g., switching from in-person to hybrid learning)
* Disruptions in student transportation
* Disruptions in administration of school meals
* Disruptions in administration of medical care or response
* Offering fewer extra-curricular opportunities (e.g., athletics, clubs)
* Offering fewer student services (e.g., counseling, guidance)
* Increased class sizes
* Sharing of teachers and/or staff with other schools
* Increased need to use teachers outside of their intended duties (i.e., needing teachers to cover duties they were not hired to do)
* Increased need to use non-teaching staff outside of their intended duties (i.e., needing staff to cover duties they were not hired to do)

**STAFFING5.** To what extent do you agree with the following statement?

“The COVID-19 pandemic has increased the number of teacher and staff vacancies in my school”

* Strongly Disagree
* Disagree
* Neither Agree nor Disagree
* Agree
* Strongly Agree

**STAFFING6 3-5.** Thank you for completing this section of the survey. We’d like to learn more about what schools are experiencing while continuing to respond to the challenges of the COVID-19 pandemic. In the space below, please share any other information you would like the U.S. Department of Education and other federal policymakers to know about how you have dealt with **staff and teacher vacancies in your school.**

*This item is optional.*

**SV1a**. For the 2021-22 school year, did your school use American Rescue Plan (ARP) funds to create new teaching or non-teaching staff positions at your school?

* Yes
* No
* Don’t Know

**SV1b**. Which of the following positions did your school create using ARP funds during the 2021-22 school year? *Select all that apply.* {Display if SV1a = Yes}

* General Elementary
* Special Education
* English or Language Arts
* Social Studies
* Computer Science
* Mathematics
* Biology or life sciences
* Physical sciences (e.g., chemistry, physics)
* English as a Second Language (ESL) or bilingual education
* Foreign languages
* Music or arts
* Career or technical education
* Physical education or health
* Mental health professional (e.g., psychologist, social worker)
* Medical professional (e.g., nurse, nurse’s aide)
* Administrative staff
* Technology specialist
* Transportation staff
* Custodial staff
* Nutrition staff (e.g., food preparation, cafeteria worker)
* Academic counselor
* Academic interventionist
* Tutor
* Instructional coach

**SV1c**. Were you able to fill **ALL** of the newly created position(s)? *Select all that apply.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| {Rows display based on answers to SV1b} | Yes, with certified candidates | Yes, with emergency or provisionally certified candidates | No | Don’t Know |
| General Elementary |  |  |  |  |
| Special Education |  |  |  |  |
| English or Language Arts |  |  |  |  |
| Social Studies |  |  |  |  |
| Computer Science |  |  |  |  |
| Mathematics |  |  |  |  |
| Biology or life sciences |  |  |  |  |
| Physical sciences (e.g., chemistry, physics) |  |  |  |  |
| English as a Second Language (ESL) or bilingual education |  |  |  |  |
| Foreign languages |  |  |  |  |
| Music or arts |  |  |  |  |
| Career or technical education |  |  |  |  |
| Physical education or health |  |  |  |  |
| Mental health professional (e.g., psychologist, social worker) |  |  |  |  |
| Medical professional (e.g., nurse, nurse’s aide) |  |  |  |  |
| Administrative staff |  |  |  |  |
| Technology specialist |  |  |  |  |
| Transportation staff |  |  |  |  |
| Custodial staff |  |  |  |  |
| Nutrition staff (e.g., food preparation, cafeteria worker) |  |  |  |  |
| Academic counselor |  |  |  |  |
| Academic interventionist |  |  |  |  |
| Tutor |  |  |  |  |
| Instructional coach |  |  |  |  |

**SV2.** Before the start of the **2022-23 school year**, does your school need to fill any of the following teaching positions?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes, we have vacancies in this area | No, we are fully staffed in this area | This position is not offered at my school | Don’t Know |
| General Elementary |  |  |  |  |
| Special Education |  |  |  |  |
| English or language arts |  |  |  |  |
| Social studies |  |  |  |  |
| Computer science |  |  |  |  |
| Mathematics |  |  |  |  |
| Biology or life sciences |  |  |  |  |
| Physical sciences (e.g., chemistry, physics, earth sciences) |  |  |  |  |
| English as a Second Language (ESL) or bilingual education |  |  |  |  |
| Foreign languages |  |  |  |  |
| Music or arts |  |  |  |  |
| Career or technical education |  |  |  |  |
| Physical education or health |  |  |  |  |

**SV2a**. How many vacancies do you need to fill in these areas?

|  |  |
| --- | --- |
| {Rows display based on answers to SV2} | Number of vacancies |
| General Elementary |  |
| Special Education |  |
| English or language arts |  |
| Social studies |  |
| Computer science |  |
| Mathematics |  |
| Biology or life sciences |  |
| Physical sciences (e.g., chemistry, physics, earth sciences) |  |
| English as a Second Language (ESL) or bilingual education |  |
| Foreign languages |  |
| Music or arts |  |
| Career or technical education |  |
| Physical education or health |  |

**SV2b**. How easy or difficult do you anticipate it will be to fill each teaching position with a fully certified teacher?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| {Rows populate based on answers to SV2} | Very Easy | Somewhat easy | Somewhat difficult | Very difficult |
| General Elementary |  |  |  |  |
| Special Education |  |  |  |  |
| English or language arts |  |  |  |  |
| Social Studies |  |  |  |  |
| Computer science |  |  |  |  |
| Mathematics |  |  |  |  |
| Biology or life sciences |  |  |  |  |
| Physical sciences (e.g., chemistry, physics) |  |  |  |  |
| English as a Second Language (ESL) or bilingual education |  |  |  |  |
| Foreign languages |  |  |  |  |
| Music or arts |  |  |  |  |
| Career or technical education |  |  |  |  |
| Physical education or health |  |  |  |  |

**SV3.** Before the start of the 2022-23 school year, does your school need to fill any of the following non-teaching staff positions?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes, we have vacancies in this area | No, we are fully staffed in this area | This position is not offered at my school | Don’t Know |
| Mental health professional (e.g., psychologist, social worker) |  |  |  |  |
| Medical professional (e.g., nurse, nurse’s aide) |  |  |  |  |
| Administrative staff |  |  |  |  |
| Technology specialist |  |  |  |  |
| Transportation staff |  |  |  |  |
| Custodial staff |  |  |  |  |
| Nutrition staff (e.g., food preparation, cafeteria workers) |  |  |  |  |
| Academic Counselor |  |  |  |  |
| Academic Interventionist |  |  |  |  |
| Tutors |  |  |  |  |
| Instructional Coaches |  |  |  |  |

**SV3a**. Before the start of the **2022-23 school year**, how many non-teaching positions in each field does your school need to fill?

|  |  |
| --- | --- |
| {Rows populate based answers in SV3} | Number of vacancies |
| Mental health professional (e.g., psychologist, social worker) |  |
| Medical professional (e.g., nurse, nurse’s aide) |  |
| Administrative staff |  |
| Technology specialist |  |
| Transportation staff |  |
| Custodial staff |  |
| Nutrition staff (e.g., food preparation, cafeteria workers) |  |
| Academic Counselor |  |
| Academic Interventionist |  |
| Tutors |  |
| Instructional Coaches |  |

**SV3b**. How easy or difficult do you anticipate it will be to fill each non-teaching position with fully certified staff?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| {Rows populate based answers in SV3} | Very Easy | Somewhat easy | Somewhat difficult | Very difficult |
| Mental health professional (e.g., psychologist, social worker) |  |  |  |  |
| Medical professional (e.g., nurse, nurse’s aide) |  |  |  |  |
| Administrative staff |  |  |  |  |
| Technology specialist |  |  |  |  |
| Transportation staff |  |  |  |  |
| Custodial staff |  |  |  |  |
| Nutrition staff (e.g., food preparation, cafeteria workers) |  |  |  |  |
| Academic Counselor |  |  |  |  |
| Academic Interventionist |  |  |  |  |
| Tutors |  |  |  |  |
| Instructional Coaches |  |  |  |  |

**SV3**. We’d like to learn more about what schools are experiencing while continuing to respond to the challenges of the COVID-19 pandemic. In the space below, please share any other information you would like us to know about how you have dealt with **teaching and staff vacancies**.

*This item is optional.*

**HP1**. How easy or difficult was it for you to fill each of the following **teaching** positions with a fully certified teacher for the 2023-24 school year?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | We did not have vacancies in this area | Very Easy | Somewhat easy | Somewhat difficult | Very difficult | Our school does not offer this position | Don’t Know |
| General Elementary |  |  |  |  |  |  |  |
| Special Education |  |  |  |  |  |  |  |
| English or language arts |  |  |  |  |  |  |  |
| Social Studies |  |  |  |  |  |  |  |
| Computer science |  |  |  |  |  |  |  |
| Mathematics |  |  |  |  |  |  |  |
| Biology or life sciences |  |  |  |  |  |  |  |
| Physical sciences (e.g., chemistry, physics) |  |  |  |  |  |  |  |
| English as a Second Language (ESL) or bilingual education |  |  |  |  |  |  |  |
| Foreign languages |  |  |  |  |  |  |  |
| Music or arts |  |  |  |  |  |  |  |
| Career or technical education |  |  |  |  |  |  |  |
| Physical education or health |  |  |  |  |  |  |  |
| Other, please specify: \_\_\_\_\_\_\_\_ |  |  |  |  |  |  |  |

**HP2**. What, if any, challenges did you experience filling vacant **teaching** positions for the 2023-24 school year? *Select all that apply.*

* Too few candidates applying for open teaching positions
* A lack of qualified candidates applying for open teaching positions
* Candidates felt the salary and benefits for teaching positions were not enough
* Applicants turned down teaching positions once offered for reasons other than salary and benefits
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We did not experience any challenges filling teacher vacancies
* We did not have any teacher vacancies to fill
* Don’t know

**HP3**. How easy or difficult was it for you to fill each of the following **non-teaching staff** positions with a fully certified staff member for the 2023-24 school year?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | We did not have vacancies in this area | Very Easy | Somewhat easy | Somewhat difficult | Very difficult | Our school does not offer this position | Don’t Know |
| Mental health professional (e.g., psychologist, social worker) |  |  |  |  |  |  |  |
| Medical professional (e.g., nurse, nurse’s aide) |  |  |  |  |  |  |  |
| Administrative staff |  |  |  |  |  |  |  |
| Technology specialist |  |  |  |  |  |  |  |
| Transportation staff |  |  |  |  |  |  |  |
| Custodial staff |  |  |  |  |  |  |  |
| Nutrition staff (e.g., food preparation, cafeteria worker) |  |  |  |  |  |  |  |
| Academic counselor |  |  |  |  |  |  |  |
| Academic interventionist |  |  |  |  |  |  |  |
| Tutor |  |  |  |  |  |  |  |
| Instructional coach |  |  |  |  |  |  |  |
| Classroom aide |  |  |  |  |  |  |  |
| Other, please specify: \_\_\_\_\_\_\_\_ |  |  |  |  |  |  |  |

**HP4**. What, if any, challenges did you experience filling vacant **non-teaching staff** positions for the 2023-24 school year? *Select all that apply.*

* Too few candidates applying for open staff positions
* A lack of qualified candidates applying for open staff positions
* Candidates felt the salary and benefits for staff positions were not enough
* Applicants turned down staff positions once offered for reasons other than salary and benefits
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We did not experience any challenges filling staff vacancies
* We did not have any staff vacancies to fill
* Don’t know

**HP5**. Entering the 2023-24 school year, do you feel your school is understaffed?

* Yes
* No
* Don’t Know

**HP6**. In which of the following areas do you feel that your school is understaffed? {Display if HP5 = Yes}

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes, we are understaffed in this area | No, we are not understaffed in this area | Not applicable – our school does not offer this position |
| General Elementary |  |  |  |
| Special Education |  |  |  |
| English or Language Arts |  |  |  |
| Social Studies |  |  |  |
| Computer Science |  |  |  |
| Mathematics |  |  |  |
| Biology or life sciences |  |  |  |
| Physical sciences (e.g., chemistry, physics) |  |  |  |
| English as a Second Language (ESL) or bilingual education |  |  |  |
| Foreign languages |  |  |  |
| Music or arts |  |  |  |
| Career or technical education |  |  |  |
| Physical education or health |  |  |  |
| Mental health (e.g., psychologist, social worker) |  |  |  |
| Medical (e.g., nurse, nurse’s aide) |  |  |  |
| Administrative staff |  |  |  |
| Technology |  |  |  |
| Transportation |  |  |  |
| Custodial |  |  |  |
| Nutrition (e.g., food preparation, cafeteria worker) |  |  |  |
| Academic counseling |  |  |  |
| Academic interventionist |  |  |  |
| Tutor |  |  |  |
| Instructional coach |  |  |  |
| Classroom aide |  |  |  |
| Other, please specify: |  |  |  |

**HP7**. Which of the following have contributed to your school being understaffed for the 2022-23 school year? *Select all that apply.* {Display if HP5 = Yes}

* We have lost full-time equivalent (FTE) **teaching positions** since the start of the COVID-19 pandemic
* We have lost FTE **non-teaching staff positions** since the start of the COVID-19 pandemic
* We have not been able to fill vacant **teaching positions** since the start of the COVID-19 pandemic
* We have not been able to fill vacant **non-teaching staff positions** since the start of the COVID-19 pandemic
* We were already understaffed prior to the start of the COVID-19 pandemic.
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* Don’t Know

**HP8**. Which of the following positions, if any, has your school created for the 2022-23 school year using American Rescue Plan (ARP) funds? *Select all that apply. Please include positions that were fully or partially funded by the ARP funds.*

* General Elementary
* Special Education
* English or Language Arts
* Social Studies
* Computer Science
* Mathematics
* Biology or life sciences
* Physical sciences (e.g., chemistry, physics)
* English as a Second Language (ESL) or bilingual education
* Foreign languages
* Music or arts
* Career or technical education
* Physical education or health
* Mental health professional (e.g., psychologist, social worker)
* Medical professional (e.g., nurse, nurse’s aide)
* Administrative staff
* Technology specialist
* Transportation staff
* Custodial staff
* Nutrition staff (e.g., food preparation, cafeteria worker)
* Academic counselor
* Academic interventionist
* Tutor
* Instructional coach
* Other staff, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* My school has not created any new positions for the 2022-23 school year using ARP funds
* I do not know if any positions were created for the 2022-23 school year using ARP funds

**HP9**. We’d like to learn more about how schools’ experiences **filling teacher and staff vacancies** for the 2023-24 school year. In the space below, please share any other information you like us to know on this topic.

*This item is optional.*

# Staffing (School-Level | New)

**STAFFING11a**. How many literacy and math coaches are specifically focused on supporting learning acceleration and recovery? {if STAFFING11A ‘Instructional Coaches Total number of Positions at my School’ > 0}

* Literacy coaches supporting learning recovery and acceleration: \_\_\_\_\_\_\_\_\_\_\_\_\_
* Math coaches supporting learning recovery and acceleration: \_\_\_\_\_\_\_\_\_\_\_\_\_

**STAFFING11b**. How many instructional coaching positions have been added at your school since the 2019-20 school year?

|  |  |  |
| --- | --- | --- |
| {if STAFFING11A ‘Instructional Coaches Total number of Positions at my School’ > 0} | Number of instructional coaches added | Don’t Know |
| Literacy coaches added |  |  |
| Math coaches added |  |  |

**Staffing**##. During the 2023-24 school year, has your school needed to use a long-term substitute teacher?

* Yes
* No
* Don’t Know

**Staffing**##. How many long-term substitutes has your school used during this school year?

\_\_\_\_\_\_\_\_\_

**Staffing**##. During the 2023-24 school year, how many times has your school needed to use a long-term substitute? *Include times where the same person served as a long-term substitute for different teachers/openings at your school*.

\_\_\_\_\_\_\_\_\_

**Staffing##**. Compared to the LAST school year (2022-23), how has the use of long-term substitutes at your school changed during the 2023-24 school year?

* Use of long-term substitutes has decreased a lot
* Use of long-term substitutes has decreased a little
* Use of long-term substitutes has remained about the same
* Use of long-term substitutes has increased a little
* Use of long-term substitutes has increased a lot
* Don’t Know

**Staffing**##. Which of the following are reasons that your school has used a long-term substitute during this school year?

* Teacher maternity/paternity leave
* Teacher long-term physical illness/disability
* Teacher long-term mental illness/disability
* Teacher sabbatical leave
* Teacher leave to take care of family/dependents
* Covering for teacher vacancies that existed to start the school year
* Covering for teacher vacancies that arose during the school year

**Staffing17a.** Has your school **added** any full- or part-time positions since the 2019-20 school year? *Select all that apply*.

* Yes, we have added teaching position(s)
* Yes, we have added non-teaching staff position(s)
* No
* We are a new school that did not exist during the 2019-20 school year
* Don’t know

**Staffing17b**. Why has your school **added** full- or part-time positions? *Select all that apply.*

* Enrollment has increased
* We were able to fund new positions
* Our school/district went through a reorganization/restructuring of staffing
* We were previously understaffed
* We added new classes/courses
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**Staffing17c.** How many full- or part-time positions have you **added** since the 2019-20 school year?

|  |  |  |
| --- | --- | --- |
|  | Number of positions added | Don’t know |
| Full-time teachers  {Display if *Staffing17a* = teaching} |  |  |
| Part-time teachers  {Display if *Staffing17a* = teaching} |  |  |
| Full-time non-teaching staff  {Display if *Staffing17a* = non-teaching} |  |  |
| Part-time non-teaching staff  {Display if *Staffing17a* = non-teaching} |  |  |

**Staffing17d.** How many of these positions were added **using federal funds**?

|  |  |  |
| --- | --- | --- |
|  | Number of positions added | Don’t know |
| Full-time teachers  {Display if *Staffing17b teaching > 0*} |  |  |
| Part-time teachers  {Display if *Staffing17b teaching > 0*} |  |  |
| Full-time non-teaching staff  {Display if *Staffing17b non-teaching > 0*} |  |  |
| Part-time non-teaching staff  {Display if *Staffing17b non-teaching > 0*} |  |  |

**Staffing18a.** Has your school **lost** any full- or part-time positions since the 2019-20 school year? *Select all that apply*.

* Yes, we have lost teaching position(s)
* Yes, we have lost non-teaching staff position(s)
* No
* We are a new school that did not exist during the 2019-20 school year
* Don’t know

**Staffing18b**. Why has your school **lost** full- or part-time positions? *Select all that apply.*

* Enrollment has decreased
* We lost funding/budget cuts
* Our school/district went through a reorganization/restructuring of staffing
* We reduced the number of classes/courses we offer
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**Staffing18c.** How many full- or part-time positions have you **lost** since the 2019-20 school year?

|  |  |  |
| --- | --- | --- |
|  | Number of positions lost | Don’t know |
| Full-time teachers  {Display if *Staffing18a* = teaching} |  |  |
| Part-time teachers  {Display if *Staffing18a* = teaching} |  |  |
| Full-time non-teaching staff  {Display if *Staffing18a* = non-teaching} |  |  |
| Part-time non-teaching staff  {Display if *Staffing18a* = non-teaching} |  |  |

**Staffing\_co1.** Of the instructional coaches at your school, how many are focused on the following subject areas? {Display if StaffVac2: Instructional Coaches total number > 0}

\_\_\_\_\_\_\_ literacy coaches

\_\_\_\_\_\_\_ math coaches

\_\_\_\_\_\_\_ other coaches

**Staffing\_co2**. How has the number of instructional coach positions at your school changed since the 2019-20 school year? {Display if ANY of STAFFING\_co1 > 0}

* We have added instructional coaches
  + \_\_\_\_\_\_\_number of instructional coaches added {display if answer above is selected}
* We have lost instructional coach positions
  + \_\_\_\_\_\_\_number of instructional coaches lost {display if answer above is selected}
* The number of instructional coach positions has remained the same
* We are a new school that did not exist during the 2019-20 school year
* Don’t know

**StaffVac\_more**. We’d like to learn more about how schools’ experiences **with staffing** for the 2023-24 school year. In the space below, please share any other information you like us to know on this topic.

*This item is optional.*

**Staffing##.** How easy or difficult do you anticipate it will be to fill any **teaching** positions with a fully certified teacher for the next school year (2024-25)?

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | We do not anticipate having vacancies in this area | Very Easy | Somewhat easy | Neither easy nor difficult | Somewhat difficult | Very difficult | Our school does not offer this position | Don’t Know |
| General Elementary |  |  |  |  |  |  |  |  |
| Special Education |  |  |  |  |  |  |  |  |
| English or language arts |  |  |  |  |  |  |  |  |
| Social Studies |  |  |  |  |  |  |  |  |
| Computer science |  |  |  |  |  |  |  |  |
| Mathematics |  |  |  |  |  |  |  |  |
| Biology or life sciences |  |  |  |  |  |  |  |  |
| Physical sciences (e.g., chemistry, physics) |  |  |  |  |  |  |  |  |
| English as a Second Language (ESL) or bilingual education |  |  |  |  |  |  |  |  |
| Foreign languages |  |  |  |  |  |  |  |  |
| Music or arts |  |  |  |  |  |  |  |  |
| Career or technical education |  |  |  |  |  |  |  |  |
| Physical education or health |  |  |  |  |  |  |  |  |

**Staffing##.** How easy or difficult do you anticipate it will be to fill any non-teaching staff positions with a fully certified staff member for the next school year (2024-25)?

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | We do not anticipate having vacancies in this area | Very Easy | Somewhat easy | Neither easy nor difficult | Somewhat difficult | Very difficult | Our school does not offer this position | Don’t Know |
| Mental health professional (e.g., psychologist, social worker) |  |  |  |  |  |  |  |  |
| Medical professional (e.g., nurse, nurse’s aide) |  |  |  |  |  |  |  |  |
| Administrative staff |  |  |  |  |  |  |  |  |
| Technology specialist |  |  |  |  |  |  |  |  |
| Transportation staff |  |  |  |  |  |  |  |  |
| Custodial staff |  |  |  |  |  |  |  |  |
| Nutrition staff (e.g., food preparation, cafeteria workers) |  |  |  |  |  |  |  |  |
| Academic Counselor |  |  |  |  |  |  |  |  |
| Academic Interventionist |  |  |  |  |  |  |  |  |
| Tutors |  |  |  |  |  |  |  |  |
| Instructional Coaches |  |  |  |  |  |  |  |  |

# Staffing (District-Level | New)

**Staffing##.** Over the last two school years, has your school or district increased teaching salaries to match rising inflation rates?

* Yes
* No
* Don’t Know

**Staffing##.** Has increasing teacher salaries to match rising inflation been successful retaining teachers at your school?

* Yes
* No
* Don’t Know

**Staffing##.** Over the last two school years, has your school or district increased non-teaching salaries to match rising inflation rates?

* Yes
* No
* Don’t Know

**Staffing##.** Has increasing non-teaching staff salaries to match rising inflation been successful retaining non-teaching staff at your school?

* Yes
* No
* Don’t Know

**Staffing**##. Which of the following incentives has your school used to recruit and retain teachers?

* Better working conditions (e.g., decreased workload, smaller classroom sizes)
* Day-care for employee’s children
* Four-day work week
* Higher-quality medical benefits
* Housing assistance
* Increased access and affordability for classroom supplies and materials
* Increased flexibility surrounding professional development
* Increased sick days
* Increased vacation time
* Professional mentorship
* Student loan aid (e.g., debt relief)
* Tuition benefits/aid (e.g., reimbursement, discounted enrollment fees) for teachers pursuing a graduate degree while working at your school
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above

**Staffing##.** How was your school or district able to cover the cost of increasing teacher salaries? {Display if *increasing salaries item* = Yes}

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Other federal grants or programs
* State grants or other state programs
* District or school financial funding
* Philanthropic support
* Partnerships or sponsorships with organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**Staffing##.** How was your school or district able to cover the cost of increasing non-teaching staff salaries? {Display if *increasing salaries item* = Yes}

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Other federal grants or programs
* State grants or other state programs
* District or school financial funding
* Philanthropic support
* Partnerships or sponsorships with organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**Staffing**##. Does your school or district have a teacher cadet program (also known as “grow-your-own”, XXX, XXX) to help recruit students to pursue the teaching profession?

* Yes
* No
* Don’t Know
* Not Applicable – we are not a high school

**Staffing##.** What challenges, if any, do you have in accessing or using federal assistance to support hiring teaching and non-teaching staff?

* Grant execution
* Appropriate disbursement of funds
* Documentation of fund usage
* Analysis of need
* Other, please specify: \_\_\_\_\_\_\_
* We do not have any challenges accessing or using federal assistance to support hiring
* Don’t know

**Staffing##.** Is your district able to use federal finding to fill vacant positions? *Select all that apply*.

* Yes, for teaching positions
* Yes, for non-teaching staff positions
* No
* Don’t know

# Student Behavior (School-Level | Previously Approved)

**SB1**. During the 2021-22 school year, have any of the following negatively impacted teachers’ classroom management at your school?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | No negative impact | A small negative impact | A moderate negative impact | A large negative impact | Don’t Know | Not applicable |
| Student behavioral issues |  |  |  |  |  |  |
| Student socioemotional issues |  |  |  |  |  |  |
| COVID-19 mitigation strategies (e.g., modifications to classroom layout, social distancing, mask-wearing) |  |  |  |  |  |  |
| Accommodating students in remote learning |  |  |  |  |  |  |
| Lack of support staff (e.g., teacher’s aides) |  |  |  |  |  |  |

**SB2**. To what extent do you agree or disagree with the following statement:

“The COVID-19 pandemic negatively impacted the **behavioral development** of students at my school.”

* Strongly disagree
* Disagree
* Neither agree nor disagree
* Agree
* Strongly agree

**SB3**. To what extent do you agree or disagree with the following statement:

“The COVID-19 pandemic negatively impacted the **socioemotional development** of students at my school.”

* Strongly disagree
* Disagree
* Neither agree nor disagree
* Agree
* Strongly agree

**SB4a**. Compared to a **typical school year before the start of the COVID-19 pandemic**, have any of the following student behaviors changed at your school during the 2021-22 school year?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Decreased | Remained about the same | Increased | Don’t Know | This behavior does not occur at my school |
| Physical attacks or fights between students |  |  |  |  |  |
| Threats of physical attacks or fights between students |  |  |  |  |  |
| Hate crimes |  |  |  |  |  |
| Bullying |  |  |  |  |  |
| Distribution, possession, or use of illegal drugs |  |  |  |  |  |
| Distribution, possession, or use of alcohol |  |  |  |  |  |
| Distribution, possession, or use of tobacco products (cigarettes, vapes, e-cigarettes) |  |  |  |  |  |
| Vandalism |  |  |  |  |  |
| Classroom disruptions from student misconduct |  |  |  |  |  |
| Rowdiness outside of the classroom (e.g., hallways, lunchroom) |  |  |  |  |  |
| Students cutting class |  |  |  |  |  |
| Student tardiness |  |  |  |  |  |
| Use of cell phones, computers and other electronic devices when not permitted |  |  |  |  |  |

**SB4b**. You indicated the prevalence of the following student behaviors have **increased** at your school this year. Do you believe the COVID-19 pandemic and its lingering effects have influenced the increase in these behaviors? Select those behaviors you believe have increased because of the COVID-19 pandemic. *Select all that apply.*

* {Answers populate based on “increased a little” or “increased a lot” selections to SB4a}

**SB4c**. You indicated the prevalence of the following student behaviors have **decreased** at your school this year. Do you believe the COVID-19 pandemic and its lingering effects have influenced the decrease in these behaviors? Select those behaviors you believe have decreased because of the COVID-19 pandemic. *Select all that apply.*

* {Answers populate based on “decreased a little” or “decreased a lot” selections to SB4a}

**SB5a**. Compared to a typical year before the start of the COVID-19 pandemic, have any of the following student behaviors **directed at teachers or staff** changed during the 2021-22 school year?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Decreased | Remained about the same | Increased | Don’t Know | This behavior does not occur at my school |
| Student threats to injure a teacher or staff member |  |  |  |  |  |
| Student physical attacks of a teacher or staff member |  |  |  |  |  |
| Student verbal abuse of teachers or staff members |  |  |  |  |  |
| Student acts of disrespect towards teachers or staff members other than verbal abuse |  |  |  |  |  |

**SB5b**. You indicated the prevalence of the following student behaviors directed at teachers or staff have **increased** at your school this year. Do you believe the COVID-19 pandemic and its lingering effects have influenced the increase in these behaviors? Select those behaviors you believe have increased because of the COVID-19 pandemic.

* {Answers populate based on “increased a little” or “increased a lot” selections to SB5a}

**SB5c**. You indicated the prevalence of the following student behaviors directed at teachers or staff have **decreased** at your school this year. Do you believe the COVID-19 pandemic and its lingering effects have influenced the decrease in these behaviors? Select those behaviors you believe have decreased because of the COVID-19 pandemic.

* {Answers populate based on “decreased a little” or “decreased a lot” selections to SB5a}

**SB6**. Does your school need more of any of the following to better support student behavior and development? *Select all that apply.*

* More training on classroom management strategies
* More training on supporting students’ socioemotional development
* More teachers and/or staff need to be hired
* More support for student and/or staff mental health
* Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above

**SB7 4-7**. We’d like to learn more about what schools are experiencing while continuing to respond to the challenges of the COVID-19 pandemic. In the space below, please share any other information you would like the U.S. Department of Education and other federal policymakers to know about how you have dealt with **student behavior and discipline in the classroom**.

# Student Behavior (School-Level | New)

**BIS#**. Does your school utilize a School-wide Positive Behavioral Interventions and Supports (SWPBIS) program?

*A SWPBIS program is a framework designed to enhance students’ understanding of behavior expectations at school and reduce behavior problems that lead to discipline referrals and suspensions.* {Display remaining items if answered “Yes”}

* Yes
* No
* Don’t know

**BIS#**. Which of the following personnel are part of your school’s SWPBIS Team? *Select all that apply.*

* Systems coordinator
* School administrator
* Behavior specialist
* Classroom teacher
* Student’s family member
* Don’t know

**BIS#**. Which of the following roles do members on your SWPBIS team fulfill? *Select all that apply.*

* Applied behavioral expertise
* Coaching expertise
* Knowledge of student academic and behavior patterns
* Knowledge about the operations of the school across grade levels and programs
* Student representation

**BIS#**. How often does your SWPBIS team meet?

* Once a week or more frequently
* Once a month or more frequently, but not every week
* Once a year or more frequently, but not once a month
* Less frequently than once a year
* Don’t know

BIS#. What level(s) of support is part of your school’s SWPBIS program? *Select all that apply.*

* Tier 1
* Tier 2
* Tier 3
* Don’t know

**BIS#**. To what extent has your school implemented the following components of a **Tier 1** SWPBIS program? {Display if *level of support item* = Tier 1)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Fully implemented | Partially implemented *(i.e., we have implemented this component but not to the degree or in the exact manner listed)* | Not implemented | Don’t know |
| Five or fewer positive stated behavioral expectations and examples are available to be seen by students and staff |  |  |  |  |
| Expected academic and social behaviors are explicitly taught to all students |  |  |  |  |
| Clear definitions for behaviors that interfere with academic and social success |  |  |  |  |
| School policies and procedures describe and emphasize proactive, instructive, and/or restorative approaches to student behavior that are implemented consistently |  |  |  |  |
| Written process is used for orienting faculty/staff on Tier 1 SWPBIS practices |  |  |  |  |
| Tier 1 practices are implemented within classrooms and consistent with school-wide systems |  |  |  |  |
| Teachers and staff are shown school-wide data regularly and provide input on Tier 1 practices at least once per year |  |  |  |  |
| Students, families, and community members are given the opportunity to input on Tier 1 practices at least once per year |  |  |  |  |
| Tier 1 team has instantaneous access to reports summarizing discipline data at your school |  |  |  |  |
| Tier 1 team reviews and uses discipline data at least monthly for decision-making |  |  |  |  |
| Tier 1 team documents fidelity and effectiveness of Tier 1 practices at least once per year and shares this information with students, families, and community members |  |  |  |  |

**BIS#**. What challenges, if any, has your school experienced when implementing **Tier 1** SWPBIS practices? *Select all that apply.* {Display if *level of support item* = Tier 1)

* Lack of support from teachers and staff to implement Tier 1 practices
* Lack of support from parents/guardians for Tier 1 practices
* Lack of funding to support implementation of Tier 1 practices
* Finding instructional time to dedicate to implementing Tier 1 practices
* Other, please specify: \_\_\_\_\_\_\_\_\_\_
* We have not experienced any challenges when implementing Tier 1 practices

**BIS#**. To what extent has your school implemented the following components of a **Tier 2** SWPBIS program? {Display if *level of support item* = Tier 2)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Fully implemented | Partially implemented *(i.e., we have implemented this component but not to the degree or in the exact manner listed)* | Not implemented | Don’t know |
| Tier 2 team has multiple ongoing behavior support interventions with documented evidence of effectiveness matched to student need. |  |  |  |  |
| Tier 2 behavior support interventions provide (a) additional instruction/time for student skill development, (b) additional structure/predictability, and/ or (c) increased opportunity for feedback (e.g., daily progress report). |  |  |  |  |
| A formal process is in place to select Tier 2 interventions that are (a) matched to student need (e.g., behavioral function), and (b) adapted to improve contextual ft (e.g., culture, developmental level). |  |  |  |  |
| Tier 2 supports are explicitly linked to Tier 1 supports and students receiving Tier 2 supports have access to, and are included in, Tier 1 supports |  |  |  |  |
| A written process is followed for teaching all relevant staff how to refer students and implement each Tier 2 intervention that is in place. |  |  |  |  |

**BIS#**. What challenges, if any, has your school experienced when implementing **Tier 2** SWPBIS practices? *Select all that apply.* {Display if *level of support item* = Tier 2)

* Lack of support from teachers and staff to implement Tier 2 practices
* Lack of support from parents/guardians for Tier 2 practices
* Lack of funding to support implementation of Tier 2 practices
* Finding instructional time to dedicate to implementing Tier 2 practices
* Other, please specify: \_\_\_\_\_\_\_\_\_\_
* We have not experienced any challenges when implementing Tier 2 practices

**BIS#**. To what extent has your school implemented the following components of a **Tier 3** SWPBIS support plan? {Display if *level of support item* = Tier 3)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Fully implemented | Partially implemented *(i.e., we have implemented this component but not to the degree or in the exact manner listed)* | Not implemented | Don’t know |
| Assessment includes student strengths and identification of student/family preferences for individualized support options to meet their stated needs across life domains (e.g., academics, health, career, social). |  |  |  |  |
| Assessment data are available for academic (e.g., reading, math, writing), behavioral (e.g., attendance, functional behavioral assessment, suspension/expulsion), medical, and mental health strengths and needs, across life domains where relevant. |  |  |  |  |
| Behavior support plan includes a hypothesis statement including (a) operational description of problem behavior, (b) identification of context where problem behavior is most likely, and (c) maintaining reinforcers (e.g., behavioral function) in this context |  |  |  |  |
| Behavior support plans include or consider (a) prevention strategies, (b) teaching strategies, (c) strategies for removing rewards for problem behavior, (d) specific rewards for desired behavior, (e) safety elements where needed, (f) a systematic process for assessing fidelity and impact, and (g) the action plan for putting the support plan in place. |  |  |  |  |
| Behavior support plan(s) requiring extensive and coordinated support (e.g., person centered planning, wraparound, RENEW) documents quality of life strengths and needs to be completed by formal (e.g., school/district personnel) and natural (e.g., family, friends) supporters |  |  |  |  |
| Students receiving Tier 3 supports have access to, and are included in, available Tier 1 and Tier 2 supports. |  |  |  |  |

**BIS#**. What challenges, if any, has your school experienced when implementing **Tier 3** SWPBIS practices? *Select all that apply.* {Display if *level of support item* = Tier 3)

* Lack of support from teachers and staff to implement Tier 3 practices
* Lack of support from parents/guardians for Tier 3 practices
* Lack of funding to support implementation of Tier 3 practices
* Finding instructional time to dedicate to implementing Tier 3 practices
* Other, please specify: \_\_\_\_\_\_\_\_\_\_
* We have not experienced any challenges when implementing Tier 3 practices

**BIS#**. How effective do you feel your school’s SWPBIS program has been for the following:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not at all effective | Slightly effective | Moderately Effective | Very Effective | Extremely Effective |
| Supporting students’ mental health |  |  |  |  |  |
| Supporting students’ social intelligence and behavior |  |  |  |  |  |
| Supporting students’ emotional intelligence and behavior |  |  |  |  |  |
| Increasing students’ sense of belonging and comfort at school |  |  |  |  |  |
| Increasing school safety |  |  |  |  |  |
| Reducing discipline referrals |  |  |  |  |  |
| Improving learning and academic achievement |  |  |  |  |  |

# Summer Programs (School-Level | Previously Approved + New)

***The content of the items in this section has been previously approved, but have been reformatted to better fit the new items (following section)***

**SP\_gate**. Which of the following summer programs did your school offer during summer 2023?

* **Summer school program**: classes offered during the summer that students take for remedial or credit recovery purposes; students are often required to attend summer school because of their performance during the school year {Display SP\_ss items if selected}
* **Summer learning and enrichment programs**: classes or programs offered during the summer that students may participate in that provide additional learning opportunities, or course credit, in a variety of subject areas; students’ participation in these programs is voluntary {Display SP\_le items if selected}
* **Summer recreation programs:** programs offered during the summer that students may participate in that may include recreation, sports, games and activities, youth development, etc.; these programs typically do not have an academic focus and students’ participation is voluntary {Display SP\_r items if selected}
* **Summer bridge programs**: programs offered during the summer that support transitions to new grade or school levels (e.g., the transition from elementary to middle school or from middle school to high school) {Display SP\_bp items if selected}
* **Service-learning program:** program where students learn in a classroom-type setting and apply what they’ve learned by providing meaningful service to their community {Display SP\_sl items if selected}
* **Work-based learning program:** program that provides students with a continuum of career-related experiences that support their career goals and prepares them for education and employment beyond school {Display SP\_wb items if selected}
* **Summer internship program:** program where students are connected to businesses or non-profit organizations and gain real-world work experiences {Display SP\_int items if selected}
* **Other** summer programs, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We did **not offer** any summer programs during summer 2023

**SP\_acad**. To the best of your knowledge, what percentage of your student body participated in academically focused summer program(s) offered by your school during summer 2023? {Display if SP\_gate = summer school OR L&E programs OR bridge programs OR other programs}

*Academically focused summer programs include summer school, learning and enrichment programs, bridge programs, or other summer programs. If a student participated in more than one of these programs, only count them once.*

\_\_\_\_\_\_\_\_ %

* Don’t know

*The following questions are about your school’s summer school offered during summer 2023:*

**SP\_ss1**. To the best of your knowledge, what percentage of your student body participated in **summer school** during summer 2023?

\_\_\_\_\_\_\_\_\_\_%

* Don’t know

**SP\_ss2**. During a typical week, approximately how many days per week did your school offer **summer school** during summer 2023?

* 1 day per week
* 2 days per week
* 3 days per week
* 4 days per week
* 5 days per week
* More than 5 days per week
* Don’t know

**SP\_ss3**. During a typical day, how many hours per day did **summer school** run?

\_\_\_\_\_\_\_\_ hours

* Don’t know

**SP\_s4**. Approximately how many weeks did your school offer **summer school** during summer 2023?

\_\_\_\_\_\_\_\_ weeks

* Don’t know

**SP\_ss5**. Which of the following best describes your school’s ability to provide **summer school** to those who needed it?

* We were able to provide summer school to ALL students who needed it
* We were able to provide summer school to MOST students who needed it
* We were able to provide summer school to SOME students who needed it
* We were able to provide summer school to ONLY A FEW students who needed it
* Don’t know

**SP\_ss6**. Did you partner, or have a contract, with any of the following types of organizations or groups to run your school’s **summer school program**? *Select all that apply.*

* Other local K-12 schools
* Local colleges or universities
* Local libraries
* Academically focused groups (e.g., local museums, tutoring programs)
* Community businesses
* Community non-profit organizations
* Community health organizations
* City departments or agencies (e.g., parks department, mayor’s office, youth agencies, etc.)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**SP\_ss7**. Which of the following personnel worked in your school’s **summer school program** during summer 2022? *Select all that apply.*

* Full-time teachers from your school
* Part-time teachers from your school
* Administrative staff from your school
* Tutors from your school
* Intervention specialists from your school
* Dedicated staff whose only job at your school is to work in your school’s summer school program
* Staff from an outside organization you partner or contract with {Display if *SP\_ss6* ≠ “None of the above” or “Don’t Know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SP\_ss8**. What sources of funding were used to support your school’s **summer school program** during summer 2022? *Select all that apply.*

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Federal grants or programs
* State grants or programs
* Local grants or programs
* District or school financial funding
* Philanthropic support
* Partnerships or sponsorships with other organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**SP\_ss9**. Which of the following best describes your school’s use of COVID-relief funds for your **summer school program** during summer 2022? {Display if SP\_ss8 = “COVID relief funds” OR “ARP ESSER”}

* This was a new program funded by COVID-relief funds
* This program was expanded or enhanced with funding from COVID-relief funds
* Don’t know

**SP\_ss10.** What was the cost, per student, to run your school’s **summer school program**?

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

**SP\_ss11a**. Did families have to pay a fee for their child(ren) to participate in your school’s **summer school program**?

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

* Yes
* No
* Don’t know

**SP\_ss11b**. How much did it cost, per student, for a family to send a child to your school’s **summer school program** during summer 2022? {Display if *SP\_ss11a* = Yes}

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

*If families could pay different fees based on certain factors (e.g., free- and reduced-price meal eligibility), report the highest cost a family could pay.*

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

*The following questions are about your school’s summer learning and enrichment program(s) offered during summer 2023:*

**SP\_le1**. To the best of your knowledge, what percentage of your student body participated in your school’s **summer learning and enrichment program(s)** during summer 2023?

\_\_\_\_\_\_\_\_\_\_%

* Don’t know

**SP\_le2**. During a typical week, approximately how many days per week did your school offer **summer learning and enrichment program(s)** during summer 2023?

* 1 day per week
* 2 days per week
* 3 days per week
* 4 days per week
* 5 days per week
* More than 5 days per week
* Don’t know

**SP\_le3**. During a typical day, how many hours per day did your school’s **summer learning and enrichment program(s)** run?

\_\_\_\_\_\_\_\_ hours

* Don’t know

**SP\_le4**. Approximately how many weeks did your school offer **summer learning and enrichment program(s)** during summer 2023?

\_\_\_\_\_\_\_\_ weeks

* Don’t know

**SP\_le5**. Which of the following best describes your school’s ability to provide its **summer learning and enrichment program(s)** to those who wanted to participate?

* We were able to provide our summer learning and enrichment program(s) to ALL students who wanted to participate
* We were able to provide our summer learning and enrichment program(s) to MOST students who wanted to participate
* We were able to provide our summer learning and enrichment program(s) to SOME students who wanted to participate
* We were able to provide our summer learning and enrichment program(s) to ONLY A FEW students who wanted to participate
* Don’t Know

**SP\_le6**. Did you partner, or have a contract, with any of the following types of organizations or groups to run your school’s **summer learning and enrichment program(s)**? *Select all that apply.*

* Other local K-12 schools
* Local colleges or universities
* Local libraries
* Academically focused groups (e.g., local museums, tutoring programs)
* Community businesses
* Community non-profit organizations
* Community health organizations
* City departments or agencies (e.g., parks department, mayor’s office, youth agencies, etc.)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**SP\_le7**. Which of the following personnel worked in your school’s **summer learning and enrichment program(s)** during summer 2022? *Select all that apply.*

* Full-time teachers from your school
* Part-time teachers from your school
* Administrative staff from your school
* Tutors from your school
* Intervention specialists from your school
* Dedicated staff whose only job at your school is to work in your school’s summer learning and enrichment program(s)
* Staff from an outside organization you partner or contract with {Display if *SP\_le6* ≠ “None of the above” or “Don’t Know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SP\_le8**. What sources of funding were used to support your school’s **summer learning and enrichment program(s)** summer 2022? *Select all that apply.*

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Federal grants or programs
* State grants or programs
* Local grants or programs
* District or school financial funding
* Philanthropic support
* Partnerships or sponsorships with other organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the above

**SP\_le9**. Which of the following best describes your school’s use of COVID-relief funds for your school’s **summer learning and enrichment program(s)** summer 2022? {Display if SP\_le8 = “COVID relief funds” OR “ARP ESSER”}

* This was a new program funded by COVID-relief funds
* This program was expanded or enhanced with funding from COVID-relief funds
* Don’t know

**SP\_le10.** What was the cost, per student, to run your school’s **summer learning and enrichment program(s)**?

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

**SP\_le11a**. Did families have to pay a fee for their child(ren) to participate in your school’s **summer learning and enrichment program(s)**?

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

* Yes
* No
* Don’t know

**SP\_le11b**. How much did it cost, per student, for a family to send a child to your school’s **summer learning and enrichment program(s)** during summer 2022? {Display if *SP\_le11a* = Yes}

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

*If families could pay different fees based on certain factors (e.g., free- and reduced-price meal eligibility), report the highest cost a family could pay.*

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

*The following questions are about your school’s summer recreation programs offered during summer 2023:*

**SP\_r1**. To the best of your knowledge, what percentage of your student body participated in **summer recreation program(s)** during summer 2023?

\_\_\_\_\_\_\_\_\_\_%

* Don’t know

**SP\_r2**. During a typical week, approximately how many days per week did your school offer its **summer recreation program(s)** during summer 2023?

* 1 day per week
* 2 days per week
* 3 days per week
* 4 days per week
* 5 days per week
* More than 5 days per week
* Don’t know

**SP\_r3**. During a typical day, how many hours per day did **summer recreation program(s)** run?

\_\_\_\_\_\_\_\_ hours

* Don’t know

**SP\_r4**. Approximately how many weeks did your school offer **summer recreation program(s)** during summer 2023?

\_\_\_\_\_\_\_\_ weeks

* Don’t know

**SP\_r5**. Which of the following best describes your school’s ability to provide its **summer recreation program(s)** to those who wanted to participate?

* We were able to provide our summer recreation program(s) to ALL students who wanted to participate
* We were able to provide our summer recreation program(s) to MOST students who wanted to participate
* We were able to provide our summer recreation program(s) to SOME students who wanted to participate
* We were able to provide our summer recreation program(s) to ONLY A FEW students who wanted to participate
* Don’t Know

**SP\_r6**. Did you partner, or have a contract, with any of the following types of organizations or groups to run your school’s **summer recreation program(s)**? *Select all that apply.*

* Other local K-12 schools
* Local colleges or universities
* Local libraries
* Academically focused groups (e.g., local museums, tutoring programs)
* Community businesses
* Community non-profit organizations
* Community health organizations
* City departments or agencies (e.g., parks department, mayor’s office, youth agencies, etc.)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**SP\_r7**. Which of the following personnel worked in your school’s **summer recreation program(s)** during summer 2022? *Select all that apply.*

* Full-time teachers from your school
* Part-time teachers from your school
* Administrative staff from your school
* Tutors from your school
* Intervention specialists from your school
* Dedicated staff whose only job at your school is to work in your school’s summer recreation program(s)
* Staff from an outside organization you partner or contract with {Display if *SP\_r6* ≠ “None of the above” or “Don’t Know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SP\_r8**. What sources of funding were used to support your school’s **summer recreation program(s)** summer 2022? *Select all that apply.*

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Federal grants or programs
* State grants or programs
* Local grants or programs
* District or school financial funding
* Philanthropic support
* Partnerships or sponsorships with other organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the above

**SP\_r9**. Which of the following best describes your school’s use of COVID-relief funds for your school’s **summer recreation program(s)** summer 2022? {Display if SP\_r8 = “COVID relief funds” OR “ARP ESSER”}

* This was a new program funded by COVID-relief funds
* This program was expanded or enhanced with funding from COVID-relief funds
* Don’t know

**SP\_r10.** What was the cost, per student, to run your school’s **summer recreation program(s)**?

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

**SP\_r11a**. Did families have to pay a fee for their child(ren) to participate in your school’s **summer recreation program(s)**?

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

* Yes
* No
* Don’t know

**SP\_r11b**. How much did it cost, per student, for a family to send a child to your school’s **summer recreation program(s)** during summer 2022? {Display if *SP\_r11a* = Yes}

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

*If families could pay different fees based on certain factors (e.g., free- and reduced-price meal eligibility), report the highest cost a family could pay.*

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

*The following questions are about your school’s summer bridge program(s) during summer 2023:*

**SP\_bp1**. To the best of your knowledge, what percentage of your student body participated in your school’s **summer bridge program(s)** during summer 2023?

\_\_\_\_\_\_\_\_\_\_%

* Don’t know

**SP\_bp2**. During a typical week, approximately how many days per week did your school offer **summer bridge program(s)** during summer 2023?

* 1 day per week
* 2 days per week
* 3 days per week
* 4 days per week
* 5 days per week
* More than 5 days per week
* Don’t know

**SP\_bp3.** During a typical day, how many hours per day did your school’s **summer bridge program(s)** run?

\_\_\_\_\_\_\_\_ hours

* Don’t know

**SP\_bp4**. Approximately how many weeks did your school offer **summer bridge program(s)** during summer 2023?

\_\_\_\_\_\_\_\_ weeks

* Don’t know

**SP\_bp5**. Which of the following best describes your school’s ability to provide its **summer bridge program(s)** to those who wanted to participate?

* We were able to provide our summer learning and enrichment program(s) to ALL students who wanted to participate
* We were able to provide our summer learning and enrichment program(s) to MOST students who wanted to participate
* We were able to provide our summer learning and enrichment program(s) to SOME students who wanted to participate
* We were able to provide our summer learning and enrichment program(s) to ONLY A FEW students who wanted to participate
* Don’t Know

**SP\_bp6**. Did you partner, or have a contract, with any of the following types of organizations or groups to run your school’s **summer bridge program(s)**? *Select all that apply.*

* Other local K-12 schools
* Local colleges or universities
* Local libraries
* Academically focused groups (e.g., local museums, tutoring programs)
* Community businesses
* Community non-profit organizations
* Community health organizations
* City departments or agencies (e.g., parks department, mayor’s office, youth agencies, etc.)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**SP\_bp7**. Which of the following personnel worked in your school’s **summer bridge program(s)** during summer 2022? *Select all that apply.*

* Full-time teachers from your school
* Part-time teachers from your school
* Administrative staff from your school
* Tutors from your school
* Intervention specialists from your school
* Dedicated staff whose only job at your school is to work in your school’s summer bridge program
* Staff from an outside organization you partner or contract with {Display if *SP\_bp6* ≠ “None of the above” or “Don’t Know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SP\_bp8**. What sources of funding were used to support your school’s **summer bridge program(s)** summer 2022? *Select all that apply.*

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Federal grants or programs
* State grants or programs
* Local grants or programs
* District or school financial funding
* Philanthropic support
* Partnerships or sponsorships with other organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the above

**SP\_bp9**. Which of the following best describes your school’s use of COVID-relief funds for your school’s **summer bridge program(s)** summer 2022? {Display if SP\_bp8 = “COVID relief funds” OR “ARP ESSER”}

* This was a new program funded by COVID-relief funds
* This program was expanded or enhanced with funding from COVID-relief funds
* Don’t know

**SP\_bp10.** What was the cost, per student, to run your school’s **summer bridge program(s)**?

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

**SP\_bp11a**. Did families have to pay a fee for their child(ren) to participate in your school’s **summer bridge program(s)**?

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

* Yes
* No
* Don’t know

**SP\_bp11b**. How much did it cost, per student, for a family to send a child to your school’s **summer bridge program(s)** during summer 2022? {Display if *SP\_bp11a* = Yes}

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

*If families could pay different fees based on certain factors (e.g., free- and reduced-price meal eligibility), report the highest cost a family could pay.*

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

*The following questions are about your school’s service-learning program(s) offered during summer 2023:*

**SP\_sl1**. To the best of your knowledge, what percentage of your student body participated in your school’s **service-learning program(s)** during summer 2023?

\_\_\_\_\_\_\_\_\_\_%

* Don’t know

**SP\_sl2**. Which of the following best describes your school’s ability to provide its **summer service-learning program(s)** to those who wanted to participate?

* We were able to provide our summer service-learning program(s) to ALL students who wanted to participate
* We were able to provide our summer service-learning program(s) to MOST students who wanted to participate
* We were able to provide our summer service-learning program(s) to SOME students who wanted to participate
* We were able to provide our summer service-learning program(s) to ONLY A FEW students who wanted to participate
* Don’t Know

**SP\_sl3**. Did you partner, or have a contract, with any of the following types of organizations or groups to run your school’s **summer service-learning program(s)**? *Select all that apply.*

* Other local K-12 schools
* Local colleges or universities
* Local libraries
* Academically focused groups (e.g., local museums, tutoring programs)
* Community businesses
* Community non-profit organizations
* Community health organizations
* City departments or agencies (e.g., parks department, mayor’s office, youth agencies, etc.)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**SP\_sl4.** What was the cost, per student, to run your school’s **summer service-learning program(s)**?

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

**SP\_sl5a**. Did families have to pay a fee for their child(ren) to participate in your school’s **summer service-learning program(s)**?

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

* Yes
* No
* Don’t know

**SP\_sl5b**. How much did it cost, per student, for a family to send a child to your school’s **summer service-learning program(s)** during summer 2022? {Display if *SP\_sl5a* = Yes}

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

*If families could pay different fees based on certain factors (e.g., free- and reduced-price meal eligibility), report the highest cost a family could pay.*

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

*The following questions are about your school’s work-based learning program(s) offered during summer 2023:*

**SP\_wb1**. To the best of your knowledge, what percentage of your student body participated in your school’s **work-based learning program(s)** during summer 2023?

\_\_\_\_\_\_\_\_\_\_%

* Don’t know

**SP\_wb2**. Which of the following best describes your school’s ability to provide its **summer work-based learning program(s)** to those who wanted to participate?

* We were able to provide our summer work-based learning program(s) to ALL students who wanted to participate
* We were able to provide our summer work-based learning program(s) to MOST students who wanted to participate
* We were able to provide our summer work-based learning program(s) to SOME students who wanted to participate
* We were able to provide our summer work-based learning program(s) to ONLY A FEW students who wanted to participate
* Don’t Know

**SP\_wb3**. Did you partner, or have a contract, with any of the following types of organizations or groups to run your school’s **summer work-based learning program(s)**? *Select all that apply.*

* Other local K-12 schools
* Local colleges or universities
* Local libraries
* Academically focused groups (e.g., local museums, tutoring programs)
* Community businesses
* Community non-profit organizations
* Community health organizations
* City departments or agencies (e.g., parks department, mayor’s office, youth agencies, etc.)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**SP\_wb4.** What was the cost, per student, to run your school’s **summer work-based program(s)**?

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

**SP\_wb5a**. Did families have to pay a fee for their child(ren) to participate in your school’s **summer work-based learning program(s)**?

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

* Yes
* No
* Don’t know

**SP\_wb5b**. How much did it cost, per student, for a family to send a child to your school’s **summer work-based learning program(s)** during summer 2022? {Display if *SP\_wbl5a* = Yes}

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

*If families could pay different fees based on certain factors (e.g., free- and reduced-price meal eligibility), report the highest cost a family could pay.*

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

*The following questions are about your school’s summer internship program(s) offered during summer 2023:*

**SP\_int1**. To the best of your knowledge, what percentage of your student body participated in your school’s **summer internship program(s)** during summer 2023?

\_\_\_\_\_\_\_\_\_\_%

* Don’t know

**SP\_int2**. Which of the following best describes your school’s ability to provide its **summer internship program(s)** to those who wanted to participate?

* We were able to provide our summer internship program(s) to ALL students who wanted to participate
* We were able to provide our summer internship program(s) to MOST students who wanted to participate
* We were able to provide our summer internship program(s) to SOME students who wanted to participate
* We were able to provide our summer internship program(s) to ONLY A FEW students who wanted to participate
* Don’t Know

**SP\_int3**. Did you partner, or have a contract, with any of the following types of organizations or groups to run your school’s **summer internship program(s)**? *Select all that apply.*

* Other local K-12 schools
* Local colleges or universities
* Local libraries
* Academically focused groups (e.g., local museums, tutoring programs)
* Community businesses
* Community non-profit organizations
* Community health organizations
* City departments or agencies (e.g., parks department, mayor’s office, youth agencies, etc.)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**SP\_int4.** What was the cost, per student, to run your school’s **summer internship program(s)**?

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

**SP\_int5a**. Did families have to pay a fee for their child(ren) to participate in your school’s **summer internship program(s)**?

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

* Yes
* No
* Don’t know

**SP\_int5b**. How much did it cost, per student, for a family to send a child to your school’s **summer internship program(s)** during summer 2022? {Display if *SP\_intl5a* = Yes}

*Please only consider money paid directly for participation; do NOT include associated costs with participating in this program, such as program add-ons, transportation costs, or purchasing materials necessary for participation.*

*If families could pay different fees based on certain factors (e.g., free- and reduced-price meal eligibility), report the highest cost a family could pay.*

$\_\_\_\_\_\_\_\_\_\_ per student

* Don’t know

**SP\_more**. We’d like to learn more about your school’s experiences **operating summer programs** during the summer 2023. In the space below please share any other information you would like us to know on this topic.

*This item is optional*.

# Supply Chain Issues (School-Level | Previously Approved)

**SC1a**. For which categories of items, if any, has your school experienced procurement challenges that appear to be the result of supply chain disruptions? *Select all that apply.*

* Food services
* Laptops and other electronic devices
* Books
* Paper, pens, markers, and other school supplies
* Office equipment and other appliances
* Cleaning products
* Furniture
* Automotive equipment
* Athletic gear and apparel
* We have no procurement issues that appear to be the result of supply chain disruptions

**SC1b**. To what extent, if any, have these procurement challenges negatively impacted your school operations?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| {Display based on responses to SC1a} | No negative impact | Limited negative impact | Moderate negative impact | Severe negative impact | Don’t Know |
| Food services |  |  |  |  |  |
| Laptops and other electronic devices |  |  |  |  |  |
| Books |  |  |  |  |  |
| Paper, pens, markers, and other school supplies |  |  |  |  |  |
| Office equipment and other appliances |  |  |  |  |  |
| Cleaning products |  |  |  |  |  |
| Furniture |  |  |  |  |  |
| Automotive equipment |  |  |  |  |  |
| Athletic gear and apparel |  |  |  |  |  |

**SC2**. Which of the following, if any, have you experienced as a result of supply chain disruptions? *Select all that apply.*

* Had to reduce options available to students/staff (e.g., fewer menu items)
* Needed to identify alternate vendors for the same product(s)
* Purchased alternative product(s) (e.g., different brands) than originally intended
* Purchased lower volume than originally intended
* Needed to cancel order(s) altogether
* Temporarily operated without adequate equipment (e.g., insufficient laptops for all students)
* Had to cancel extracurricular activities
* Had to cancel classes
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_
* None of the above

**SC3**. We’d like to learn more about what schools are experiencing while continuing to respond to the challenges of the COVID-19 pandemic. In the space below, please share any other information you would like us to know about how you are **dealing with supply chain issues.**

*This item is optional.*

# Transportation (School-Level | New)

**Transp#**. To the best of your knowledge, on a typical school day, what percentage of your students travel to and from school using the following modes of transportation?

*If a student takes multiple modes of transportation during their commute, count only the mode of transportation they spend the most the time when estimating percentages. For example, if a student rides the subway for 25 minutes and then walks the last 5 minutes to get to school, count them in the “By public transportation” estimate.*

*Percentages should add up to 100%*

|  |  |  |  |
| --- | --- | --- | --- |
|  | Percentage of students | This transportation option is not available for our students | Don’t know |
| By school bus |  |  |  |
| By public transportation (e.g., subway, metro, city bus) |  |  |  |
| By bike, scooter, or other similar micromobility means |  |  |  |
| By walking to school |  |  |  |
| By being dropped off/picked up by car |  |  |  |
| By driving their own car |  |  |  |
| Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |

**Transp#**. Are there sidewalks on the streets immediately surrounding your school?

* Yes, on all streets.
* Yes, on some streets
* No
* Don’t know

**Transp#**. Are there school zones in the area immediately surrounding your school?

* Yes
* No
* Don’t know

**Transp#**. Are there traffic-calming measures (e.g., speed bumps, speed tables) on the streets immediately surrounding your school?

* Yes, on all streets
* Yes, on some streets
* No
* Don’t know

**Transp#**. Are there bike lanes on the streets immediately surrounding your school?

* Yes, on all streets
* Yes, on some streets
* No
* Don’t know

**Transp#**. Is bicycle parking (e.g., bike racks) available on your school grounds?

* Yes
* No
* Don’t know

**Transp#a**. Is the bicycle parking at your school adequate to accommodate the number of people who bike to your school? {Display if *bike parking item* = Yes}

* Yes
* No
* Don’t know

**Transp#b.** Which of the following types of bicycle parking are available at your school? *Select all that apply.* {Display if *bike parking item* = Yes}

* Bicycle racks that are mounted into the ground
* Bicycle racks that are mounted into the wall
* Bicycle lockers
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**Transp#.** Is there a crossing guard(s) working on the streets immediately surrounding your school?

* Yes
* No
* Don’t know

**Transp#.** When is there a crossing guard(s) available to assist students? {Display if *crossing guard item* = Yes}

* Every day before school
* Every day after school
* Every day before AND after school
* Some days before school
* Some days after school
* Some days before AND after school
* Other, please specify: \_\_\_\_\_\_\_\_\_
* Don’t know

**Transp#.** To the best your knowledge, what percentage of your school’s students live within one mile of the school building?

\_\_\_\_\_\_\_\_\_percent of students

* Don’t know

**Transp#.** Which of the following reasons, if any, have PARENTS/GUARDIANS reported as barriers to their children walking, biking, or using other micromobility means to commute school? *Select all that apply*

* Lack of safety measures (e.g., sidewalks, crossing guards) on the commute to school
* Distance from home to school
* Traffic conditions on the commute
* Weather
* Crime around school
* Child age
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**Transp#.** To what extent do you agree or disagree with the following statement: “Traffic patterns around my school pose a threat to my student’s physical safety.”

* Strongly agree
* Moderately agree
* Neither agree nor disagree
* Moderately disagree
* Strongly disagree
* Don’t know

**Transp#.** To what extent do you agree or disagree with the following statement: “Crime around my school poses a threat to my student’s physical safety.”

* Strongly agree
* Moderately agree
* Neither agree nor disagree
* Moderately disagree
* Strongly disagree
* Don’t know

# Tutoring (School-Level | Previously Approved + New)

**Tutoring\_gate**. During this school year, which of the following types of tutoring, if any, are students at your school provided? *Select all that apply.*

* **High-dosage tutoring** (also known as evidence-based or high-quality tutoring): A method of tutoring in which the same student(s) receive(s) tutoring
  + three or more times per week
  + for at least 30 minutes per session,
  + in sessions that are one-on-one or with small groups,
  + that is provided by educators or well-trained tutors who have received specific training in tutoring practices, AND
  + that aligns with evidence-based core curriculum or programs {display HDT items if selected}
* **Standard tutoring:** A less intensive method of tutoring in which in which the same student(s) receive(s) tutoring
  + any number of times per week OR on an as-needed (drop-in) basis
  + in sessions with no minimum length of time
  + in sessions that may be one-on-one or involve any number of other students, and
  + that is provided by educators who may or may not have received specific training in tutoring practices {display SDT items if selected}
* **Self-paced tutoring**: A method of tutoring in which a student work on their own, typically online, where they are provided guided instruction that allows them to move onto new material after displaying mastery of content. {display SPT items if selected}
* **On-demand online tutoring:** A method of tutoring in which a school partners with or contracts out services to an external online tutoring program or company that offers 24/7 support, is led by qualified tutors (e.g., certified teachers, subject-matter experts), and is available on-demand for students to access. {display ODT items if selected}
* **Other method(s) of tutoring**, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* No tutoring is provided to students by our school

*The following items ask about* ***high-dosage*** *tutoring at your school during the 2023-24 school year*

**HDT1**. Who administers **high-dosage** tutoring at your school? *Select all that apply.*

* Tutors whose primary or only role is to provide tutoring
* Teachers who have received training or professional development in tutoring
* Teacher’s/classroom aides who have received training or professional development in tutoring
* Teachers who have NOT received training or professional development in tutoring
* Teacher’s/classroom aides who have NOT received training or professional development in tutoring
* Subject-area specialists (e.g., reading or math specialists)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**HDT2**. As of today, what percentage of students at your school have received **high-dosage** tutoring during the 2022-23 school year?

\_\_\_\_\_\_\_\_\_% of students

* Don’t know

**HDT13a**. Are any students **required** to participate in your school’s **high-dosage** tutoring program?

* Yes
* No
* Don’t Know

**HDT13b**. For which of the following reasons are students **required** to participate in your school’s **high-dosage** tutoring program? *Select all that apply.* {Display if HDT13a = YES}

* Results from diagnostic or other assessment results
* Referral from teacher or staff
* Request from parent or caregiver
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**HDT3.** To the best of your knowledge, how does the percentage of students who receive **high-dosage** tutoring compare to last school year (2022-23)?

* More students are receiving high-dosage tutoring
* Fewer students are receiving high-dosage tutoring
* About the same percentage of students are receiving high-dosage tutoring
* No students participated in high-dosage tutoring in the 2022-23 school year
* Don’t Know

**HDT4a.** To the best of your knowledge, have any of the following subgroups of students received **high-dosage** tutoring more than others during the 2023-24 school year? *Select all that apply.*

* Students from particular racial/ethnic backgrounds (indicate in next item)
* English Learner (EL) or English as a Second Language (ESL) students
* Students with Individualized Education Programs (IEPs) or 504 plans
* Economically disadvantaged students (such as those that qualify for free or reduced-price lunch)
* Students experiencing homelessness
* Migrant students
* Students who are not receiving full-time in-person instruction
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* No subgroups have received more high-dosage tutoring than others
* Don’t Know

**HDT4b.** Which of the following racial/ethnic student groups have received **high-dosage** tutoring more than others? *Select all that apply.* {Display if HDT4a = “…particular racial/ethnic backgrounds”}

* American Indian or Alaska Native
* Asian
* Black or African American
* Hispanic/Latino
* Native Hawaiian or Other Pacific Islander
* Two or more races
* White

**HDT12**. Does your school use its student information system (or equivalent) to track students’ participation in **high-dosage** tutoring?

* Yes
* No
* Don’t Know

**HDT5**. When do students at your school receive **high-dosage** tutoring? *Select all that apply*.

* Before school
* After school
* During regular instruction periods **through pull-out services**
* During regular instruction periods **in the classroom**
* During “free periods” for students (e.g., portions of the day students do not have class, lunch/recess)
* Outside of the regular school week (e.g., Saturdays or Sundays)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**HDT6**. For students who receive **high-dosage** tutoring, approximately how many days per week do they receive this type of tutoring?

* 1 day per week
* 2 days per week
* 3 days per week
* 4 days per week
* 5 days per week
* More than 5 days
* Don’t Know

**HDT7**. For students who receive **high-dosage** tutoring, approximately how long does the typical tutoring session last?

* Less than 30 minutes
* 30 to 45 minutes
* 46 minutes to 1 hour
* More than 1 hour
* Don’t Know

**HDT8.** In which of the following subject areas do students in your school receive **high-dosage** tutoring?

* Mathematics
* English/Language Arts (including Reading)
* Sciences (e.g., general science, biology, chemistry)
* Computer Science
* Social Studies/History
* Foreign Language(s)

**HDT9.** To what extent do you agree with the following statement: “My school is able to effectively provide **high-dosage** tutoring to all students in need.”

* Strongly disagree
* Moderately disagree
* Neither agree nor disagree
* Moderately agree
* Strongly agree
* Don’t know

**HDT10.** Which of the following factors, if any, limit your school’s efforts to effectively provide **high-dosage** tutoring to all students in need? *Select all that apply.*

* Cannot find staff to support high-dosage tutoring
* Lack of funding to hire staff to support high-dosage tutoring
* Time limitations (i.e., cannot find enough time to support high-dosage tutoring)
* Space limitations (i.e., do not have the physical space to support high-dosage tutoring)
* Lack of educational materials to support high-dosage tutoring
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We have not experienced any barriers to implementing high-dosage tutoring
* Don’t know

**HDT11**. Which of the following sources of funding have been used to support **high-dosage** tutoring during the 2023-24 school year? *Select all that apply.*

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Other federal grants or programs
* State grants or other state programs
* District or school financial funding
* Philanthropic support
* Partnerships or sponsorships with organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

*The following items ask about* ***standard*** *tutoring at your school during the 2023-24 school year*

**SDT1**. Who administers **standard** tutoring at your school? *Select all that apply.*

* Tutors whose primary or only role is to provide tutoring
* Teachers who have received training or professional development in tutoring
* Teacher’s/classroom aides who have received training or professional development in tutoring
* Teachers who have NOT received training or professional development in tutoring
* Teacher’s/classroom aides who have NOT received training or professional development in tutoring
* Subject-area specialists (e.g., reading or math specialists)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SDT2**. As of today, what percentage of students at your school have received **standard** tutoring during the 2023-24 school year?

\_\_\_\_\_\_\_\_\_% of students

* Don’t know

**SDT13a**. Are any students **required** to participate in your school’s **standard** tutoring program?

* Yes
* No
* Don’t Know

**SDT13b**. For which of the following reasons are students **required** to participate in your school’s **standard** tutoring program? *Select all that apply.* {Display if SDT13a = YES}

* Results from diagnostic or other assessment results
* Referral from teacher or staff
* Request from parent or caregiver
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SDT3.** To the best of your knowledge, how does the percentage of students who receive **standard** tutoring compare to last school year (2022-23)?

* More students are receiving standard tutoring
* Fewer students are receiving standard tutoring
* About the same percentage of students are receiving standard tutoring
* No students participated in standard tutoring in the 2022-23 school year
* Don’t Know

**SDT4a.** To the best of your knowledge, have any of the following subgroups of students received **standard** tutoring more than others during the 2023-24 school year? *Select all that apply.*

* Students from particular racial/ethnic backgrounds (indicate in next item)
* English Learner (EL) or English as a Second Language (ESL) students
* Students with Individualized Education Programs (IEPs) or 504 plans
* Economically disadvantaged students (such as those that qualify for free or reduced-price lunch)
* Students experiencing homelessness
* Migrant students
* Students who are not receiving full-time in-person instruction
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* No subgroups have received more standard tutoring than others
* Don’t Know

**SDT4b.** Which of the following racial/ethnic student groups have received **standard** tutoring more than others? *Select all that apply.* {Display if SDT4a = “…particular racial/ethnic backgrounds”}

* American Indian or Alaska Native
* Asian
* Black or African American
* Hispanic/Latino
* Native Hawaiian or Other Pacific Islander
* Two or more races
* White

**SDT12**. Does your school use its student information system (or equivalent) to track students’ participation in **standard** tutoring?

* Yes
* No
* Don’t Know

**SDT5**. When do students at your school receive **standard** tutoring? *Select all that apply*.

* Before school
* After school
* During regular instruction periods, **through pull-out services**
* During regular instruction periods, **in the classroom**
* During “free periods” for students (e.g., portions of the day students do not have class, lunch/recess)
* Outside of the regular school week (e.g., Saturdays or Sundays)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SDT6**. For students who receive **standard** tutoring, approximately how many days per week do they receive this type of tutoring?

* 1 day per week
* 2 days per week
* 3 days per week
* 4 days per week
* 5 days per week
* More than 5 days
* Don’t Know

**SDT7**. For students who receive **standard** tutoring, approximately how long does the typical tutoring session last?

* Less than 30 minutes
* 30 to 45 minutes
* 46 minutes to 1 hour
* More than 1 hour
* Don’t Know

**SDT8.** In which of the following subject areas do students in your school receive **standard** tutoring?

* Mathematics
* English/Language Arts (including Reading)
* Sciences (e.g., general science, biology, chemistry)
* Computer Science
* Social Studies/History
* Foreign Language(s)

**SDT9.** To what extent do you agree with the following statement: “My school is able to effectively provide **standard** tutoring to all students in need.”

* Strongly disagree
* Moderately disagree
* Neither agree nor disagree
* Moderately agree
* Strongly agree
* Don’t know

**SDT10.** Which of the following factors, if any, limit your school’s efforts to effectively provide **standard** tutoring to all students in need? *Select all that apply.*

* Cannot find staff to support standard tutoring
* Lack of funding to hire staff to support standard tutoring
* Time limitations (i.e., cannot find enough time to support standard tutoring)
* Space limitations (i.e., do not have the physical space to support standard tutoring)
* Lack of educational materials to support standard tutoring
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We have not experienced any barriers to implementing standard tutoring
* Don’t know

**SDT11**. Which of the following sources of funding have been used to support **standard** tutoring during the 2023-24 school year? *Select all that apply.*

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Other federal grants or programs
* State grants or other state programs
* District or school financial funding
* Philanthropic support
* Partnerships or sponsorships with organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

*The following items ask about* ***self-paced*** *tutoring at your school during the 2023-24 school year*

**SPT2**. As of today, what percentage of students at your school have received **self-paced** tutoring during the 2023-24 school year?

\_\_\_\_\_\_\_\_\_% of students

* Don’t know

**SPT13a**. Are any students **required** to participate in your school’s **self-paced** tutoring program?

* Yes
* No
* Don’t Know

**SPT13b**. For which of the following reasons are students **required** to participate in your school’s **self-paced** tutoring program? *Select all that apply.* {Display if SPT13a = YES}

* Results from diagnostic or other assessment results
* Referral from teacher or staff
* Request from parent or caregiver
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SPT3.** To the best of your knowledge, how does the percentage of students who receive **self-paced** tutoring compare to last school year (2022-23)?

* More students are receiving self-paced tutoring
* Fewer students are receiving self-paced tutoring
* About the same percentage of students are receiving self-paced tutoring
* No students participated in self-paced tutoring in the 2022-23 school year
* Don’t Know

**SPT4a.** To the best of your knowledge, have any of the following subgroups of students received **self-paced** tutoring more than others during the 2023-24 school year? *Select all that apply.*

* Students from particular racial/ethnic backgrounds (indicate in next item)
* English Learner (EL) or English as a Second Language (ESL) students
* Students with Individualized Education Programs (IEPs) or 504 plans
* Economically disadvantaged students (such as those that qualify for free or reduced-price lunch)
* Students experiencing homelessness
* Migrant students
* Students who are not receiving full-time in-person instruction
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* No subgroups have received more standard tutoring than others
* Don’t Know

**SPT4b.** Which of the following racial/ethnic student groups have received **self-paced** tutoring more than others? *Select all that apply.* {Display if SPT4a = “…particular racial/ethnic backgrounds”}

* American Indian or Alaska Native
* Asian
* Black or African American
* Hispanic/Latino
* Native Hawaiian or Other Pacific Islander
* Two or more races
* White

**SPT12**. Does your school use its student information system (or equivalent) to track students’ participation in **self-paced** tutoring?

* Yes
* No
* Don’t Know

**SPT5**. When do students at your school receive **self-paced** tutoring? *Select all that apply*.

* Before school
* After school
* During regular instruction periods, **through pull-out services**
* During regular instruction periods, **in the classroom**
* During “free periods” for students (e.g., portions of the day students do not have class, lunch/recess)
* Outside of the regular school week (e.g., Saturdays or Sundays)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SPT6**. For students who receive **self-paced** tutoring, approximately how many days per week do they receive this type of tutoring?

* 1 day per week
* 2 days per week
* 3 days per week
* 4 days per week
* 5 days per week
* More than 5 days
* Don’t Know

**SPT7**. For students who receive **self-paced** tutoring, approximately how long does the typical tutoring session last?

* Less than 30 minutes
* 30 to 45 minutes
* 46 minutes to 1 hour
* More than 1 hour
* Don’t Know

**SPT8.** In which of the following subject areas do students in your school receive **self-paced** tutoring?

* Mathematics
* English/Language Arts (including Reading)
* Sciences (e.g., general science, biology, chemistry)
* Computer Science
* Social Studies/History
* Foreign Language(s)

**SPT9.** To what extent do you agree with the following statement: “My school is able to effectively provide **self-paced** tutoring to all students in need.”

* Strongly disagree
* Moderately disagree
* Neither agree nor disagree
* Moderately agree
* Strongly agree
* Don’t know

**SPT10.** Which of the following factors, if any, limit your school’s efforts to effectively provide **self-paced** tutoring to all students in need? *Select all that apply.*

* Cannot find materials or resources to support self-paced tutoring
* Lack of funding to obtain materials or resources to support self-paced tutoring
* Time limitations (i.e., cannot find enough time to support self-paced tutoring)
* Technology limitations (i.e., do not have the technological capability to support self-paced tutoring)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We have not experienced any barriers to implementing self-paced tutoring
* Don’t know

**SPT11**. Which of the following sources of funding have been used to support **self-paced** tutoring during the 2023-24 school year? *Select all that apply.*

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Other federal grants or programs
* State grants or other state programs
* District or school financial funding
* Partnerships or sponsorships with organizations
* Philanthropic support
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

*The following items ask about* ***on-demand online*** *tutoring at your school during the 2023-24 school year*

**ODT2**. As of today, what percentage of students at your school have accessed **on-demand online** tutoring during the 2023-24 school year?

\_\_\_\_\_\_\_\_\_% of students

* Don’t know

**ODT13a**. Are any students **required** to participate in your **on-demand online** tutoring program(s)?

* Yes
* No
* Don’t Know

**ODT13b**. For which of the following reasons are students **required** to participate in **on-demand online** tutoring program(s)? *Select all that apply.* {Display if OD13a = YES}

* Results from diagnostic or other assessment results
* Referral from teacher or staff
* Request from parent or caregiver
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**ODT3.** To the best of your knowledge, how does the percentage of students who access **on-demand online** tutoring compare to last school year (2022-23)?

* More students are receiving on-demand online tutoring
* Fewer students are receiving on-demand online tutoring
* About the same percentage of students are receiving on-demand online tutoring
* No students accessed on-demand online tutoring in the 2022-23 school year
* Don’t Know

**ODT4a.** To the best of your knowledge, have any of the following subgroups of students accessed **on-demand online** tutoring more than others during the 2023-24 school year? *Select all that apply.*

* Students from particular racial/ethnic backgrounds (indicate in next item)
* English Learner (EL) or English as a Second Language (ESL) students
* Students with Individualized Education Programs (IEPs) or 504 plans
* Economically disadvantaged students (such as those that qualify for free or reduced-price lunch)
* Students experiencing homelessness
* Migrant students
* Students who are not receiving full-time in-person instruction
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* No subgroups have received more standard tutoring than others
* Don’t Know

**ODT4b.** Which of the following racial/ethnic student groups have accessed **on-demand online** tutoring more than others? *Select all that apply.* {Display if ODT4a = “…particular racial/ethnic backgrounds”}

* American Indian or Alaska Native
* Asian
* Black or African American
* Hispanic/Latino
* Native Hawaiian or Other Pacific Islander
* Two or more races
* White

**ODT12**. Does your school use its student information system (or equivalent) to track students’ participation in **on-demand online** tutoring?

* Yes
* No
* Don’t Know

**ODT5**. When do students at your school access **on-demand online** tutoring? *Select all that apply*.

* Before school
* After school
* During regular instruction periods, **through pull-out services**
* During regular instruction periods, **in the classroom**
* During “free periods” for students (e.g., portions of the day students do not have class, lunch/recess)
* Outside of the regular school week (e.g., Saturdays or Sundays)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**ODT6**. For students who access **on-demand online** tutoring, approximately how many days per week do they access this type of tutoring?

* 1 day per week
* 2 days per week
* 3 days per week
* 4 days per week
* 5 days per week
* More than 5 days
* Don’t Know

**ODT7**. For students who access **on-demand online** tutoring, approximately how long does the typical tutoring session last?

* Less than 30 minutes
* 30 to 45 minutes
* 46 minutes to 1 hour
* More than 1 hour
* Don’t Know

**ODT8.** In which of the following subject areas do students in your school utilize **on-demand online** tutoring?

* Mathematics
* English/Language Arts (including Reading)
* Sciences (e.g., general science, biology, chemistry)
* Computer Science
* Social Studies/History
* Foreign Language(s)

**ODT9.** To what extent do you agree with the following statement: “My school is able to effectively provide access to **on-demand online** tutoring to all students in need.”

* Strongly disagree
* Moderately disagree
* Neither agree nor disagree
* Moderately agree
* Strongly agree
* Don’t know

**ODT10.** Which of the following factors, if any, limit your school’s efforts to effectively provide access to **on-demand online** tutoring to all students in need? *Select all that apply.*

* Cannot find materials or resources to support on-demand online tutoring
* Lack of funding to obtain materials or resources to support on-demand online tutoring
* Time limitations (i.e., cannot find enough time to support on-demand online tutoring)
* Technology limitations (i.e., do not have the technological capability to support on-demand online tutoring)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We have not experienced any barriers to providing access to on-demand online tutoring
* Don’t know

**ODT11**. Which of the following sources of funding have been used to support **on-demand online** tutoring during the 2023-24 school year? *Select all that apply.*

* COVID relief funds (ESSER I or ESSER II)
* American Rescue Plan Elementary and Secondary School Emergency Relief funds (ARP ESSER)
* Other federal grants or programs
* State grants or other state programs
* District or school financial funding
* Partnerships or sponsorships with organizations
* Philanthropic support
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**Tutoring2**. Do you provide training or professional development for those who provide the following types of tutoring provided at your school?

|  |  |  |  |
| --- | --- | --- | --- |
| {Display if Tutoring\_gate = “High-Dosage Tutoring” “Standard Tutoring” or “Other methods of tutoring”} | Yes | No | Don’t Know |
| High-dosage tutoring |  |  |  |
| Standard tutoring |  |  |  |
| Other methods of tutoring |  |  |  |

**Tutoring3**. Does your school have plans to evaluate the effectiveness of your tutoring programs on improving student outcomes?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| {Display based on Tutoring\_gate responses} | Yes, we are developing a plan | Yes, we have implemented a plan we developed | No | Don’t Know |
| High-dosage tutoring |  |  |  |  |
| Standard tutoring |  |  |  |  |
| Self-paced tutoring |  |  |  |  |
| On-demand online tutoring |  |  |  |  |
| Other methods of tutoring |  |  |  |  |

**Tutoring4**. How effective has each tutoring program been in improving student outcomes during this school year?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| {Display based on Tutoring\_gate responses} | Not at all effective | Slightly effective | Moderately Effective | Very Effective | Extremely Effective |
| High-dosage tutoring |  |  |  |  |  |
| Standard tutoring |  |  |  |  |  |
| Self-paced tutoring |  |  |  |  |  |
| On-demand online tutoring |  |  |  |  |  |
| Other methods of tutoring |  |  |  |  |  |

**Tutoring6.** What criteria have you utilized to assess the effectiveness of your tutoring programs? *Select all that apply.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| {Display based on Tutoring\_gate responses} | Changes in student report card grades | Changes in student standardized test scores | Teacher evaluations of student learning progress | Parent evaluations of student learning progress | Student evaluations of their own learning progress | Don’t Know | Other | No criteria were used to evaluate the effectiveness of this program |
| High-dosage tutoring |  |  |  |  |  |  |  |  |
| Standard tutoring |  |  |  |  |  |  |  |  |
| Self-paced tutoring |  |  |  |  |  |  |  |  |
| On-demand online tutoring |  |  |  |  |  |  |  |  |
| Other methods of tutoring |  |  |  |  |  |  |  |  |

**Tutoring\_more**. We’d like to learn more about your school’s experiences **offering tutoring programs** during the 2023-24 school year. In the space below please share any other information you would like us to know on this topic.

*This item is optional*.

# World & Dual Language Programs (School-Level | New)

**Lang1**. Which, if any, of the following languages are taught as independent classes at your school?

* American Sign Language (ASL)
* Arabic
* Chinese
* French
* German
* Hindi
* Italian
* Japanese
* Korean
* Latin
* Portuguese
* Russian
* Spanish
* Turkish
* Other, please specify: \_\_\_\_\_\_\_\_\_\_
* None of the above

**Lang2\_v1**. Approximately what percentage of your students are enrolled in these classes?

|  |  |  |
| --- | --- | --- |
| {Display based on answers to Lang1} | Percentage of students enrolled | Don’t Know |
| ASL |  |  |
| Arabic |  |  |
| Chinese |  |  |
| French |  |  |
| German |  |  |
| Hindi |  |  |
| Italian |  |  |
| Japanese |  |  |
| Korean |  |  |
| Latin |  |  |
| Portuguese |  |  |
| Russian |  |  |
| Spanish |  |  |
| Turkish |  |  |

**Lang2\_v2**. Approximately how many students are enrolled in these classes?

|  |  |  |
| --- | --- | --- |
| {Display based on answers to Lang1} | Number of students enrolled | Don’t Know |
| ASL |  |  |
| Arabic |  |  |
| Chinese |  |  |
| French |  |  |
| German |  |  |
| Hindi |  |  |
| Italian |  |  |
| Japanese |  |  |
| Korean |  |  |
| Latin |  |  |
| Portuguese |  |  |
| Russian |  |  |
| Spanish |  |  |
| Turkish |  |  |

**Lang3**. Which of the following best describes how these classes are taught at your school?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| {Display based on answers to Lang1} | Traditional Classroom | Dual language (two-way) immersion | Immersion | Online | Hybrid | Don’t Know |
| ASL |  |  |  |  |  |  |
| Arabic |  |  |  |  |  |  |
| Chinese |  |  |  |  |  |  |
| French |  |  |  |  |  |  |
| German |  |  |  |  |  |  |
| Hindi |  |  |  |  |  |  |
| Italian |  |  |  |  |  |  |
| Japanese |  |  |  |  |  |  |
| Korean |  |  |  |  |  |  |
| Latin |  |  |  |  |  |  |
| Portuguese |  |  |  |  |  |  |
| Russian |  |  |  |  |  |  |
| Spanish |  |  |  |  |  |  |
| Turkish |  |  |  |  |  |  |

**Lang4**. Do you offer these classes in collaboration with any of the following? *Select all that apply.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| {Display based on answers to Lang1} | A local high school | Community college | University campus | Heritage community school | No collaborations for this class | Don’t Know |
| ASL |  |  |  |  |  |  |
| Arabic |  |  |  |  |  |  |
| Chinese |  |  |  |  |  |  |
| French |  |  |  |  |  |  |
| German |  |  |  |  |  |  |
| Hindi |  |  |  |  |  |  |
| Italian |  |  |  |  |  |  |
| Japanese |  |  |  |  |  |  |
| Korean |  |  |  |  |  |  |
| Latin |  |  |  |  |  |  |
| Portuguese |  |  |  |  |  |  |
| Russian |  |  |  |  |  |  |
| Spanish |  |  |  |  |  |  |
| Turkish |  |  |  |  |  |  |

**Dual**#. Which of the following, if any, types of dual language programs does your school offer? *Select all that apply.*

* **Developmental Program** (also known as a maintenance program): dual language program that enrolls primarily students who are native speakers of the partner language
* **Two-way Immersion Program** (also known as a bilingual program): dual language program that enrolls a balance of native English speakers and native speakers of the partner language
* **One-way Immersion Program** (also known as a foreign language program): dual language program that enrolls primarily native English speakers
* **Heritage Language Program**: dual language program that mainly enrolls students who are dominant in English, but whose parents, grandparents, or other ancestors spoke the partner language.
* **None** of the programs listed above are offered at my school {Do not display Dual items if selected}

**Dual#**. What percentage of students at your school are in the dual language program?

\_\_\_\_\_\_\_\_\_ percent of students

* Don’t know

**Dual**#. Do you require that educators in your school’s dual language program are certified to teach in these programs?

* Yes
* No
* Don’t know

**Dual**#. Does your school offer a seal of biliteracy?

* Yes
* No
* Don’t know

**Dual**#. Which of the following partner languages are used in your school’s dual language program(s)?

* American Sign Language (ASL)
* Arabic
* Chinese
* French
* German
* Hindi
* Italian
* Japanese
* Korean
* Latin
* Portuguese
* Russian
* Spanish
* Turkish
* Other, please specify: \_\_\_\_\_\_\_\_\_\_
* None of the above

**Dual**#. Does your school have a shortage of English Learner (EL) or English as a Second Language (ESL) instructors?

* Yes
* No
* Don’t know
* We do not have any EL or ESL students that necessitate an EL/ESL instructor

# August 2021 Items (School-Level | Previously Approved)

**LASTMODE**. As of the last day of the 2020-21 school year, which of the following was offered at your school? *Select all that apply.*

* **Full-time in-person instruction** - *Full-time in-person instruction refers to students learning in the school building every day of the school week full-time. Include students who take remote classes while in the school building.*
* **Full-time remote instruction** - *Remote instruction refers to students using online and/or paper materials to learn only from home or a location other than the school building. Include students who come into the building for testing or services one day a month or less*.
* **A Hybrid of remote and in-person instruction** - *Hybrid remote and in-person instruction refers to students who are in the school building for less than a full school week on a regular basis. These students come into school for some days or classes but stay at home for some days or classes.*

**LASTLOSS**. Over the 2020-21 school year, did your school do any of the following to address concerns about learning loss?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Extend the school year (added days to the end of the school calendar or use scheduled snow days) |  |  |
| Extend the school day |  |  |
| Offer before or after school programs |  |  |
| Require students to attend school on weekends |  |  |
| Cancel or shorten school holidays |  |  |

**VACCINATE**. Did your school ever offer onsite COVID-19 vaccination or have a mobile vaccination unit on school grounds for students who were eligible during the 2020-21 school year?

* Yes
* No
* Don't know
* Not applicable - There are no students 12 years or older in this school

**SUMMERLOSS**. Over the summer of 2021, did your school do any of the following to address pandemic-related learning needs?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Offer summer school |  |  |
| Offer summer camps |  |  |

**TESTING**. Are teachers at your school planning to conduct any diagnostic assessments to students at the beginning of the 2021-22 school year?

* Yes
* No

**TESTINGLOSS**. Will the results of the assessment be used to address pandemic-related learning needs? {Display if TESTING = Yes}

* Yes
* No

**MODE**. As of the first day of the 2021-22 school year, which of the following will be offered at your school? *Select all that apply.*

* **Full-time in-person instruction** - *Full-time in-person instruction refers to students learning in the school building every day of the school week full-time. Include students who take remote classes while in the school building.*
* **Full-time remote instruction** - *Remote instruction refers to students using online and/or paper materials to learn only from home or a location other than the school building. Include students who come into the building for testing or services one day a month or less*.
* **A Hybrid of remote and in-person instruction** - *Hybrid remote and in-person instruction refers to students who are in the school building for less than a full school week on a regular basis. These students come into school for some days or classes but stay at home for some days or classes.*

**DISTANCE**. Estimate what percentage of your students signed up for full-time remote (online) instruction as of the first day of the 2021-22 school year? {Display if MODE = Full-time remote OR Hybrid instruction}

%

**DATES**. Please provide the following dates:

* Start date for students for the 2021-22 school year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* End date for students for the 2021-22 school year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Start date for students for the 2020-21 school year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* End date for students for the 2020-21 school year: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Contact Screener (School-Level | Previously Approved)

Please review the contact information we have for your school and indicate whether the information is correct or needs to be updated for the 2022-23 school year.

**PRINCIPAL INFORMATION – [SCHOOL NAME APPEARS HERE]**

* Principal Name: [current principal name appears here]
* Principal Email: [current principal email appears here]
* Principal information is correct for 2022-23 school year
* Principal information needs to be updated for the 2022-23 school year

**SCHOOL POINT OF CONTACT INFORMATION – [SCHOOL NAME APPEARS HERE]**

If you know you will not be serving in this role at the beginning of the 2022-23 school year, please be sure to update the School Point of Contact information with the name of someone we can communicate with for this survey for the 2022-23 school year monthly collections

* Point of Contact (POC) Name: [current POC name appears here]
* Point of Contact (POC) Position: [current POC position appears here]
* Point of Contact (POC) Email: [current POC email appears here]
* POC information is correct for 2022-23 school year
* POC information needs to be updated for the 2022-23 school year

Please update PRINCIPAL information below:

{Display if “Principal information needs to be updated...” is selected}

* Principal First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Principal Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Principal Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* New Principal information unavailable at this time

Please update POINT OF CONTACT information below:

{Display if “POC information needs to be updated...” is selected}

* POC First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* POC Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* POC School Position Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* POC Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* New POC contact information unavailable at this time

**Address Information**

**SCHOOL ADDRESS INFORMATION**

Each month, in addition to an email invitation, we mail a letter to the school with the School Pulse Panel login information. This letter is sent via Federal Express or United States Postal Service

Please confirm your school’s physical address below:

**Physical Address**

* Street: [current street appears here]
* City: [current city appears here]
* State: [current state appears here]
* ZIP Code: [current ZIP code appears here]
* Information is correct for 2022-23 school year
* Information needs to be updated for the 2022-23 school year

Please confirm your school’s mailing address below:

**Mailing Address**

* Street: [current street appears here]
* City: [current city appears here]
* State: [current state appears here]
* ZIP Code: [current ZIP code appears here]
* Information is correct for 2022-23 school year
* Information needs to be updated for the 2022-23 school year

Please update SCHOOL ADDRESS information below.

**Physical Address** {display if “Information needs to be updated…” is selected}

* Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* ZIP Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mailing Address** {display if “Information needs to be updated…” is selected}

* Street: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* ZIP Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone Number**

**SCHOOL CONTACT PHONE NUMBER**

Please confirm the best school phone number to reach the point of contact during the survey data collection.

* Phone Number: [current phone number appears here]
* Extension: [current extension appears here]
* Phone number is correct for 2022-23 school year
* Phone number needs to be updated for the 2022-23 school year

Please update phone number below: {display if “Phone number needs to be updated…” is selected}

* Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Extension: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Updated phone number/extension unavailable at this time

**Debit Card Information**

**DEBIT CARD/CHECK INFORMATION**

Your school will receive a $400 debit card/check for each completed monthly School Pulse Panel survey. Please confirm the point of contact and mailing address where your debit card/check should be sent

* Debit card/Check Point of Contact: [current name appears here]
* Debit card/Check Address:

[current street appears here] [current office appears here]

[current city appears here]

[current state appears here]

[current ZIP code appears here]

* Information is correct for 2022-23 school year
* Information needs to be updated for the 2022-23 school year

Please update DEBIT CARD/CHECK information below:

* Debit card/Check Point of Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Address 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Address 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* ZIP Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Information unavailable at this time

**Conclusion**

Is there any other information you would like to share with us regarding your school that would be necessary for us to update our records for the 2022-23 school year? *Include instances like a school name change or a merge with another school.*

*This item is optional.*

# Operations Follow-up (School-Level | Previously approved)

*The School Pulse Panel (SPP) was a monthly study conducted by the U.S. Department of Education’s National Center for Education Statistics (NCES) to evaluate the impact of the COVID-19 pandemic on public schools. Our records indicate that you or someone from your school participated in at least one of the monthly collections between January 2022 and December 2022.*

*We are interested in learning about the experiences of those who responded to the School Pulse Panel’s monthly data collection. The person who responds to this survey should be the person who was primarily responsible for responding to the monthly surveys. If you were not the person who was* ***primarily responsible*** *for responding to the monthly surveys, please forward this survey to the appropriate person.*

*After the questions on the follow-up survey, we will ask you to answer questions about when and how your school collects information on the race and ethnicity of your students and teachers. The United States Office of Management and Budget (OMB) has proposed changes to the way information on race and ethnicity is collected by the Federal government. Your responses will be used to help NCES better understand schools' ability to collect such data if changes are implemented.*

**Par2 1-1**. Were any of the following motivating factors for why you responded to a monthly SPP survey? *Select all that apply.*

* The survey seemed to be a reasonable length
* I was interested in the monthly topics
* The reimbursement {Display if SCHFLAG = 1 OR 2}
* I wanted to contribute to educational research
* I wanted to provide data that could inform educational policy decisions
* None of the above

**Par1 1-2**. Why did you participate in one or some monthly collections but not others? *Select all that apply*. {Display if FEEDBACK\_FLAG = 2}

* Time constraints
* I did not receive the communications
* The monthly question topics determined my interest in participating for a given month
* I was tired of participating
* I did not see the benefit to me or my school for participating
* I was advised to stop participating by our district
* I did not receive reimbursement in a timely manner {Display if SCHFLAG = 1 OR 2}
* The monthly reimbursement amount of $400 was not high enough {Display if SCHFLAG = 1 OR 2}
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Each SPP monthly data collection included the following communications:*

*1 physical letter with a URL link to the monthly survey*

*1 initial invitation email with a URL link the monthly survey*

*3 follow-up reminder emails with a URL link to the monthly survey*

*Text

Description automatically generated*

**Com1 2-1**. Did you ever receive a physical letter (pictured above) with the URL link?

* Yes
* No
* Unsure

**Com1a 2-1a**. Did you ever type in the URL link to get to the survey instrument? {Display if Com1 = “Yes”}

* Yes
* No
* Unsure

**Com1b 2-1b**. Which of the following, if any, were reasons you did not type in the URL link to the survey instrument? *Select all that apply.* {Display if Com1a = “No”}.

* URL was too long to type
* I already received the invitation email with the URL link
* Other, please specify: \_\_\_\_\_\_\_\_\_\_

**Com1c 2-1c**. Did receiving the physical letter ever prompt you to check your email for the initial invitation that contained the URL link to the survey instrument? {Display if Com1 = “Yes”}.

* Yes
* No

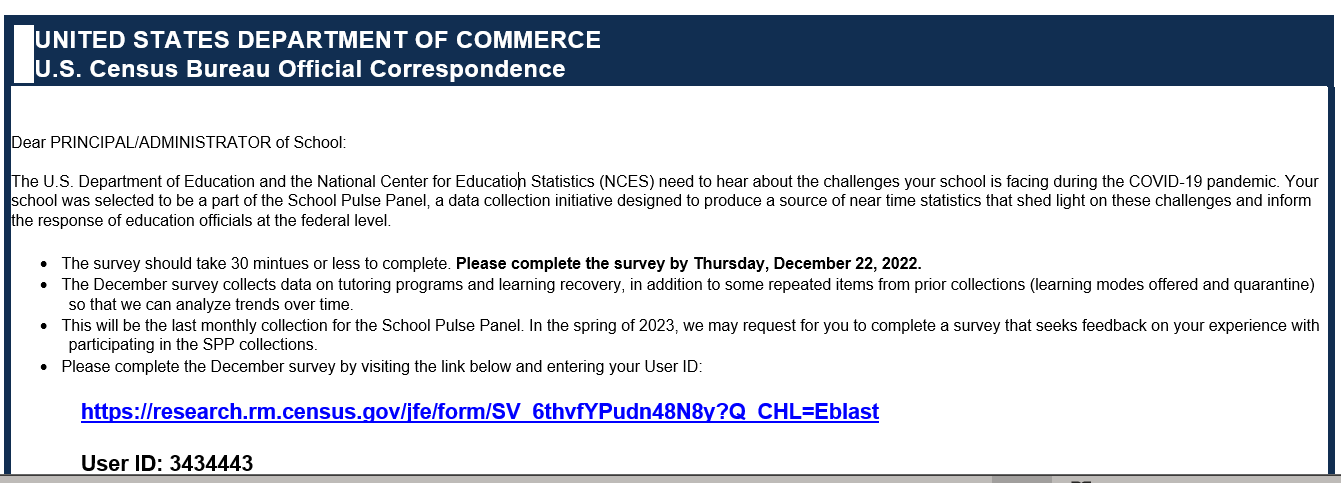
**Com1d 2-1d**. The photo above shows an invitation letter. Did any of the language in the letter motivate you to participate?

* Yes, please specify what language: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* No, please specify why: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**Com1e 2-1e**. For the February monthly survey, your school was sent a tote bag (pictured above) with the physical letter. Did receiving this tote bag impact your participation?

* Yes, it **increased** my willingness to participate
* Yes, it **decreased** my willingness to participate
* No, it did not impact my willingness to participate
* I do not remember our school receiving a tote bag
* Not applicable – my school was not a part of the study at this time



**Com2 2-2**. Did you ever receive an initial invitation email (pictured above) with the URL link to the survey instrument?

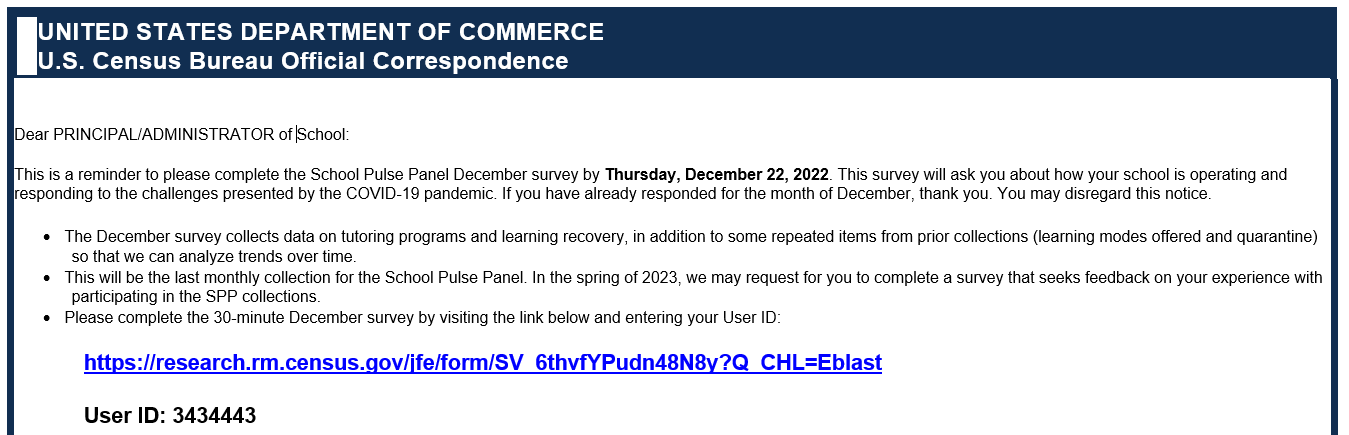
* Yes
* No
* Unsure

**Com2a 2-2a**. Did the initial invitation email ever come directly to your inbox, quarantine, or spam/junk folder? *Select all that apply.* {Display if Com2 = “Yes”}.

* It was sent directly to my inbox
* It was sent to my quarantine folder
* It was sent to my spam/junk folder
* Unsure

**Com2b 2-2b**. Were you able to access the survey instruments by clicking on the URL link in the initial invitation email?

* Yes
* No



**Com3 2-3**. Did you ever receive any of the follow-up reminder emails (pictured above) with a URL link to the survey instrument?

* Yes
* No
* Unsure

**Com3a 2-3a**. Did the follow-up reminder email ever come directly to your inbox, quarantine, or spam/junk folder? *Select all that apply.* {Display if Com3 = “Yes”}

* It was sent directly to my inbox
* It was sent to my quarantine folder
* It was sent to my spam/junk folder
* Unsure

**Com3c 2-3b**. Please share any reasons that made you decide to complete the survey after receiving the follow-up reminder emails, rather than after receiving the initial invitation{Display if Com3 = “Yes”}

**Com4 2-4**. Each month, you could have received up to 5 different communications inviting you to participate in the survey. How do you feel about receiving that number of monthly communications?

* It is too many communications
* It is just the right amount of communications
* It is too few communications

**Sur1 3-1**. Overall, how easy or difficult was it for you to complete an SPP monthly survey?

* Very easy
* Easy
* Neither easy nor difficult
* Difficult
* Very difficult

**Sur1a 3-1a**. What challenges, if any, did you experience completing the monthly surveys? *Select all that apply.*

* Finding time to complete the survey
* Difficulty answering items because data were not readily available
* The two-week collection window was not long enough
* Required coordination with other school or district staff to answer items
* Difficulty finding the communications which contained the URL link to the survey
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* I did not experience any challenges completing monthly surveys

**Sur2 3-2**. In the months that you completed a survey, how often did you complete the survey in one sitting?

* Every time
* Most of the time
* Some of the time
* Never

**Sur3 3-3**. Did you ever preview the survey by going to the U.S. Census Bureau website (https://www.census.gov/programs-surveys/school-pulse-panel.html) to look at items before responding online?

* Yes
* No
* I was unaware that the survey was available to preview on the U.S. Census Bureau website

**Sur4 3-4**. Did you ever download or print out the PDF of your responses at the conclusion of a monthly survey?

* Yes
* No
* I was unaware that I could download or print a PDF of my responses

**Sur5 3-5.** How did you handle questions that were particularly difficult to answer? *Select all that apply.*

* Sought help from other school staff
* Sought help from district staff
* Skipped the question
* Answered the question as best as I could
* I never experienced questions that were particularly difficult or that I was unable to answer

**Sur5a 3-5a**. Please list the job titles of other **school** staff who helped you answer questions {Display if Sur5 = …from school staff”}:

**Sur5b 3-5b**. Please list the job titles of other **district** staff who helped you answer questions {Display if Sur5 = …from district staff”}:

**Sur6 3-6.** To the best of your recollection, how easy or difficult was it to answer questions related to the content areas that were covered during SPP?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Very easy | Easy | Neither easy nor difficult | Difficult | Very difficult | I do not recall answering questions for this topic |
| Absenteeism |  |  |  |  |  |  |
| After-School Programs |  |  |  |  |  |  |
| Challenges for School Staff |  |  |  |  |  |  |
| Community Partnerships |  |  |  |  |  |  |
| COVID-19 Mitigation Strategies |  |  |  |  |  |  |
| Food and Nutrition |  |  |  |  |  |  |
| Learning Modes |  |  |  |  |  |  |
| Learning Recovery |  |  |  |  |  |  |
| Mental Health and Well-Being |  |  |  |  |  |  |
| Parent, Student, and Staff Concerns |  |  |  |  |  |  |
| Quarantine Prevalence |  |  |  |  |  |  |
| Staffing Vacancies |  |  |  |  |  |  |
| Student Behavior |  |  |  |  |  |  |
| Summer Programs |  |  |  |  |  |  |
| Supply Chains |  |  |  |  |  |  |
| Technology |  |  |  |  |  |  |

**Sur6a 3-6a.** You indicated that [PIPE IN TOPICS IDENTIFIED AS “VERY DIFFICULT” IN SUR6] were “Very difficult” to answer. Please tell us a little more about what made answering questions related to this/these topic(s) difficult. {Display based on “Very difficult” responses to Sur6}

**Sur7 3-7**. Beyond topics related to COVID-19 and its associated challenges, are there topics you believe the U.S. Department of Education should be gathering data on frequently (e.g., on a monthly or bi-monthly basis) throughout a school year?

**DC1 4-1**. You were given two weeks to complete each monthly survey. Was this a long enough timeframe to complete the survey?

* Yes
* No

**DC1a 4-1a**. Generally speaking, could you have completed the monthly surveys if you were only given one week to complete them? {Display if DC1 = “Yes”}

* Yes
* No

**DC1b 4-1b**. How much time would have made it easier for you to complete a monthly survey? {Display if DC1 = “No”}

* 3 weeks
* 4 weeks
* More than 4 weeks

**DC2 4-2**. Did you feel the length of the surveys and the time necessary to complete each one was reasonable to do **on a monthly basis**?

* Yes
* No

*For participating in a given monthly data collection, your school should have received a debit card worth $400. Please note that debit cards for participating in the October - December 2022 collections may still be in transit by the time you complete this survey. If you have not received your October - December 2022 debit cards, please do not include that in your response below.*

**RE1 5-1**. Did you receive all debit cards that you should have received based on your monthly participation? {Display if DEBIT = DEBIT CARD}

* Yes
* No
* Unsure

**RE2 5-2**. Did you have any issues using the debit card(s)? {Display if RE1 = “Yes” & DEBIT = DEBIT CARD}

* Yes, please explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* No

**RE2a 5-2a**. What did you do if you had an issue related to receiving and/or using a debit card? *Select all that apply.* {Display if RE1 = “No” **OR** RE2 = “Yes” & DEBIT = DEBIT CARD}

* Contacted the U.S. Census Bureau for help addressing an issue
* Contacted NCES for help addressing an issue
* I did not contact anyone for help addressing an issue
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RE3 5-3**. Would you have participated in this study on a monthly basis if the reimbursement was less than $400?

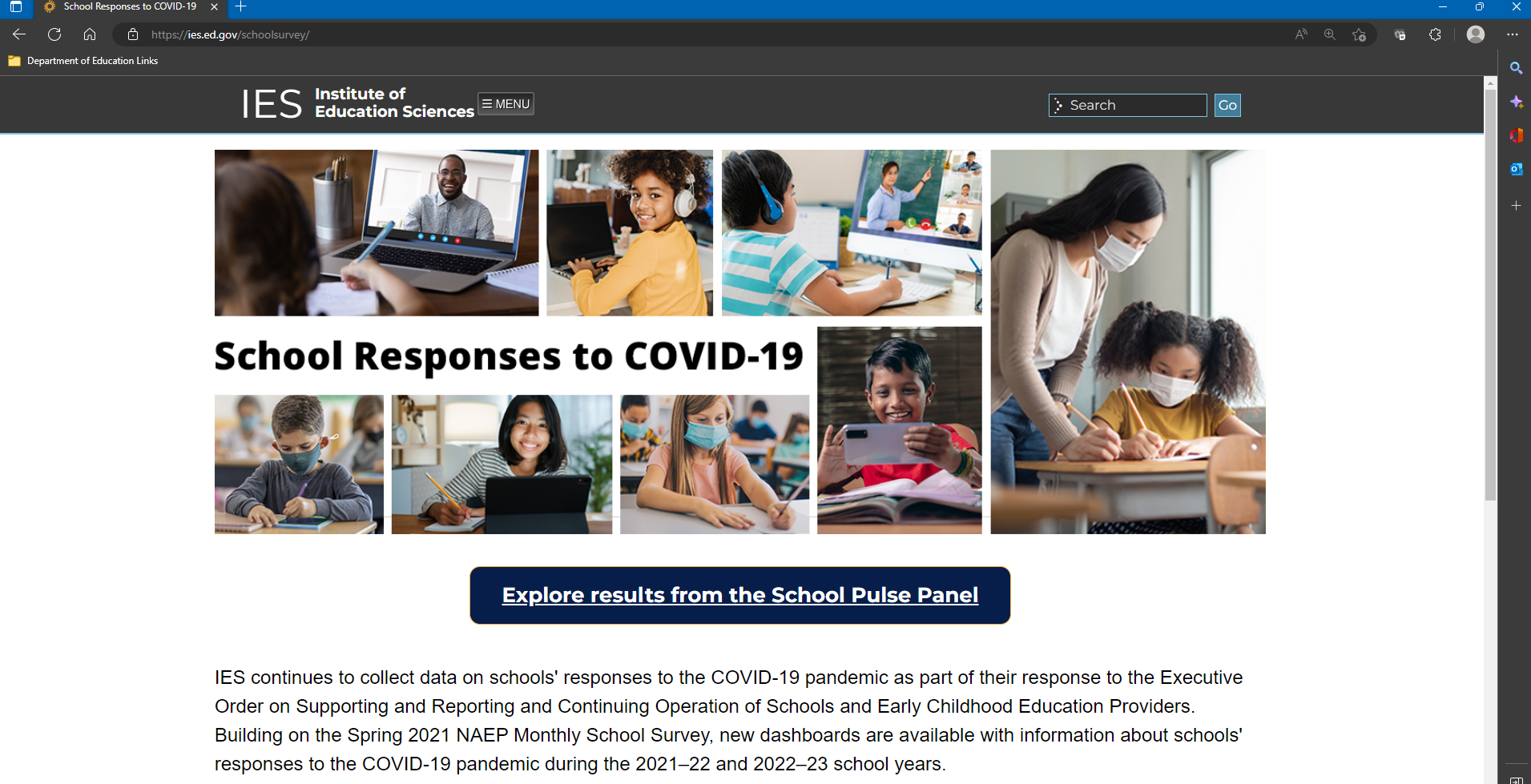
* Yes
* No

**RE3a 5-3a**. Which of the following reimbursement amounts would motivate you to participate in a similar monthly survey? {Display if RE3 = “Yes”}

* $5
* $10
* $20
* $50
* $100
* More than $100 but less than $400

**RE5 5-4**. Besides a monetary reimbursement, are there any other types of incentives that would motivate you to participate in a monthly survey like SPP? If yes, please indicate what other kinds of incentives would be motivating.

* Yes
* No



**FP1 6-1a**. Several weeks after each monthly data collection, findings were posted on the “School Responses to COVID-19” dashboard (<https://ies.ed.gov/schoolsurvey/>). Did you ever access this dashboard to see the findings produced from the data you provided?

* Yes
* No
* I was unaware that findings were published on an online dashboard

**FP1b 6-1b**. Did you ever download the Excel file from the dashboard that contained the full findings produced from a monthly survey? {Display if FP1 = Yes}

* Yes
* No
* I did not know the full results were available to be downloaded

**FP1c 6-1c**. Have you used the findings from this study to do any of the following? *Select all that apply.* {Display if FP1=Yes OR FP1b = Yes}

* To inform policy or other decisions at your school related to the COVID-19 pandemic and its impact
* To compare your school’s response to the COVID-19 pandemic to other schools’ responses across the country
* To help support your school’s or district’s goals or mission
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above

**FP2 6-2**. Have you recognized findings related to this study cited in the news media you consume?

* Yes
* No

**FP3 6-3**. Besides an online dashboard and Excel file, how could NCES better communicate its findings to schools?

**NPar1 1-1**. Which of the following reasons, if any, did your school choose not to participate in any SPP monthly data collections? *Select all that apply.*

* I was not interested in participating in voluntary federal surveys
* I did not have the time to participate
* I was advised not to participate by our district or other staff
* I did not see the benefit to my school for participating
* I do not think we received any invitations to participate in the School Pulse Panel
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_

**NPar1a 1-1a.** At what point in the monthly survey process did you decide not to participate? {Display if NPar1 ≠ “I do not think we received…”}

* Before ever opening the invitation letter or email
* After opening the invitation letter or email, but before ever opening the survey
* After opening the survey but before answering any questions
* After answering a few questions

**NPar1b 1-1b**. Please share anything that we could have done to motivate your school to participate in the study.

**NRE1 2-1**. Your school was offered a reimbursement of $400 for each completed monthly survey. Were you aware of this reimbursement offering?

* Yes
* No

**NRE1a 2-1a**. Did you feel that the $400 reimbursement was an appropriate reimbursement amount for your school’s participation in the SPP monthly data collections? {Display if NRE1 = Yes}

* Yes
* No, a $400 reimbursement was not a large enough reimbursement
* No, a $400 reimbursement was too large a reimbursement

**NRE1b**. Which of the following reimbursement amounts do you think would be reasonable for your school’s participation in a 30-minute monthly survey? *Select all that apply.* {Display if NRE1a = “…too large…”}

* $5
* $10
* $20
* $50
* $100
* $200
* $300