**School Pulse Panel**

**(SPP 2024-25)**

**OMB# 1850-0969 v.18**

**Supporting Statement**

**Appendix B1**

**2024-25 SPP Item Bank**

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

**U.S. Department of Education**

**February 2024**

**revised May 2024**

**revised August 2024**

**revised November 2024**

# Overview

*The School Pulse Panel is uniquely structured to be responsive to the needs of stakeholders and policymakers. The 2024-25 monthly surveys will encompass broad content domains, each with a series of measurement items addressing a specific research question. This B1 item bank includes items that will be fielded in the 2024-25 SPP. This item bank supplements the B2 item bank, which includes previously approved and administered items from the 2021-22 SPP and 2023-24 SPP collections. Content in B1 is organized by month fielded.*

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# 2024-25 School Pulse Panel Modules by Month

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Monthly Collection** | | **Modules** | | |  |
| 2024 | August | Staffing  (Summer Hiring Cycle & Challenges [pipeline]) | Community Collaboration | Principal Goals for the Year | Family Engagement Strategies (open ended) |
| September | Summer Programs | After-School Programs | Civics Education |  |
| October | Staffing  (Current Vacancies & Challenges [understaffing]) | Tutoring |  |  |
| November | Food & Nutrition | Physical Education Programming | Arts Education Programming | National Park Service Education Programming |
| December | School Facilities | Technology (Digital Literacy + Artificial Intelligence) |  |  |
| 2025 | January | College & Career Readiness | Sources of Information | Family Engagement |  |
| February | Concerns | State Assessment Perceptions | Climate Impacts on Educational Operations |  |
| March | Mental Health | School and District Vaccine Requirements | Drug Overdose Prevention |  |
| April | Student Housing Instability | Transportation | School Preparedness and Safety Procedures |  |
| May | Student Behavior | Social and Emotional Learning Programs | School Crime and Safety |  |
| June | Absenteeism | Learning Recovery  (Strategies) | Operations Follow-Up |  |
| *Italicized modules* are planned but subject to change; changes will appear in subsequent 30-day packages. | | | | |  |
| School Demographics (see section below) and the Suggestions for Future Content item are also asked each month. An item about daily attendance will be asked every month starting in October 2024. | | | | | |

# Repeating Items *– these items are regularly included in monthly questionnaires and are presented here once rather than shown in monthly instruments. The instruments as administered are shown in Appendix C.*

## School Demographics

**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 totalstudent enrollment count.

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

\_\_\_\_\_\_\_\_ total number of students

**Grades.** In which of the following grades or grade equivalent does your school have students enrolled? *Select all that apply*.

* Kindergarten
* 1st grade
* 2nd grade
* 3rd grade
* 4th grade
* 5th grade
* 6th grade
* 7th grade
* 8th grade
* 9th grade/Freshman
* 10th grade/Sophomore
* 11th grade/Junior
* 12th grade/Senior
* Ungraded
* Adult education {display starting in December 2024}

**Grades\_adult**. Does your school ONLY educate adult students over the age of 19? {Display starting in December 2024 if *Grades* = Adult education}

* Yes

No

**Inper**. Is your school offering in-person learning for students during the 2024-25 school year?

* Yes
* No

**Inper\_no**. Which of the following best describes how students are taught at your school? {Display if Inper=No}

* Fully virtual/online
* Other, please specify: \_\_\_\_\_\_\_

## Suggestions for Future Items

**FutCont.** We want to ensure we are continuing to collect information on topics that are relevant to the day-to-day functioning of U.S. public schools during the 2024-25 school year and beyond. In the space below, please share any topics you believe are important for us to know as we continue this monthly survey collection.

*This item is optional.*

## Attendance

**Att1**. Today (or the most recent day you have data), what is your attendance rate?

*An attendance rate is the percentage of your students who are* ***present*** *for school.*

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

Click in the box below to select the date in the calendar that you used for the attendance rate.

# School Pulse Panel August 2024 Survey

## Staffing (Summer Hiring Cycle)

**HP1**. How easy or difficult was it for you to fill each of the following **teaching** positions with a fully certified teacher for the 2024-25 school year?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Our school does not offer this position | We did not have vacancies in this area | 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 |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Other teaching positions not listed |  |  |  |  |  |  |

**HP1\_open**. Please identify the other the other teaching positions. {Display if *HP1* = Other…}

**HP1a.** How many teaching vacancies did you **need to fill** in these areas?

|  |  |
| --- | --- |
| {Rows display based on selection of any responses from “very easy” through “very difficult” in *HP1*} | 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) |  |
| English as a Second Language (ESL) or bilingual education |  |
| Foreign languages |  |
| Music or arts |  |
| Career or technical education |  |
| Physical education or health |  |
| Other teaching positions not listed |  |

**HP1b**. How many teaching staff vacancies **did you fill** with a fully certified teacher?

*“Filled” includes both newly hired personnel and vacancies filled with personnel that were already working at your school.*

|  |  |
| --- | --- |
| {Rows display based on selection of any responses from “*very easy*” through “*very difficult*” in *HP1*} | Number of vacancies filled |
| 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 teaching positions not listed |  |

**HP2**. What, if any, challenges did you experience filling vacant **teaching** positions for the 2024-25 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

**HP10.** How easy or difficult was it for you to fill each of the following **non-teaching staff** positions for the 2024-25 school year?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Our school does not offer this position | We did not have vacancies in this area | Very easy | Somewhat easy | Somewhat difficult | Very difficult | Don’t know |
| Administrative staff |  |  |  |  |  |  |  |
| Custodial staff |  |  |  |  |  |  |  |
| Nutrition staff (e.g., food preparation, cafeteria worker) |  |  |  |  |  |  |  |

**HP10a**. How many non-teaching staff vacancies did you **need to fill** in these areas?

|  |  |
| --- | --- |
| {Rows display based on selection of any responses from “*very easy*” through “*very difficult*” in *HP10*} | Number of vacancies |
| Administrative staff |  |
| Custodial staff |  |
| Nutrition staff (e.g., food preparation, cafeteria worker) |  |

**HP10b**. How many non-teaching staff vacancies **did you fill**?

*“Filled” includes both newly hired personnel and vacancies filled with personnel that were already working at your school.*

|  |  |
| --- | --- |
| {Rows display based on selection of any responses from “*very easy*” through “*very difficult*” in *HP10*} | Number of vacancies filled |
| Administrative staff |  |
| Custodial staff |  |
| Nutrition staff (e.g., food preparation, cafeteria worker) |  |

**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 2024-25 school year?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Our school does not offer this position | We did not have vacancies in this area | Very easy | Somewhat easy | Somewhat difficult | Very difficult | Don’t know |
| Mental health professional (e.g., psychologist, social worker) |  |  |  |  |  |  |  |
| Medical professional (e.g., nurse, nurse’s aide) |  |  |  |  |  |  |  |
| Technology specialist |  |  |  |  |  |  |  |
| Transportation staff |  |  |  |  |  |  |  |
| Academic counselor |  |  |  |  |  |  |  |
| Academic interventionist |  |  |  |  |  |  |  |
| Tutor |  |  |  |  |  |  |  |
| Instructional coach |  |  |  |  |  |  |  |
| Classroom aide |  |  |  |  |  |  |  |
| Other non-teaching staff positions not listed |  |  |  |  |  |  |  |

**HP3\_open**. Please identify the other the other non-teaching staff positions. {Display if *HP3* = “other…”}

**HP3a.** How many non-teaching staff vacancies did you **need to fill** in these areas?

|  |  |
| --- | --- |
| {Rows display based on selection of any responses from “very easy” through “very difficult” in *HP3*} | Number of vacancies |
| Mental health professional (e.g., psychologist, social worker) |  |
| Medical professional (e.g., nurse, nurse’s aide) |  |
| Technology specialist |  |
| Transportation staff |  |
| Academic counselor |  |
| Academic interventionist |  |
| Tutor |  |
| Instructional coach |  |
| Classroom aide |  |
| Other non-teaching staff positions not listed |  |

**HP3b.** How many non-teaching staff vacancies **did you fill** with a fully certified candidate?

*“Filled” includes both newly hired personnel and vacancies filled with personnel that were already working at your school.*

|  |  |
| --- | --- |
| {Rows display based on selection of any responses from “*very easy*” through “*very difficult*” in *HP3*} | Number of vacancies filled |
| Mental health professional (e.g., psychologist, social worker) |  |
| Medical professional (e.g., nurse, nurse’s aide) |  |
| Technology specialist |  |
| Transportation staff |  |
| Academic counselor |  |
| Academic interventionist |  |
| Tutor |  |
| Instructional coach |  |
| Classroom aide |  |
| Other non-teaching staff positions not listed |  |

**HP4**. What, if any, challenges did you experience filling vacant **non-teaching staff** positions for the 2024-25 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

**GYO1.** Do any students in your school participate in a “grow-your-own” (GYO) program to encourage students to pursue the teaching profession? {Display only if *Grades*=9th, 10th, 11th, or 12th}

*GYO programs are designed to recruit and support individuals from the local community to enter the teaching profession. This may include providing high school students with courses or extra-curricular programs focused on teaching, teaching experience, and/or scholarship opportunities for those who go on to pursue a bachelor’s degree in education and/or teacher certification.*

* Yes
* No

**GYO2.** Approximately how many students participate in a GYO program? {Display if *GYO1* = Yes}

\_\_\_\_\_\_\_ students

**HP9**. We’d like to learn more about schools’ experiences **filling teacher and staff vacancies** prior to the 2024-25 school year. In the space below, please share any other information you’d like us to know on this topic.

*This item is optional.*

## Community Collaboration

**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

**CSP2a**. For the 2024-25 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
* Immigrant, migrant, and refugee support
* Volunteering opportunities
* Community resource fairs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* None of the above

**CSP2d**. Does your school employ a dedicated coordinator to manage the available services you indicated in the prior item? {Display if *CSP2a* ≠ None of the above}

* Yes
* No

**CSP2e**. For the 2024-25 school year, which of the following sources of funding, if any, will be used to support the services available to the community at your school? *Select all that apply.* {Display if CSP2a ≠ None of the above}

* Federal grants or other federal programs
* State grants or other state programs
* District or school financial funding
* Other funding
* No funding is used
* Don’t know

**CSP6.** For the 2024-25 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

**CSP4**. For the 2024-25 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

**CSP5**. How important was each of the following factors in determining your school’s priorities for the 2024-25 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 schools’ experiences **collaborating with their local community**. In the space below, please share any other information you’d like us to know on this topic.

*This item is optional.*

## Principal Goals

*The following item is being fielded as part of an internal research and development effort related to better understanding how “experimental” SPP estimates differ from official statistics and to track trends from the National Teacher and Principal Survey (NTPS). This question will be fielded on the August 2024 survey but not advertised in August 2024 release materials.*

**PVPfilter.** Are you the principal, assistant/vice principal, or some other similar position, at your school?

* Yes, principal or similar position
* Yes, assistant/vice principal or similar position
* No, please specify: \_\_\_\_\_\_\_\_\_\_

**PrinGoal\_NTPS**. We are interested in the importance you place on various educational goals. From the following ten goals, which do you consider the most important, the second most important, and the third most important? {Display if *PVPfilter*=No}

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

\_\_\_\_ Most important

\_\_\_\_ Second most important

\_\_\_\_ Third most important

## Family Engagement Strategies

**PareEng5\_open**. We are interested in the ways that schools are working to increase engagement with the families at their school. What strategies will your school use this school year to increase family engagement?

# School Pulse Panel September 2024 Survey

## Summer Programs

**SP\_gate**. Which of the following summer programs did your school offer during summer 2024? *Select all that apply.*

* **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 programs:** 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 2024

**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 2024? {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, count them once.*

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

* Don’t know

*The following questions ask about your school’s SUMMER SCHOOL offered during summer 2024.*

*If your school offered multiple programs during summer 2024, we will ask about those programs separately later in the survey.*

**SP\_ss1**. To the best of your knowledge, what percentage of your student body participated in **summer school** during summer 2024?

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

* Don’t know

**SP\_ss2**. During a typical week, approximately how many days per week did your school offer **summer school** during summer 2024?

* 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\_ss4**. Approximately how many weeks did your school offer **summer school** during summer 2024?

\_\_\_\_\_\_\_\_ weeks

* Don’t know

**SP\_ss5a**. 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\_ss5b.** Which of the following factors, if any, limited your school’s ability to provide **summer school** to all students who needed it? *Select all that apply*.

* Could not find staff to support summer school
* Lack of funding to hire staff to support summer school
* Space limitations (i.e., did not have the physical space to support summer school for all students who needed it)
* Transportation limitations (i.e., did not have a way for all students to get to and from summer school)
* Lack of educational materials to support summer school
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We did not experience any barriers to implementing summer school
* 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)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We did not partner or contract with any other organizations
* Don’t know

**SP\_ss7**. Which of the following personnel worked in your school’s **summer school** program during summer 2024? *Select all that apply.*

* Teachers who are full-time during the school year from your school
* Teachers who are part-time during the school year 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* ≠ “We did not partner…” or “Don’t know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SP\_ss8\_ii**. What sources of funding were used to support your school’s **summer school** program during summer 2024? *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

**SP\_ss10**. 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

*The following questions ask about your school’s SUMMER LEARNING AND ENRICHMENT PROGRAM(S) offered during summer 2024.*

*If your school offered multiple programs during summer 2024, we will ask about those programs separately later in the survey.*

**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 2024?

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

* 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 2024?

* 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 2024?

\_\_\_\_\_\_\_\_ weeks

* Don’t know

**SP\_le5a**. Which of the following best describes your school’s ability to provide **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\_le5b.** Which of the following factors, if any, limited your school’s ability to provide **summer learning and enrichment program(s)** to all students who wanted to participate? *Select all that apply*.

* Could not find staff to support summer learning and enrichment programs
* Lack of funding to hire staff to support summer learning and enrichment programs
* Space limitations (i.e., did not have the physical space to support summer learning and enrichment programs for all students who wanted to participate)
* Transportation limitations (i.e., did not have a way for all students to get to and from summer learning and enrichment programs)
* Lack of educational materials to support summer learning and enrichment programs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We did not experience any barriers to implementing summer learning and enrichment programs
* 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)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We did not partner or contract with any other organizations
* Don’t know

**SP\_le7**. Which of the following personnel worked in your school’s **summer learning and enrichment program(s)** during summer 2024? *Select all that apply.*

* Teachers who are full-time during the school year from your school
* Teachers who are part-time during the school year 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* ≠ “We did not partner…” or “Don’t know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SP\_le8\_ii**. What sources of funding were used to support your school’s **summer learning and enrichment program(s)** summer 2024? *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

**SP\_le10**. 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

*The following questions ask about your school’s SUMMER RECREATION PROGRAM(S) offered during summer 2024.*

*If your school offered multiple programs during summer 2024, we will ask about those programs separately later in the survey.*

**SP\_r1**. To the best of your knowledge, what percentage of your student body participated in your school’s **summer recreation program(s)** during summer 2024?

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

* Don’t know

**SP\_r2**. During a typical week, approximately how many days per week did your school offer **summer recreation program(s)** during summer 2024?

* 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 your school’s **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 2024?

\_\_\_\_\_\_\_\_ weeks

* Don’t know

**SP\_r5a**. Which of the following best describes your school’s ability to provide **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\_r5b.** Which of the following factors, if any, limited your school’s ability to provide **summer recreation program(s)** to all students who wanted to participate? *Select all that apply*.

* Could not find staff to support summer recreation programs
* Lack of funding to hire staff to support summer recreation programs
* Space limitations (i.e., did not have the physical space to support summer recreation programs for all students who wanted to participate)
* Transportation limitations (i.e., did not have a way for all students to get to and from summer recreation programs)
* Lack of materials to support summer recreation programs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We did not experience any barriers to implementing summer recreation programs
* 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)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We did not partner or contract with any other organizations
* Don’t know

**SP\_r7**. Which of the following personnel worked in your school’s **summer recreation program(s)** during summer 2024? *Select all that apply.*

* Teachers who are full-time during the school year from your school
* Teachers who are part-time during the school year 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* ≠ “We did not partner…” or “Don’t know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SP\_r8\_ii**. What sources of funding were used to support your school’s **summer recreation program(s)** during summer 2024? *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

**SP\_r10**. 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

*The following questions ask about your school’s SUMMER BRIDGE PROGRAM(S) offered during summer 2024.*

*If your school offered multiple programs during summer 2024, we will ask about those programs separately later in the survey.*

**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 2024?

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

* 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 2024?

* 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 2024?

\_\_\_\_\_\_\_\_ weeks

* Don’t know

**SP\_bp5a**. Which of the following best describes your school’s ability to provide **summer bridge program(s)** to those who wanted to participate?

* We were able to provide our summer bridge program(s) to ALL students who wanted to participate
* We were able to provide our summer bridge program(s) to MOST students who wanted to participate
* We were able to provide our summer bridge program(s) to SOME students who wanted to participate
* We were able to provide our summer bridge program(s) to ONLY A FEW students who wanted to participate
* Don’t know

**SP\_bp5b.** Which of the following factors, if any, limited your school’s ability to provide **summer bridge program(s)** to all students who wanted to participate? *Select all that apply*.

* Could not find staff to support summer bridge programs
* Lack of funding to hire staff to support summer bridge programs
* Space limitations (i.e., did not have the physical space to support summer bridge programs for all students who wanted to participate)
* Transportation limitations (i.e., did not have a way for all students to get to and from summer bridge programs)
* Lack of materials to support summer bridge programs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We did not experience any barriers to implementing summer bridge programs
* 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)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We did not partner or contract with any other organizations
* Don’t know

**SP\_bp7**. Which of the following personnel worked in your school’s **summer bridge program(s)** during summer 2024? *Select all that apply.*

* Teachers who are full-time during the school year from your school
* Teachers who are part-time during the school year 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* ≠ “We did not partner…” or “Don’t know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**SP\_bp8\_ii**. What sources of funding were used to support your school’s **summer bridge program(s)** during summer 2024? *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

**SP\_bp10**. 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

*The following questions ask about your school’s SERVICE-LEARNING PROGRAM(S) offered during summer 2024.*

*If your school offered multiple programs during summer 2024, we will ask about those programs separately later in the survey.*

**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 2024?

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

* Don’t know

**SP\_sl2a**. Which of the following best describes your school’s ability to provide **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\_sl2b.** Which of the following factors, if any, limited your school’s ability to provide **summer service learning program(s)** to all students who wanted to participate? *Select all that apply*.

* Could not find staff to support summer service-learning programs
* Lack of funding to hire staff to support summer service-learning programs
* Space limitations (i.e., did not have the physical space to support summer service-learning programs for all students who wanted to participate)
* Transportation limitations (i.e., did not have a way for all students to get to and from summer service-learning programs)
* Lack of materials to support summer service-learning programs
* Lack of external collaborators or partnerships to support summer service-learning programs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We did not experience any barriers to implementing summer service-learning programs
* 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)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We did not partner or contract with any other organizations
* Don’t know

**SP\_sl4**. 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

*The following questions ask about your school’s WORK-BASED LEARNING PROGRAM(S) offered during summer 2024.*

*If your school offered multiple programs during summer 2024, we will ask about those programs separately later in the survey.*

**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 2024?

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

* Don’t know

**SP\_wb2a**. Which of the following best describes your school’s ability to provide **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\_wb2b.** Which of the following factors, if any, limited your school’s ability to provide **summer work-based learning program(s)** to all students who wanted to participate? *Select all that apply*.

* Could not find staff to support summer work-based learning programs
* Lack of funding to hire staff to support summer work-based learning programs
* Space limitations (i.e., did not have the physical space to support summer work-based learning programs for all students who wanted to participate)
* Transportation limitations (i.e., did not have a way for all students to get to and from summer work-based learning programs)
* Lack of materials to support summer work-based learning programs
* Lack of external collaborators or partnerships to support summer work-based learning programs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We did not experience any barriers to implementing summer work-based learning programs
* 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)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We did not partner or contract with any other organizations
* Don’t know

**SP\_wb4**. 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

*The following questions ask about your school’s SUMMER INTERNSHIP PROGRAM(S) offered during summer 2024.*

**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 2024?

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

* Don’t know

**SP\_int2a**. Which of the following best describes your school’s ability to provide **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\_int2b.** Which of the following factors, if any, limited your school’s ability to provide **summer internship program(s)** to all students who wanted to participate? *Select all that apply*.

* Could not find staff to support summer internship programs
* Lack of funding to hire staff to support summer internship programs
* Space limitations (i.e., did not have the physical space to support summer internship programs for all students who wanted to participate)
* Transportation limitations (i.e., did not have a way for all students to get to and from summer internship programs)
* Lack of materials to support summer internship programs
* Lack of external collaborators or partnerships to support summer internship programs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We did not experience any barriers to implementing summer internship programs
* 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)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We did not partner or contract with any other organizations
* Don’t know

**SP\_int4**. 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\_no.** Which of the following are reasons why your school did not operate ANY summer programming during summer 2024? *Select all that apply.* {Display if *SP\_gate* = “We did not offer…”}L

* Students from our school attended summer programs at other schools within our district
* Implementing summer programming was not a priority for our school
* There were not enough students at my school who would have participated in summer programming
* Could not find staff to support summer programming
* Lack of, or reductions in, funding to support summer programming
* Space limitations (i.e., did not have the physical space to support summer programming)
* Transportation limitations (i.e., did not have a way for all students to get to and from summer programming)
* Lack of materials to support summer programming
* Other, please specify \_\_\_\_\_\_\_\_\_

**SP\_ssno**. Which of the following are reasons why your school did not run a **summer school program** during summer 2024? *Select all that apply.* {Display if SP\_gate ≠ Summer school AND “We did not offer…”}

* Students from our school attended summer school at another school within our district
* Implementing summer school was not a priority for our school
* There were not enough students at my school who required summer school
* Could not find staff to support summer school
* Lack of, or reductions in, funding to support summer school
* Space limitations (i.e., did not have the physical space to support summer school)
* Transportation limitations (i.e., did not have a way for all students to get to and from summer school)
* Lack of educational materials to support summer school
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SP\_leno**. Which of the following are reasons why your school did not run **summer learning and enrichment program(s)** during summer 2024? *Select all that apply.* {Display if SP\_gate ≠ learning and enrichment AND “We did not offer…”}

* Students from our school attended summer learning and enrichment programs at another school within our district
* Implementing summer learning and enrichment programs was not a priority for our school
* There were not enough students at my school who would have participated in summer learning and enrichment programs
* Could not find staff to support summer learning and enrichment programs
* Lack of, or reductions in, funding to support summer learning and enrichment programs
* Space limitations (i.e., did not have the physical space to support summer learning and enrichment programs)
* Transportation limitations (i.e., did not have a way for all students to get to and from summer learning and enrichment programs)
* Lack of educational materials to support summer learning and enrichment programs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SP\_rno**. Which of the following are reasons why your school did not run **summer recreation program(s)** during summer 2024? *Select all that apply.* {Display if SP\_gate ≠ recreation AND “We did not offer…”}

* Students from our school attended summer recreation programs at another school within our district
* Implementing summer recreation programs was not a priority for our school
* There were not enough students at my school who would have participated in summer recreation programs
* Could not find staff to support summer recreation programs
* Lack of, or reductions in, funding to support summer recreation programs
* Space limitations (i.e., did not have the physical space to support summer recreation programs)
* Transportation limitations (i.e., did not have a way for all students to get to and from summer recreation programs)
* Lack of materials to support summer recreation programs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SP\_bpno**. Which of the following are reasons why your school did not run **summer bridge program(s)** during summer 2024? *Select all that apply.* {Display if SP\_gate ≠ bridge AND “We did not offer…”}

* Students from our school attended summer bridge programs at another school within our district
* Implementing summer bridge programs was not a priority for our school
* There were not enough students at my school who would have participated in summer bridge programs
* Could not find staff to support summer bridge programs
* Lack of, or reductions in, funding to support summer bridge programs
* Space limitations (i.e., did not have the physical space to support summer bridge programs)
* Transportation limitations (i.e., did not have a way for all students to get to and from summer bridge programs)
* Lack of materials to support summer bridge programs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SP\_more**. We’d like to learn more about your school’s experiences **operating summer programs** during the summer 2024. In the space below please share any other information you would like us to know on this topic.

*This item is optional*.

## After-School Programs

**ASP\_gate**. 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 2024-25 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.*

*If your school offers multiple types of after-school programs, we will ask about those programs separately later in the survey.*

**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 2024-25 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\_aa4a.** 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\_aa4b.** Which of the following factors, if any, limits your school’s ability to provide its after-school **academic assistance program** to all students who want to participate? *Select all that apply*.

* Cannot find staff to support academic assistance programs
* Lack of funding to hire staff to support academic assistance programs
* Space limitations (i.e., do not have the physical space to support academic assistance programs for all students who want it)
* Transportation limitations (i.e., do not have a way for all students to get to and from academic assistance programs)
* Lack of educational materials to support academic assistance programs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We have not experienced any barriers to implementing academic assistance programs
* 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)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We do not partner or contract with any other organizations
* 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 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\_aa5* ≠ “We do not partner…” or “Don’t Know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**ASP\_aa7\_ii.** 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.*

* 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

**ASP\_aa9**. 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

*The following questions ask about your school’s AFTER-SCHOOL ACADEMIC ENRICHMENT program****.***

*If your school offers multiple types of after-school programs, we will ask about those programs separately later in the survey.*

**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 2024-25 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\_ae4a.** 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\_ae4b.** Which of the following factors, if any, limit your school’s ability to provide its after-school **academic enrichment program** to all students who want to participate? *Select all that apply*.

* Cannot find staff to support academic enrichment programs
* Lack of funding to hire staff to support academic enrichment programs
* Space limitations (i.e., do not have the physical space to support academic enrichment programs for all students who want it)
* Transportation limitations (i.e., do not have a way for all students to get to and from academic enrichment programs)
* Lack of educational materials to support academic enrichment programs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We have not experienced any barriers to implementing academic enrichment programs
* 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)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We do not partner or contract with any other organizations
* 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 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\_ae5* ≠ “We do not partner…” or “Don’t know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**ASP\_ae7\_ii.** 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.*

* 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

**ASP\_ae9**. 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

*The following questions ask about your school’s AFTER-SCHOOL EXTENDED-DAY CARE.*

*If your school offers multiple types of after-school programs, we will ask about those programs separately later in the survey.*

**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 2024-25 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\_dc4a.** Which of the following best describes your school’s ability to provide after-school **extended-day care** to those who want to participate?

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

**ASP\_dc4b.** Which of the following factors, if any, limit your school’s ability to provide its after-school **extended-day care** to all students who want to participate? *Select all that apply*.

* Cannot find staff to support extended-day care
* Lack of funding to hire staff to support extended-day care
* Space limitations (i.e., do not have the physical space to support extended-day care for all students who want it)
* Transportation limitations (i.e., do not have a way for all students to get to and from extended-day care)
* Lack of materials to support extended-day care
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We have not experienced any barriers to implementing extended-day care
* 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 care**? *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)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We do not partner or contract with any other organizations
* Don’t know

**ASP\_dc6.** Which of the following personnel work in your school’s after-school **extended-day care**? *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 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\_dc5* ≠ “We do not partner…” or “Don’t Know”}
* Volunteers (e.g., parents, other community members)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

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

**ASP\_dc9**. Do families have to pay a fee for their child(ren) to participate in your school’s after-school **extended-day care**?

*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

*The following questions ask 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, 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, Drama)
* Spirit groups (e.g., Cheerleading, Dance Team, Pep Club)
* Volunteer or community service clubs sponsored by the school (e.g., Peer Mediators, Environmental Club, Key Club, Interact, 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 of your school’s **activities and clubs** during the 2024-25 school year?

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

* Don’t know

**ASP\_ac3a.** Which of the following best describes your school’s ability to provide 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\_ac3b.** Which of the following factors, if any, limit your school’s ability to provide its after-school **activities and clubs** to all students who want to participate? *Select all that apply*.

* Cannot find staff to support activities and clubs
* Lack of funding to hire staff to support activities and clubs
* Space limitations (i.e., do not have the physical space to support activities and clubs for all students who want it)
* Transportation limitations (i.e., do not have a way for all students to get to and from activities and clubs)
* Lack of materials to support activities and clubs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We have not experienced any barriers to implementing activities and clubs
* Don’t know

**ASP\_no.** Which of the following are reasons why your school is not running ANY after-school programming for the 2024-25 school year? *Select all that apply.* {Display if *ASP\_gate* = “We are not offering”}

* Implementing after-school programming is not a priority for our school
* Lack of participation (e.g., not enough student interest, not enough interest from parents)
* Cannot find staff to support after-school programming
* Lack of, or reductions in, funding to support after-school programming
* Space limitations (i.e., do not have the physical space to support after-school programming)
* Transportation limitations (i.e., do not have a way for all students to get home after after-school programming)
* Lack of materials to support after-school programming
* Other, please specify: \_\_\_\_\_\_\_\_\_\_

**ASP\_aano**. Which of the following are reasons why your school is not running an **after-school academic assistance program** for the 2024-25 school year? *Select all that apply.* {Display if ASP\_gate ≠ academic assistance AND “We are not offering”}

* Implementing after-school academic assistance programs is not a priority for our school
* Lack of participation (e.g., not enough student interest, not enough interest from parents)
* Cannot find staff to support an after-school academic assistance program
* Lack of, or reductions in, funding to support an after-school academic assistance program
* Space limitations (i.e., do not have the physical space to support an after-school academic assistance program)
* Transportation limitations (i.e., do not have a way for all students to get home after an after-school academic assistance program)
* Lack of materials to support an after-school academic assistance program
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ASP\_aeno**. Which of the following are reasons why your school is not running an **after-school academic enrichment program** for the 2024-25 school year? *Select all that apply.* {Display if ASP\_gate ≠ academic enrichment AND “We are not offering”}

* Implementing after-school academic enrichment programs is not a priority for our school
* Lack of participation (e.g., not enough student interest, not enough interest from parents)
* Cannot find staff to support an after-school academic enrichment program
* Lack of, or reductions in, funding to support an after-school academic enrichment program
* Space limitations (i.e., do not have the physical space to support an after-school academic enrichment program)
* Transportation limitations (i.e., do not have a way for all students to get home after an after-school academic enrichment program)
* Lack of materials to support an after-school academic enrichment program
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ASP\_dcno**. Which of the following are reasons why your school is not running an **extended-day care program** for the 2024-25 school year? *Select all that apply.* {Display if ASP\_gate ≠ extended-day care AND “We are not offering”}

* This program is not applicable to my students
* Students from our school attend extended-day care at another school within our district
* Implementing extended-day care is not a priority for our school
* Lack of participation (e.g., not enough interest from parents)
* Cannot find staff to support extended-day care
* Lack of, or reductions in, funding to support extended-day care
* Space limitations (i.e., do not have the physical space to support extended-day care)
* Transportation limitations (i.e., do not have a way for all students to get home after extended-day care)
* Lack of materials to support extended-day care
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ASP\_acno**. Which of the following are reasons why your school is not running any **after-school activities and clubs** for the 2024-25 school year? *Select all that apply.* {Display if ASP\_gate ≠ activities and clubs AND “We are not offering”}

* Implementing after-school activities and clubs is not a priority for our school
* Lack of participation (e.g., not enough student interest, not enough interest from parents)
* Cannot find staff to support after-school activities and clubs
* Lack of, or reductions in, funding to support after-school activities and clubs
* Space limitations (i.e., do not have the physical space to support after-school activities and clubs)
* Transportation limitations (i.e., do not have a way for all students to get home after after-school activities and clubs)
* Lack of materials to support after-school activities and clubs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ASP\_more**. We’d like to learn more about your school’s experiences **operating after-school programs** during the 2024-25 school year. In the space below please share any other information you would like us to know on this topic.

*This item is optional*.

## Civics Education

**Civics1**. Are ANY teachers in the following grades incorporating the upcoming national election cycle into their lessons?

|  |  |  |
| --- | --- | --- |
| {Display rows based on responses to Grades} | Yes | No |
| Kindergarten |  |  |
| 1st |  |  |
| 2nd |  |  |
| 3rd |  |  |
| 4th |  |  |
| 5th |  |  |
| 6th |  |  |
| 7th |  |  |
| 8th |  |  |
| 9th |  |  |
| 10th |  |  |
| 11th |  |  |
| 12th |  |  |

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Voter registration opportunities for your students {Display if Grades = 11th or 12th} |  |  |
| Mock debates |  |  |
| Mock voting |  |  |
| Assemblies/guest speakers |  |  |
| Other special programming |  |  |

**Civics2**. Is your school doing any of the following special programming around the upcoming national election cycle?

**Civics2other**. Please identify the other types of special programming around the upcoming national election cycle at your school. {Display if Civics2 = Other}

**Civics\_more***.* We’d like to learn more about your school’s experiences **with civics education and programming around the national election cycle** during the 2024-25 school year. In the space below please share any other information you would like us to know on this topic*.*

*This item is optional.*

# School Pulse Panel October 2024 Survey

## Staffing (Current Vacancies, Challenges, and Understaffed)

**StaffVac1**. Please enter the following information on staffing at your school.

*Please enter the number of teachers and vacancies. Count each part-time position or vacancy as 1. For example, if you have 3 full-time math teachers and 2 part-time math teachers, count this as 5 in the “Total number of positions at my school” column.*

*Please enter only numbers in the 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 |
| 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 teaching position not listed |  |  |  |

**StaffVac1\_open.** Please identify the other teaching positions. {Display if *StaffVac1* = Other…}

**StaffVac2.** Please enter the following information on staffing at your school.

*Please enter the number of staff members and vacancies. Count each part-time position or vacancy as 1. For example, if you have 3 full-time tutor teachers and 2 part-time tutors, count this as 5 in the “Total number of positions at my school” column.*

*Please enter only numbers in the 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 |  |  |  |  |
| Other staff position not listed |  |  |  |  |

**StaffVac2\_open.** Please identify the other staff positions. {Display if *StaffVac2* = Other…}

*The following two items, StaffVac5 and StaffVac5\_ii, will be fielded as part of a split-panel experiment to test potential ordering effects of the placement of the “we do not have any teacher or staff vacancies” response option.*

**StaffVac5.** During the 2024-25 school year, how have teacher and staff vacancies impacted your school? *Select all that apply.* {Display if *TREATMENT* = 1}

* 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)
* None of the above
* We do not have any teacher or staff vacancies

**StaffVac5\_ii.** During the 2024-25 school year, how have teacher and staff vacancies impacted your school? *Select all that apply.* {Display if *TREATMENT* = 2}

* We do not have any teacher or staff vacancies
* 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)
* None of the above

**HP5**. As of today, do you feel your school is understaffed?

* Yes
* No

**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 professional (e.g., psychologist, social worker) |  |  |  |
| Medical professional (e.g., nurse, nurse’s aide) |  |  |  |
| Administrative staff |  |  |  |
| Technology specialist |  |  |  |
| Transportation |  |  |  |
| Custodial |  |  |  |
| Nutrition (e.g., food preparation, cafeteria workers) |  |  |  |
| Academic Counselor |  |  |  |
| Academic Interventionist |  |  |  |
| Tutor |  |  |  |
| Instructional Coach |  |  |  |
| Classroom aide |  |  |  |
| Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |

**StaffVac6.** Compared to last school year (2023-24), how has the number of teaching positions at your school changed?

* We have added new teaching position(s)
* We have lost teaching position(s)
* The number of teaching positions at our school is the same
* Not applicable – we are a new school

**StaffVac6a**. Compared with the 2023-24 school year, how many teaching positions has your school added for the 2024-25 school year? {Display if StaffVac6 = “We have added…”}

\_\_\_\_\_\_ teaching positions

**StaffVac6b**. Why has your school added new teaching positions for this school year? *Select all that apply.* {Display if *StaffVac6* = “We have added,,,”}

* Enrollment has increased
* We were able to fund new positions
* Our school/district went through a reorganization/restructuring of staff
* We added new classes/courses
* We were previously understaffed
* We changed our priorities
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**StaffVac6c**. How many teaching positions has your school lost for this school year? {Display if *StaffVac6* = “We have lost…”}

\_\_\_\_\_ teaching positions

**StaffVac6d.** Why has your school lost teaching positions for this school year? *Select all that apply.* {Display if StaffVac6 = “We have lost…”}

* Enrollment has decreased
* We lost funding/budget cuts
* Our school/district went through a reorganization/restructuring of staff
* We reduced the number of classes/courses we offer
* We changed our priorities
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_

**StaffVac\_more**. We’d like to learn more about your school’s experiences **with staffing** for the 2024-25 school year. In the space below, please share any other information you would like us to know on this topic.

*This item is optional.*

## Tutoring

**SR1a**. To the best of your knowledge, what percentage of students **began the 2024-25 school year** behind grade level in at least one academic subject?

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

* Don’t know

**SR1c**. In which of the following academic subjects did students at your school **begin the 2024-25 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 |  |  |  |  |

**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,
  + that aligns with evidence-based core curriculum or programs, AND
  + is NOT drop-in homework help {Display HDT items if selected}
* **Standard tutoring:** A less intensive method of tutoring 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 works 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 2024-25 school year.*

*If your school offers multiple types of tutoring programs, we will ask about those programs separately later in the survey.*

**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 2024-25 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 (2023-24)?

* 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 2023-24 school year
* Don’t know

**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 per week
* 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\_ii**. Which of the following sources of funding have been used to support **high-dosage** tutoring during the 2024-25 school year? *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

*The following items ask about* ***standard*** *tutoring at your school during the 2024-25 school year.*

*If your school offers multiple types of tutoring programs, we will ask about those programs separately later in the survey.*

**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 2024-25 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 (2023-24)?

* 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 2023-24 school year
* Don’t know

**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 per week
* 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\_ii**. Which of the following sources of funding have been used to support **standard** tutoring during the 2024-25 school year? *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

*The following items ask about* ***self-paced*** *tutoring at your school during the 2024-25 school year.*

*If your school offers multiple types of tutoring programs, we will ask about those programs separately later in the survey.*

**SPT2**. As of today, what percentage of students at your school have received **self-paced** tutoring during the 2024-25 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 (2023-24)?

* 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 2023-24 school year
* Don’t Know

**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 per week
* 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\_ii**. Which of the following sources of funding have been used to support **self-paced** tutoring during the 2024-25 school year? *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

*The following items ask about* ***on-demand online*** *tutoring at your school during the 2024-25 school year.*

**ODT2**. As of today, what percentage of students at your school have accessed **on-demand online** tutoring during the 2024-25 school year?

\_\_\_\_\_\_\_\_\_% of students

* Don’t know

**ODT13a**. Are any students **required** to participate in your school’s **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 (2023-24)?

* 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 2023-24 school year
* Don’t Know

**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 per week
* 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\_ii**. Which of the following sources of funding have been used to support **on-demand online** tutoring during the 2024-25 school year? *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

**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 | Don’t know |
| High-dosage tutoring |  |  |  |  |  |  |
| Standard tutoring |  |  |  |  |  |  |
| Self-paced tutoring |  |  |  |  |  |  |
| On-demand online tutoring |  |  |  |  |  |  |
| Other methods of tutoring |  |  |  |  |  |  |

**Tutoringno.** Which of the following are reasons why your school has not implemented ANY tutoring at this time? *Select all that apply.* {Display if *Tutoring\_gate* = “No tutoring…”}

* Implementing tutoring is not a priority for our school
* There are not enough students at my school who require tutoring
* Time limitations (i.e., cannot find enough time to support tutoring)
* Space limitations (i.e., do not have the physical space to support tutoring)
* Lack of educational materials to support tutoring
* Cannot find staff to support tutoring
* Lack of, or reductions in, funding to support high-dosage tutoring
* Other, please specify: \_\_\_\_\_\_\_\_\_\_

**HDTno**. Which of the following are reasons why your school has not implemented **high-dosage tutoring** at this time? *Select all that apply.* {Display if Tutoring\_gate ≠ HDT AND “No tutoring”}

* Implementing high-dosage tutoring is not a priority for our school
* There are not enough students at my school who require 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
* Cannot find staff to support high-dosage tutoring
* Lack of, or reductions in, funding to support high-dosage tutoring
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SDTno**. Which of the following are reasons why your school has not implemented **standard tutoring** at this time? *Select all that apply.* {Display if Tutoring\_gate ≠ SDT AND “No tutoring”}

* Implementing standard tutoring is not a priority for our school
* There are not enough students at my school who require 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
* Cannot find staff to support standard tutoring
* Lack of, or reductions in, funding to support standard tutoring
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SPTno**. Which of the following are reasons why your school has not implemented **self-paced tutoring** at this time? *Select all that apply.* {Display if Tutoring\_gate ≠ SPT AND “No tutoring”}

* Implementing self-paced tutoring is not a priority for our school
* There are not enough students at my school who require self-paced tutoring
* Time limitations (i.e., cannot find enough time to support self-paced tutoring)
* Space limitations (i.e., do not have the physical space to support self-paced tutoring)
* Lack of educational materials to support self-paced tutoring
* Lack of, or reductions in, funding to support self-paced tutoring
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ODTno**. Which of the following are reasons why your school has not implemented **on-demand online tutoring** at this time? *Select all that apply.* {Display if Tutoring\_gate ≠ ODT AND “No tutoring”}

* Implementing on-demand online tutoring is not a priority for our school
* There are not enough students at my school who require on-demand online tutoring
* Time limitations (i.e., cannot find enough time to support on-demand online tutoring)
* Space limitations (i.e., do not have the physical space to support on-demand online tutoring)
* Lack of educational materials to support on-demand online tutoring
* Lack of, or reductions in, funding to support on-demand online tutoring
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Tutoring\_more**. We’d like to learn more about your school’s experiences **offering tutoring programs** during the 2024-25 school year. In the space below please share any other information you would like us to know on this topic.

*This item is optional*.

# School Pulse Panel November 2024 Survey

## Food & Nutrition

**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 *SchLun* items are displayed}
* 1-25%
* 26-50%
* 51-75%
* 76-99%
* 100%
* Don’t Know

**SchLun2b**. How does this percentage of students you indicated in the previous item compare to the percentage of students that participated last year?

* It has decreased a lot
* It has decreased a little
* It is about the same
* It has increased a little
* It has increased a lot

**SchLun12**. For the 2024-25 school year, did your school collect household applications for free- or reduced-price school meals? {Display if *SchLun1* = “Students can participate in USDA…” or “Students can buy meals…”}

* Yes
* No
* Don’t Know

**SchLun3**. As of today, how does your school operate the school lunch and/or breakfast programs? *Select all that apply.* {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. Partnerships or sponsorships with local food organizations
5. Other, please specify: \_\_\_\_\_
6. Don’t Know

**SchLun6**. How easy or difficult has it been for your school to operate USDA School Meal programs during this school year (2024-25) compared to last school year (2023-24) {Display if *SchLun1* = “Students can participate in USDA…”}

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

**SchLun13.** What, if any, challenges have your school experienced with school meal program operations during the 2024-25 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 (2023-24)**
* 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
* 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

**SchLun15**. Does your school inform students or their families of the availability of the following U.S. Department of Agriculture nutrition programs?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| SNAP (or the Supplemental Nutrition Assistance Program, formerly known as Food Stamps) |  |  |
| WIC (or the Special Supplemental Food Program for Women, Infants, and Children) |  |  |
| Food Distribution Program on Indian Reservations |  |  |
| Summer Meal Programs (in-person, to go, and/or delivered meals) |  |  |
| Summer EBT (or Summer Electronic Benefit Transfer, also known as Sun Bucks) |  |  |
| Child and Adult Care Food Program (e.g., center is reimbursed for meals and snacks provided to children in afterschool care; CACFP) |  |  |

**SchLun11**. We’d like to learn more about schools’ experiences **providing your students with breakfast and/or lunch.** In the space below, please share any information you would like us to know on this topic.

*This item is optional.*

## Physical Education Programming

**PhysEd1.** Is a physical education course taught in any of the following grades in your school?

|  |  |  |
| --- | --- | --- |
| {Display based on responses to *Grades*} | Yes | No |
| Kindergarten |  |  |
| 1st |  |  |
| 2nd |  |  |
| 3rd |  |  |
| 4th |  |  |
| 5th |  |  |
| 6th |  |  |
| 7th |  |  |
| 8th |  |  |
| 9th |  |  |
| 10th |  |  |
| 11th |  |  |
| 12th |  |  |

**PhysEd2.** During the 2024-25 school year, will (or have) all, some, or none of the following types of staff attend(ed) professional development related to physical education or other strategies for integrating more physical activity into the school day?

*Please include workshops, conferences, continuing education, or any other kind of in-service.*

|  |  |  |  |
| --- | --- | --- | --- |
|  | All | Some | None |
| Physical education teachers or specialists |  |  |  |
| Classroom teachers |  |  |  |
| Other school staff |  |  |  |

**PhysEd3.** Does your school engage in any of the following physical education practices?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Provide physical education teachers with a written physical education curriculum that aligns with national standards for physical education |  |  |
| Require physical education teachers to follow a written physical education curriculum |  |  |
| Allow other teachers to exclude students from a physical education class (e.g., to help them with classroom activities, for failure to complete classwork, because of behavior in their classroom) |  |  |
| Require physical education teachers to be certified, licensed, or endorsed by the state in physical education |  |  |
| Limit physical education class sizes so that they are the same size as other subject areas |  |  |
| Have a dedicated budget for physical education materials and equipment |  |  |
| Include students with disabilities in regular physical education courses as appropriate |  |  |
| Provide adapted physical education (i.e., special courses separate from regular physical education courses) for students with disabilities as appropriate |  |  |
| Allow the use of waivers, exemptions, or substitutions for physical education requirements for one grading period or longer |  |  |

**PhysEd4.** During the last year, has your school assessed opportunities available to students to be physically active before, during, or after school?

* Yes
* No

**PhysEd5.** Not including physical education courses, do teachers at your school incorporate physical activity in their classes during the school day?

* Yes
* No

**PhysEd6**. Not including physical education courses and classroom physical activity, does your school offer opportunities for students to be physically active **during the school day**?

*Include activities like recess, lunchtime intramural activities, or physical activity clubs.*

* Yes
* No

**PhysEd7**. Does your school offer interscholastic sports to students?

* Yes
* No

**PhysEd8**. Does your school offer opportunities for students to participate in organized physical activities or provide access to facilities or equipment for physical activity during the following times?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Organized physical activities **before** the school day |  |  |
| Organized physical activities **after** the school day |  |  |
| Access to facilities or equipment **before** the school day |  |  |
| Access to facilities or equipment **after** the school day |  |  |

**PhysEd9**. Does your school, either directly or through the school district, have a joint use agreement for shared use of the following school or community facilities?

*A joint use agreement is a formal agreement between a school or school district and another public or private entity to jointly use either school facilities or community facilities to share costs and responsibilities.*

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Physical activity or sports facilities |  |  |
| Kitchen facilities and equipment |  |  |
| Gardens (e.g., herb or vegetable plots) |  |  |

**PhysEd10**. Does your school have a written plan for providing opportunities for students to be physically active before, during, **and** after school?

*This also may be referred to as a Comprehensive School Physical Activity Program plan.*

* Yes
* No

**PhysEd11**. We’d like to learn more about schools’ experiences **with physical education programming.** In the space below, please share any information you would like us to know on this topic.

*This item is optional.*

## Arts Education Programming

**ArtsEd1**. Please indicate which of the following performing and visual arts, if any, are taught at your school **as standalone classes** during the regular school day during the 2024-25 school year.

*If a standalone class could count in multiple categories of visual and performing arts, select the art form that is the primary subject of the class. For example, count a course on “set design,” which may include aspects of visual arts and media arts, in the “drama/theater” category.*

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Music |  |  |
| Visual arts (e.g., painting, drawing, sketching, ceramics, pottery, textiles) |  |  |
| Media arts (e.g., film, photography, audio/video, computer/digital arts) |  |  |
| Dance |  |  |
| Drama/theater |  |  |

**ArtsEd2**. How adequate are the following types of support for **arts instruction** at this school?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Very inadequate | Somewhat inadequate | Somewhat adequate | Very adequate |
| Funding |  |  |  |  |
| Facilities (e.g., classroom, storage, display) |  |  |  |  |
| Materials, equipment, tools, and instruments |  |  |  |  |
| Instructional time for the arts |  |  |  |  |
| Number of arts specialists |  |  |  |  |
| Arts professional development for teachers/specialists |  |  |  |  |
| Student interest or demand |  |  |  |  |
| Parent or community support |  |  |  |  |

**ArtsEd3**. Are students at your school **required** to take at least one performing or visual arts class while enrolled at your school? {display if any of *ArtsEd1* = yes}

* Yes
* No

**ArtsEd4**. On average, how many hours **per week** do students enrolled in these classes receive instruction?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| {Display rows based on “Yes” responses to *ArtsEdu1*} | Less than 1 hour | 1 to less than 2 hours | 2 to less than 3 hours | 3 to less than 4 hours | More than 5 hours |
| Music |  |  |  |  |  |
| Visual arts (e.g., painting, drawing, sketching, ceramics, pottery, textiles) |  |  |  |  |  |
| Media arts (e.g., film, photography, audio/video, computer/digital arts) |  |  |  |  |  |
| Dance |  |  |  |  |  |
| Drama/theater |  |  |  |  |  |

**ArtsEd5.** For each of the following subject areas, who teaches the standalone class(es) at your school? *Select all that apply.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| {Display rows based on “Yes” responses to *ArtsEdu1*} | Full-time arts teacher or specialist | Part-time arts teacher or specialist | Classroom teacher | Artist-in-residence | Volunteer |
| Music |  |  |  |  |  |
| Visual arts (e.g., painting, drawing, sketching, ceramics, pottery, textiles) |  |  |  |  |  |
| Media arts (e.g., film, photography, audio/video, computer/digital arts) |  |  |  |  |  |
| Dance |  |  |  |  |  |
| Drama/theater |  |  |  |  |  |

**ArtsEd6**. Please indicate whether the following arts instructional activities are provided by your school **outside of** theregular school day during the 2024-25 school year.

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Individual or small-group music lessons |  |  |
| Choir/band/marching band practice |  |  |
| Dance lessons (e.g., lessons, team) |  |  |
| Media arts lessons (e.g., film, photography, audio/video, computer/digital arts) |  |  |
| School performances or presentations in the arts (e.g., concerts, plays, art shows) |  |  |
| Arts-related field trips (e.g., school trips to concerts, plays, museums) |  |  |
| Other instructional activities |  |  |

**ArtsEd6\_open.** Please describe the other arts instructional activities provided by your school outside of the regular school day. {Display if *ArtsEd6* = Other}

**ArtsEd7**. During the 2024-25 school year, does your school have (or will it have) partnerships or collaborations with any of the following entities to help meet your school’s arts education goals?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Working artists |  |  |
| Nonprofit arts and cultural organizations |  |  |
| Nonprofit organizations NOT focused on arts and culture |  |  |
| College or universities |  |  |
| Local businesses |  |  |
| Other partnerships or collaborations |  |  |

**ArtsEd7\_open.** Please describe the other partnerships or collaborations. {Display if *ArtsEd7* = Other}

**ArtsEd8**. We’d like to learn more about schools’ experiences **with arts education programming.** In the space below, please share any information you would like us to know on this topic.

*This item is optional.*

## National Park Service Education Programming

*The following questions are about the educational programming offered by the* ***National Park Service (NPS)****. The NPS is a federal agency that manages all national parks and many national monuments and historic sites.*

**NPS1**. Were you aware that the **National Park Service** (NPS) provides educational programming for students?

* Yes, I was aware the NPS provides educational programming
* No, I was not aware that the NPS provides educational programming

**NPS2**. During the 2024-25 school year, which of the following NPS educational programs, if any, will (or have) classes at your school participate(d) in? *Select all that apply*.

* Field trip to an NPS location (e.g., a national park or a national historic site) with a ranger-led program
* Self-guided field trip to NPS location (e.g., a national park or a national historic site)
* NPS ranger visiting classrooms at your school
* Online, interactive distance learning with an NPS ranger (e.g., “live” lessons)
* NPS pre-recorded online lessons
* NPS online resources/materials (e.g., live webcams, lesson plans, resource kits, etc.)
* Classes at my school will (or have) not participate(d) in any of these NPS programs during the 2024-25 school year

**NPS3**. Which of the following are reasons why your school has not participated in NPS educational programming? *Select all that apply.* {Display if *NPS2* = “Classes at my school will (or have) not…”}

* Using this programming is not a priority for our school
* Restrictions on what can be included in our curriculum
* Time limitations
* Lack of teacher awareness
* Lack of teacher interest
* Lack of student interest
* Lack of parental/guardian support
* Lack of funding
* Inability to arrange transportation to NPS location(s)
* Distance to NPS location(s)
* Lack of district-level support
* Other, please specify: \_\_\_\_\_\_\_\_\_\_

**NPS4**. How interested are YOU in the following NPS educational programs for your school?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | No interest | Slight interest | Moderate interest | A lot of interest |
| Field trip to an NPS location (e.g., a national park or a national historic site) with a ranger-led program |  |  |  |  |
| Self-guided field trip to NPS location (e.g., a national park or a national historic site) |  |  |  |  |
| NPS ranger visiting classrooms at your school |  |  |  |  | |
| Online, interactive distance learning with an NPS ranger (e.g., “live” lessons) |  |  |  |  | |
| NPS pre-recorded online lessons |  |  |  |  | |
| NPS online resources/materials (e.g., live webcams, lesson plans, resource kits, etc.) |  |  |  |  | |

## 

# School Pulse Panel December 2024 Survey

## School Facilities

**Fac22\_c**. How long ago was the last major **renovation** to your school’s instructional building(s)?

* We have **never** had a major renovation to the school’s instructional building(s)
* One or more of our instructional building(s) is **currently** under major renovation
* Within the last calendar year
* More than 1 year but less than 3 years ago
* More than 3 years but less than 5 years ago
* More than 5 years but less than 10 years ago
* More than 10 years but less than 20 years ago
* More than 20 years ago
* Don’t know

**Fac23\_c**. How long ago was the last major building **replacement or addition** made to you school?

* We have **never** had a major building replacement or addition
* We are **currently** undergoing a major building replacement or addition
* Within the last calendar year
* More than 1 year but less than 3 years ago
* More than 3 years but less than 5 years ago
* More than 5 years but less than 10 years ago
* More than 10 years but less than 20 years ago
* More than 20 years ago
* Don’t know

**Fac25**. Overall, what is the physical condition of each of the building features listed below for your school’s **main instructional building**? Please refer to the rating scale below to inform your selection for each building or part of a building’s feature listed.

**Excellent**: new or easily restorable to “like new” condition; only minimal routine maintenance required.

**Good**: some preventive maintenance and/or corrective repair required.

**Fair**: Does not meet functional requirements in some cases; extensive corrective maintenance and repair required.

**Poor**: consistent substandard performance; failure(s) are disruptive and costly; requires constant attention, major corrective repair or overhaul.

**Needs Replacement**: non-operational, replacement required.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Needs Replacement | Poor | Fair | Good | Excellent |
| Roofs |  |  |  |  |  |
| Floors |  |  |  |  |  |
| Foundation |  |  |  |  |  |
| Exterior walls, windows, or doors |  |  |  |  |  |
| Interior walls, ceilings, or doors |  |  |  |  |  |
| Plumbing |  |  |  |  |  |
| Heating, ventilation, and/or air conditioning system(s) |  |  |  |  |  |
| Electrical power |  |  |  |  |  |
| Indoor lighting |  |  |  |  |  |
| Exterior lighting |  |  |  |  |  |

**Fac26**. Does your school have a formal way for teachers or staff to raise concerns about the condition of the building or classrooms?

* Yes
* No

**Fac27.** Overall, how would you rate the indoor air quality at your school?

* Excellent
* Good
* Fair
* Poor

**Fac28**. Which of the following types of cooling systems are used at your school? *Select all that apply.*

* Central air conditioning
* Individual thermostat-controlled cooling systems in certain rooms
* Window air conditioning unit(s)
* Portable air conditioning unit(s)
* Ceiling fan(s)
* Other fan(s) (e.g., box fans, standalone fans)
* Dehumidifiers or evaporative coolers
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* No types of cooling systems are used at my school

**Fac29**. Does your school’s main instructional buildinghave **central** **heating**?

* Yes, throughout the entire building
* Yes, in some but not all rooms
* No

**Fac30.** Can the windows at your school be easily opened and closed?

* Yes, all windows
* Yes, but not all windows
* No

**Fac31**. Does your school have high-speed internet available to students?

* Yes, only in some rooms of the school buildings
* Yes, within all school buildings but not on all school grounds
* Yes, across all school grounds and buildings
* No

**Fac32**. Is your school building(s) adequate for the size of your student population?

* Yes
* No

**Fac\_more**. We’d like to learn more about schools’ **building facilities and amenities**. In the space below, please share any information you would like us to know on this topic.

*This item is optional.*

## Technology (Digital Literacy + Artificial Intelligence)

**AI1a**. For this school year, please indicate whether the following groups were provided training from your school or district on the use of artificial intelligence (AI)?

***Artificial Intelligence (AI)*** *is a machine-based system that can make predictions, recommendations, or decisions through analysis in an automated manner.*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | All | Only some | None | Don’t know |
| Teachers |  |  |  |  |
| Non-teaching staff |  |  |  |  |
| Administrators |  |  |  |  |

**AI1b**. Which of the following topics are addressed in the AI training provided by your school or district? *Select all that apply.* {Display if *AI1a* = “All” or “Only some” to at least one row}

* What is AI
* How to use AI to automate administrative tasks
* How to use AI to create tailored educational materials for students
* How to use AI to supplement instruction
* How to use AI to develop **diagnostic** assessments for students
* How to use AI to develop **formative** assessments for students
* How to teach students about and how to use AI
* Types of assignments where students are likely to **appropriately** use AI
* Types of assignments where students are likely to **inappropriately** use AI (i.e., cheating)
* How to identify student plagiarism conducted with AI
* Ethical or equity concerns around the use of AI
* Identifying misinformation that can be produced by AI
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**AI2**. How many teachers at your school use AI for the following tasks?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | None | A few | Several | Most | All | Don’t know |
| Creating lesson plans |  |  |  |  |  |  |
| Administrative tasks |  |  |  |  |  |  |
| Creating tailored educational materials for students |  |  |  |  |  |  |
| Supplementing instruction |  |  |  |  |  |  |
| Creating **diagnostic** assessments |  |  |  |  |  |  |
| Creating **formative** assessments |  |  |  |  |  |  |
| Grading and feedback |  |  |  |  |  |  |

**AI3**. Does your school have access to any AI-based tutoring systems?

*These systems may be referred to as Intelligent Tutoring Systems (ITS) or computer-aided instruction.*

* Yes
* No
* Don’t know

**AI4a**. Does your school or district have a written policy on students’ use of AI in school (e.g., standalone policy or incorporated into academic honesty policy or responsible use of technology policy)?

* Yes
* No
* Don’t know

**AI4b**. How familiar are you with your school or district policy on students’ use of AI in school? {Display if *AI4a* = Yes}

* Not at all familiar
* Slightly familiar
* Somewhat familiar
* Moderately familiar
* Extremely familiar

**AI4c.** Are you aware of any plans by your school or district to develop a policy about students’ use of AI in school? {Display if *AI4a* = No}

* Yes
* No

**AI5**. Please indicate whether the following topics regarding AI are taught to students at your school.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | All | Only some | None | Don’t know |
| Technical knowledge around the use of AI |  |  |  |  |
| Ethical/appropriate uses of AI |  |  |  |  |
| Identifying misinformation that can be produced by AI |  |  |  |  |
| Other topics regarding AI |  |  |  |  |

**AI5\_open.** Please indicate what other topics regarding AI are taught to students at your school. {Display if *AI5* “Other” = “All” or “Only some”}

**AI6a**. Do any teachers at your school use software to identify whether a student’s work has been AI-generated?

* Yes
* No
* Don’t know

**AI6b**. Are any of the following reasons why your school does not use this kind of software? *Select all that apply*. {Display if *AI6a* = “No” or “Don’t know”}

* We were not aware this type of software existed
* We do not have access to this kind of software
* We are concerned about the accuracy of the software
* Teachers at my school would not use this kind of software even if we had access to it
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_

**AI7.** How concerned are YOU about the following?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not concerned | Slightly concerned | Somewhat concerned | Moderately concerned | Extremely concerned |
| Lack of guidance on using AI at your school |  |  |  |  |  |
| Sharing of student and/or teacher data with AI systems  (e.g., personally-identifiable information, work products) |  |  |  |  |  |
| Potential for bias in AI |  |  |  |  |  |
| Availability of AI-focused professional development for your teachers and staff |  |  |  |  |  |
| Teachers at your school’s capability to effectively use AI |  |  |  |  |  |
| Students at your school’s capability to effectively use AI in the classroom or on assignments |  |  |  |  |  |
| Students at your school’s potential to misuse AI in the classroom or on assignments |  |  |  |  |  |

**AI8.** To what extent do you agree or disagree with the following statements:

*“Integrating AI tools into teaching and learning will…”*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Moderately disagree | Neither agree nor disagree | Moderately agree | Strongly agree |
| enable students at my school to develop better critical thinking skills |  |  |  |  |  |
| lead to better educational outcomes for students at my school |  |  |  |  |  |
| enable teachers at my school to be more effective educators |  |  |  |  |  |
| enable teachers at my school to be more relevant with today’s teaching and learning needs |  |  |  |  |  |
| make life easier for teachers at my school |  |  |  |  |  |

**AI9**. When it comes to their education, how favorable or unfavorable is your view of your school’s **students** using AI?

* Very unfavorable
* Somewhat unfavorable
* Neither unfavorable nor favorable
* Somewhat favorable
* Very favorable

**AI10**. When it comes to their job duties, how favorable or unfavorable is your view of your school’s **teachers** using AI?

* Very unfavorable
* Somewhat unfavorable
* Neither unfavorable nor favorable
* Somewhat favorable
* Very favorable

**Tech1a**. For the 2024–25 school year, does your school have a 1-to-1 computing program that provides **every** student a school-issued device (e.g., laptop, tablet)?

* Yes
* No

**Tech1b**. Which type of device is available for these students? *Select all that apply.* {Display if *Tech1a* = Yes}

* Laptop
* Tablet
* Other device, please specify: \_\_\_\_\_\_\_\_\_

**Tech1c**. During the school year, when can most students bring their device home? {Display if *Tech1a* = Yes}

* Students are **not allowed** to bring their device home
* Only when they have assignments that require the device
* On school days
* On school days and weekends

**Tech2a**. Does your school or district have a policy on students’ cell phone usage during school hours?

* Yes
* No

**Tech2b**. Which of the following best describes your school’s or district’s policy on students **having** their cell phones in the classroom? {Display if *Techa2* = Yes}

* Students can have their cell phones during all classes
* Each teacher decides whether students can have their cell phone during class
* Students cannot have their cell phones during any classes

**Tech2c**. Please indicate whether students are allowed, based on your school’s or district’s policy, to **use** their cell phones in the following situations. {Display if *Tech2a* = Yes}

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Not applicable – this is not a situation my students can experience |
| During meal periods (i.e., breakfast, lunch) |  |  |  |
| During “free periods” |  |  |  |
| Between periods |  |  |  |
| During extracurricular activities |  |  |  |
| Outside of school buildings while still on school grounds |  |  |  |
| Other situations not listed above |  |  |  |

**Tech3a.** Does your cell phone policy also apply to smartwatches? {Display if *Tech2a* = Yes}

* Yes, the same policy applies to smartwatches and cell phones
* No, smartwatches have a separate policy
* No, we have no policy around smartwatches

**Tech3b.** In general, how does the policy differ between smartwatches and cell phones? {Display if *Tech3a* = “… separate policy”}

* The policies around smartwatches are **more** restrictive than they are for cell phones
* The rules around smartwatches are **less** restrictive than they are for cell phones

**Tech3c**. Does your school or district have a policy on students’ smartwatch usage during school hours? {Display if *Tech2a* = “No”}

* Yes
* No

**Tech4**. Please indicate how students at your school have been impacted by cell phone use in the following areas.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Negatively | No impact | Positively |  |
| Academic performance |  |  |  |  |
| Mental health (socioemotional health) |  |  |  |  |
| Attention span |  |  |  |  |

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

*Please include standalone digital literacy courses or training, as well as the integration of digital literacy into other subject areas.*

*Digital literacy refers to being able to use technology to find, evaluate, organize, create, and communicate information.*

* Yes
* No

**DL1b**. Is this training at your school part of a formal or structured digital literacy curriculum? {Display if *DL1* = Yes}

* Yes
* No

**DL6**. Which grade levels in your school are offered digital literacy instruction? {Display if *DL1* = Yes}

|  |  |  |
| --- | --- | --- |
| { Rows display based on responses to *Grades*} | Yes | No |
| Kindergarten |  |  |
| 1st |  |  |
| 2nd |  |  |
| 3rd |  |  |
| 4th |  |  |
| 5th |  |  |
| 6th |  |  |
| 7th |  |  |
| 8th |  |  |
| 9th |  |  |
| 10th |  |  |
| 11th |  |  |
| 12th |  |  |

**DL4**. How do your students receive digital literacy instruction? *Select all that apply*. {Display if *DL1* = Yes}

* + In library or media lab (i.e., taught by a librarian, media specialist, computer teacher)
  + Embedded in core subject(s) (i.e., taught as part of core subjects, such as English language arts, social studies, math, and/or science)
  + Embedded in elective subject(s)
  + Embedded in health, wellness, and/or SEL (i.e., is integrated into social-emotional learning, health and wellness, character education, and/or sex education)
  + In after-school program(s)
  + Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DL5**. Please indicate whether your digital literacy instruction aligned to any of the following sets of standards. {Display if *DL1* = Yes}

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| State standards |  |  |
| District standards |  |  |
| Other set of standards |  |  |

**DL5open**. Please identify the other set of digital literacy standards. {Display if *DL5* = Yes to “other…”}

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

* Yes
* No
* Don’t Know

**Tech\_more**. We’d like to learn more about your school’s experiences with **artificial intelligence, digital literacy, and students’ cell phone use**. In the space below please share any other information you would like us to know on this topic.

*This item is optional.*

# School Pulse Panel January 2025 Survey

## School Demographics | Introduction

{Do not display section if answered in a previous month}

**SchType**. Which of the following best describes this school?

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

## College and Career Readiness

{Display AdvC1a and CCP items if 9th grade or above is selected in *Grades*}

**AdvC1a.** Does your school offer Advanced Placement (AP), Pre-Advanced Placement (Pre-AP), International Baccalaureate (IB), or dual enrollment courses?

* Yes
* No
* This type of coursework is not applicable to students at my school

**AdvC1b**. How many advanced courses are taught in your school? {Display if *AdvC1a* = Yes}

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

**AdvC1c**. To the best of your knowledge, what percentage of students at your school are enrolled in advanced coursework?

|  |  |  |
| --- | --- | --- |
| {Display based on > 0 responses to *AdvC1b}* | Percentage of students | Don’t know |
| Advanced Placement (AP) |  |  |
| Pre-Advanced Placement (Pre-AP) |  |  |
| International Baccalaureate (IB) |  |  |
| Dual enrollment |  |  |

**CCP1**. 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 opportunities |  |  |  |
| Workforce credential training program (postsecondary recognized credential) |  |  |  |
| Personalized career and academic plan |  |  |  |
| Career and technical education (CTE) program |  |  |  |

**CCP2**. Does your school have a college and career readiness plan or goal?

* Yes
* No
* Don’t know

**CCP3**. Using the responses below, fill in the sentence that best describes your school: “My school does a(n) \_\_\_\_\_\_\_\_\_\_\_\_ job preparing students for college.”

* Poor
* Fair
* Good
* Very good
* Excellent
* Not applicable

**CCP4**. Using the responses below, fill in the sentence that best describes your school: “My school does a(n) \_\_\_\_\_\_\_\_\_\_\_\_ job preparing students for the workforce.”

* Poor
* Fair
* Good
* Very good
* Excellent
* Not applicable

**CCP5**. 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

**CCP6.** 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

**CCP7.** 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
* Don’t know
* Not applicable

**CCP8.** Does your school offer career and technical education?

* Yes
* No
* Don’t know
* Not applicable

**CCP9.** 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

**CCP10**. Does your school partner with any of the following for your CTE program? *Select all that apply.* {Display if *CCP1*, “CTE program ‘Percentage of students’” > 0}

* Other school districts or local education agencies
* Technical or magnet schools within our school district
* Community or technical colleges
* Four-year college or university
* Other, please specify: \_\_\_\_\_\_\_\_\_\_

**CCP\_more**. We’d like to learn more about schools’experiences with **college and career readiness.** In the space below, please share any information you would like us to know on this topic.

*This item is optional.*

## Sources of Information

**SOI1a**. When deciding on whether to write, implement, or revise a program or policy at your school, how often do you use the following sources of information?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Never | Sometimes | Often | Always |
| Education-focused peer reviewed journal articles or empirical studies |  |  |  |  |
| Education-focused news articles or blogs |  |  |  |  |
| Education-focused podcasts or other digital media |  |  |  |  |
| Data from your school, district, institution, and/or state |  |  |  |  |
| Your own experience and expertise |  |  |  |  |
| Colleague input, feedback, or consultation |  |  |  |  |
| Other schools or districts |  |  |  |  |
| Feedback and concerns from students |  |  |  |  |
| Feedback and concerns from parents or community members |  |  |  |  |
| Professional organizations or technical assistance resources |  |  |  |  |
| Other source of information |  |  |  |  |

**SOI1a\_open.** What other source of information do you use? {Display if *SOI1a* “*Other*” ≠ Never}

**SOI1b**. Please identify the top three most important sources of information you rely on when deciding on whether to write, implement, or revise a program or policy at your school.

Education-focused peer reviewed journal articles or empirical studies

Education-focused news articles or blogs

Education-focused podcasts or other digital media

Data from your school, district, institution, and/or state

Your own experience and expertise

Colleague input, feedback, or consultation

Other schools or districts

Feedback and concerns from students

Feedback and concerns from parents or community members

Professional organizations or technical assistance resources

Other source of information

\_\_\_\_\_\_\_ 1st most important

\_\_\_\_\_\_\_ 2nd most important

\_\_\_\_\_\_\_ 3rd most important

**SOI2**. To what extent do you agree or disagree with the following statements that describe the current environment for you and the leadership team in your school?

*Research evidence is the result of empirical studies, which may be found in reports, journal articles, and research summaries, or embedded in practice tools and assessments.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Moderately disagree | Neither agree nor disagree | Moderately agree | Strongly agree |
| We have sufficient access to research evidence |  |  |  |  |  |
| We have adequate time to access and review research evidence |  |  |  |  |  |
| There are formal processes to help us engage critically with different information sources |  |  |  |  |  |
| There are processes in place to support collaborative learning |  |  |  |  |  |

**SOI3**. Please rate your confidence level for the following statements: *“When deciding about a program or policy at my school, I feel confident that I have the knowledge and skills to…”*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Not at all confident | Somewhat confident | Mostly confident | Very confident |
| find research evidence to inform practice, policy, or program development |  |  |  |  |
| evaluate the quality of research |  |  |  |  |
| interpret the results of research |  |  |  |  |
| apply research evidence to practice, policy, or program development |  |  |  |  |
| design evaluations of practices, policies, or programs |  |  |  |  |
| partner with others to generate research evidence |  |  |  |  |

**SOI\_more**. We’d like to learn more about **the information schools use** to inform policies and practices at their school**.** In the space below, please share any information you would like us to know on this topic.

*This item is optional.*

## Family Engagement

**ParEng5.**Please indicate how frequently your school uses the following to engage with families during this school year.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Daily | Weekly | Twice a month | Monthly | Less than monthly | Never |
| Open house/back to school nights |  |  |  |  |  |  |
| Parent-teacher conferences |  |  |  |  |  |  |
| Collaboration with parent organizations (e.g., PTA/ PTO/ PTSA, engagement-focused groups) |  |  |  |  |  |  |
| Contact with individual families (e.g., through phone calls, text messages, emails, a dedicated app) |  |  |  |  |  |  |
| School-wide communication with families (e.g., newsletters/emails, social media posts, website updates) |  |  |  |  |  |  |
| Family input survey(s) from the school or district |  |  |  |  |  |  |
| Events held **during** school hours that families can attend |  |  |  |  |  |  |
| Events held **outside** school hours that families can attend |  |  |  |  |  |  |
| Provide opportunities for families to volunteer at the school |  |  |  |  |  |  |
| Other method or event not mentioned above |  |  |  |  |  |  |

**ParEng10.** Does your school require families to participate in a certain number of hours/events during this school year?

* Yes
* No

**ParEng2**. Do you have a parent/family engagement specialist or outreach worker at your school? This may be a school or district employee or an employee designated to serve in this role.

* Yes
* No

**ParEng2b**. Approximately how much time does this person spend working on duties associated with this position at your school? {Display if *ParEng2* = Yes}

* This is their full-time job at our school
* About ¾ of their time
* About ½ of their time
* About ¼ of their time
* Less than ¼ of their time

**ParEng6**. Approximately what percentage of students at your school have families you would characterize as “actively engaged” with the school?

\_\_\_\_\_ percent of students with actively engaged families

**ParEng7**. Overall, how easy or difficult is it to engage your students’ families with your school?

* Very difficult
* Somewhat difficult
* Somewhat easy
* Very easy

**ParEng8**. How responsive are families to your school’s efforts to increase their involvement with the student’s education?

* Not at all responsive
* Somewhat responsive
* Mostly responsive
* Completely responsive

**ParEng9**. To what extent, if any, do the following factors limit your school’s efforts to engage families?

|  |  |  |  |
| --- | --- | --- | --- |
|  | Limits in a major way | Limits in a minor way | Does not limit |
| Lack of interest from families |  |  |  |
| Family constraints (e.g., work schedule conflicts, transportation, childcare) |  |  |  |
| Lack of staff that can focus on family engagement |  |  |  |
| Lack of or inadequate funding to support family engagement |  |  |  |
| Language barriers between families and your school |  |  |  |

**ParEng\_more**. We’d like to learn more about schools’ **strategies to engage parents.** In the space below, please share any information you would like us to know on this topic.

*This item is optional.*

# School Pulse Panel February 2025 Survey

## **Concerns**

**ParCon24 1-1**. How many **parents/guardians**, if any, have expressed concerns about the following during the 2024-25 school year?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | I have not heard this concern expressed by parents/guardians | Only one or two parents/guardians have expressed this concern | Several parents/guardians have expressed this concern | Many parents/guardians have expressed this concern |
| The school’s ability to meet their child’s academic needs |  |  |  |  |
| The school’s ability to meet their child’s developmental needs (e.g., speech development, behavioral development) |  |  |  |  |
| Threats or acts of violence by other students in the school |  |  |  |  |
| Bullying and/or cyberbullying |  |  |  |  |
| Their child’s mental health |  |  |  |  |
| Reliable transportation to and from school |  |  |  |  |
| The availability of extra-curricular activities for their children |  |  |  |  |
| The availability of academic assistance and/or enrichment offerings **outside** of regular school hours (e.g., after-school programs, summer programs) |  |  |  |  |
| The availability of academic assistance offerings **during** regular school hours (e.g., tutoring, pull-out services) |  |  |  |  |
| Issues related to staffing shortages (e.g., increased class sizes, disruptions or reductions in student services) |  |  |  |  |
| Quality of communication from the school |  |  |  |  |
| School curriculum |  |  |  |  |

**Confilter. 1-2** Are you the principal, assistant/vice principal, or some other similar position, at your school?

* Yes, principal or similar position
* Yes, assistant/vice principal or similar position
* No, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AdmnCon24 1-3**. What level of concern do YOU have about the following issues during the 2024-25 school year? {Display if Confilter ≠ No}

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | No concern | Slightly concerned | Somewhat concerned | Moderately concerned | Extremely concerned |
| Students meeting academic standards |  |  |  |  |  |
| Students meeting developmental milestones (e.g., speech development, behavioral development) |  |  |  |  |  |
| Threats or acts of violence by students in the school |  |  |  |  |  |
| Bullying and/or cyberbullying |  |  |  |  |  |
| The mental health of STUDENTS at your school |  |  |  |  |  |
| Reliable transportation to and from school for students |  |  |  |  |  |
| The availability of extra-curricular activities for students |  |  |  |  |  |
| The availability of academic assistance and/or enrichment offerings **outside** of regular school hours (e.g., after-school programs, summer programs) |  |  |  |  |  |
| The availability of academic assistance offerings **during** regular school hours (e.g., tutoring, pull-out services) |  |  |  |  |  |
| Issues related to staffing shortages (e.g., increased class sizes, staff doing work outside their intended duties) |  |  |  |  |  |
| The mental health of TEACHERS or STAFF at your school |  |  |  |  |  |
| YOUR own mental health |  |  |  |  |  |
| The influence of individuals or groups outside of your school or district on school curriculum |  |  |  |  |  |

**Con24\_more 1-4.** We’d like to learn more about the concerns you have heard around your school during the 2024-25 school year. In the space below, please share any other information you would like us to know on this topic.

*This item is optional.*

## 

## **State Assessment Perceptions**

**SA\_math 3-1**. Does your school participate in state-mandated testing for mathematics?

* Yes
* No

**SA1 3-2**. To what extent do you agree or disagree with the following statements related to the main state-mandated **mathematics** test that your students will be given during the 2024-25 school year? {Display if SA\_math = Yes}

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Somewhat disagree | Neither agree nor disagree | Somewhat agree | Strongly agree | Don’t know |
| Results from state-mandated mathematics tests will provide useful data to inform classroom instruction |  |  |  |  |  |  |
| I support use of the current statewide tests to measure student mastery of state mathematics standards |  |  |  |  |  |  |
| The work we will do to prepare our students for the state-mandated mathematics test will take time away from other more important classroom work |  |  |  |  |  |  |
| The state-mandated mathematics test will not accurately measure the ability of students with IEPs |  |  |  |  |  |  |
| The state-mandated mathematics test will not accurately measure the ability of English Learner (EL/ELL/ESL) students |  |  |  |  |  |  |

**SA2 3-3**. What impact, if any, do you think the COVID-19 pandemic and its lingering effects will have on your students’ performance on state-mandated mathematics testing **this school year**? {Display if SA\_math = Yes}

* No negative impact
* Small negative impact
* Moderate negative impact
* Large negative impact
* Don’t know

**SA\_ELA 3-4**. Does your school participate in state-mandated testing for English language arts (ELA) and literacy?

* Yes
* No

**SA3 3-5**. To what extent do you agree or disagree with the following statements related to the main state-mandated **ELA/literacy** test that your students will be given during the 2024-25 school year? {Display if SA\_ELA = Yes}

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Somewhat disagree | Neither agree nor disagree | Somewhat agree | Strongly agree | Don’t know |
| Results from state-mandated ELA/literacy tests will provide useful data to inform classroom instruction |  |  |  |  |  |  |
| I support use of the current statewide tests to measure student mastery of state ELA/literacy standards |  |  |  |  |  |  |
| The work we will do to prepare our students for the state-mandated ELA/literacy test will take time away from other more important classroom work |  |  |  |  |  |  |
| The state-mandated ELA/literacy test will not accurately measure the ability of students with IEPs |  |  |  |  |  |  |
| The state-mandated ELA/literacy test will not accurately measure the ability of English Learner (EL/ELL/ESL) students |  |  |  |  |  |  |

**SA4 3-6**. What impact, if any, do you think the COVID-19 pandemic and its lingering effects will have on your students’ performance on state-mandated ELA/literacy testing **this school year**? {Display if SA\_ELA = Yes}

* No negative impact
* Small negative impact
* Moderate negative impact
* Large negative impact
* Don’t know

**SA5.** What challenges, if any, has your school had related to state-mandated testing? *Select all that apply.* {Display if *SA1* or *SA3* = “Yes”}

* Inadequate resources or materials for effective test preparation
* Insufficient materials or resources for testing
* Inadequate technology for testing
* Physical space constraints for administering tests
* Disruptions to students’ engagement in class or activities due to testing
* Disruptions to regular classes or activities due to staff covering testing
* Securing accommodations for students with diverse learning needs
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* We have not experienced any challenges related to state-mandated testing

**SA\_more 3-7**. We’d like to learn more about schools’ experiences with state assessments. In the space below, please share any other information you would like us to know on this topic. {Display if SA\_math OR SA\_ELA = Yes}

*This item is optional.*

## **Climate Impacts on Educational Operations**

**CI1**. Please indicate whether your school has enacted any of the following strategies designed to reduce greenhouse gas emissions during the 2024-25 school year.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t know |
| Energy efficiency measures (e.g., changing to more efficient fixtures or equipment) |  |  |  |
| On-site use of energy generated by renewable power (i.e., solar, wind, geothermal) |  |  |  |
| Purchase of off-site energy generated by renewable power (i.e., solar, wind, geothermal) |  |  |  |
| Transportation efficiency measures |  |  |  |
| Waste reduction, recycling, reuse, and/or composting |  |  |  |
| Other ways to reduce greenhouse gas emissions |  |  |  |

**CI1open.** Please identify the other ways to reduce greenhouse gas emissions that are used by your school. {Display if *CI1* = other}

**CI2a**. Does your school (or district) have a written strategic plan for greenhouse gas emissions reduction?

* Yes
* No
* Don’t know

**CI2b**. How familiar are you with your school or district’s plan for greenhouse gas emissions reduction? {Display if *CI2a* = Yes}

* Not at all familiar
* Slightly familiar
* Somewhat familiar
* Moderately familiar
* Extremely familiar

**CI3a**. Does your school have a designated staff person working on reducing greenhouse gas emissions?

*This role is sometimes referred to as a Sustainability Coordinator.*

* Yes
* No

**CI3b**. Approximately how much time does this person spend working on duties associated with this position at your school? {Display if *CI3a* = Yes}

* This is their full-time job at our school
* About ¾ of their time
* About ½ of their time
* About ¼ of their time
* Less than ¼ of their time

**CI4**. During the 2024-25 school year, has your school received requests from students or families to reduce greenhouse gas emissions?

* Yes
* No

**CI5**. Is environmental science offered as a standalone course at your school? {Display if Grades = 5th or above}

* Yes
* No

**CI6a**. Please indicate whether the following environmental topics are included in any curriculum or instruction at your school.

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Don’t know |
| Energy efficiency |  |  |  |
| Renewable energy |  |  |  |
| Transportation |  |  |  |
| Waste reduction, recycling, reuse, and/or composting |  |  |  |
| Grounds and the outdoors |  |  |  |
| Atmospheric science |  |  |  |
| Earth systems |  |  |  |
| Food systems |  |  |  |
| Conservation education |  |  |  |
| Climate change |  |  |  |
| Careers in environmental science or related fields (i.e., green and blue careers) |  |  |  |

**CI7.** Does your school conduct any environmentally focused civic engagement activities?

*These activities could include things like service learning, community service, or action projects.*

* Yes
* No

**CI9**. Does your school have an environmental education graduation requirement? {Display if *Grades* = 11th or 12th}

* Yes
* No
* Not applicable – we do not graduate students

**CI10**. Have any teachers at your school received professional development on environmental education?

* Yes
* No

**CI11a.** Please indicate whether your school has experienced any of the following severe environmental or weather events since February 2024.

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Extreme heat |  |  |
| Extreme cold |  |  |
| Extreme storms (e.g., hurricane, tornado) |  |  |
| Poor air quality due to an environmental event |  |  |
| Other severe environmental or weather events |  |  |

**CI11aopen.** Please identify the other severe environmental or weather events your school has experienced since February 2024. {Display if *CI11a* = “Yes” to “Other”}

**CI11heat**. Please indicate if **extreme heat** has resulted in any of the following disruptions to learning since February 2024. {Display if any of *CI11a* “extreme heat” = “Yes”}

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Loss of at least one day but less than 1 school week of instructional hours |  |  |
| Loss of more than 1 school week of instructional hours |  |  |
| Reduction in classroom space due to closed classrooms |  |  |
| Increase in student absenteeism |  |  |
| Increase in teacher or staff absenteeism |  |  |
|  |  |  |

**CI11cold**. Please indicate if **extreme cold** has resulted in any of the following disruptions to learning since February 2024. {Display if any of *CI11a “extreme cold”* = “Yes”}

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Loss of at least one day but less than 1 school week of instructional hours |  |  |
| Loss of more than 1 school week of instructional hours |  |  |
| Reduction in classroom space due to closed classrooms |  |  |
| Increase in student absenteeism |  |  |
| Increase in teacher or staff absenteeism |  |  |

**CI11storm.** Please indicate if **extreme storms** have resulted in any of the following disruptions to learning since February 2024. {Display if any of *CI11a “extreme storms”* = “Yes”}

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Loss of at least one day but less than 1 school week of instructional hours |  |  |
| Loss of more than 1 school week of instructional hours |  |  |
| Reduction in classroom space due to closed classrooms |  |  |
| Increase in student absenteeism |  |  |
| Increase in teacher or staff absenteeism |  |  |

**CI11aq.** Please indicate if **poor air quality due to an environmental event** has resulted in any of the following disruptions to learning since February 2024. {Display if any of *CI11a “poor air quality due to an environmental event”* = “Yes”}

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Loss of at least one day but less than 1 school week of instructional hours |  |  |
| Loss of more than 1 school week of instructional hours |  |  |
| Reduction in classroom space due to closed classrooms |  |  |
| Increase in student absenteeism |  |  |
| Increase in teacher or staff absenteeism |  |  |

**CI11c**. Please indicate whether any of the following events at your school have experienced the following issues due to severe weather since February 2024. {Display if any of *CI11a* = Yes}

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Flooding in a school building |  |  |
| Flooding on school grounds |  |  |
| Wildfires that reach school grounds |  |  |
| Loss of water in a school building |  |  |
| Loss of electrical power in a school building for half a day or more |  |  |
| Equipment malfunctioning or replacements needed |  |  |
| School building closures |  |  |
| Unsafe/unhealthy indoor and outdoor environmental quality |  |  |
| Other issues |  |  |

**CI11copen**. Please identify the other issues. {Display if *CI11c* = “Yes” to “Other”}

# School Pulse Panel March 2025 Survey

## Mental Health and Well-Being

**MH\_ly 1-1a.** Did you work at [SCHOOL NAME] prior to this school year?

* Yes
* No

*The following items focus on mental health services provided to* ***STUDENTS during the 2024-25 school year****.*

**MH1 1-1b**. During the 2024-25 school year, which of the following, if any, school-based mental health services have been provided to STUDENTS? *Select all that apply.*

* 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 and students via video or phone at school)
* 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 2024-25 school year

**MH22 1-2.** Approximately what percentage of students at your school utilize **school-based** mental health services? {Display if *MH1* ≠ “We have not provided any…”}

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

**MH2 1-3**. Who provides the formal mental health services offered at your school? *Select all that apply.* {Display if *MH1* ≠ “We have not provided any…”}

* 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: \_\_\_\_\_\_\_\_\_\_

**MH23a 1-4a**. Did your school implement any changes to the daily or yearly academic calendar in order to mitigate potential mental health issues for students and staff during the COVID-19 pandemic (school years 2020-21 through 2022-23)? {Display if *MHly* = Yes}

*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

**MH23b 1-4b**. For the 2024-25 school year, are you still implementing any of these actions? {Display if *MH23a* = Yes}

* Yes, these changes have become part of our regular daily or yearly academic calendar
* Yes, but we have reduced the amount of time or number of days dedicated to mitigating mental health concerns
* No, our daily or yearly academic calendar has reverted back to the pre-COVID era

**MH24 1-5**. During the 2024-25 school year, has your school done (or will it do) any of the following to support students’ social/emotional/mental well-being? *Select all that apply.*

* Created new positions to support student social/emotional/mental well-being
* Encouraged existing staff to support student social/emotional/mental well-being
* Added student classes to support social/emotional/mental well-being
* Created or expanded a program to support student social/emotional/mental well-being
* Offered guest speakers to support student social/emotional/mental well-being
* Offered professional development to train teachers to support student social/emotional/mental well-being
* Held assemblies to support student social/emotional/mental well-being
* Created community events and partnerships to support student social/emotional/mental well-being
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We have not implemented any practices or procedures designed to support student social/emotional/mental well-being

**MH12a 1-6**. To what extent do you agree or disagree 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

**MH12b 1-7**. 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*.

* 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: \_\_\_\_\_\_\_\_\_\_\_\_
* My school has not experienced any limitations to effectively providing mental health services to all students in need

**MH25 1-8**. For the 2024-25 school year, which of the following sources of funding, if any, have been used to support mental health services for students? *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

**MH26 1-9.** In which of the following areas related to accessing/utilizing federal funds for student support services, if any, has your school experienced challenges? *Select all that apply.*{display if *MH25*= “federal grants or…”}

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

*The following items focus on mental health services provided to* ***STUDENTS compared to last school year (2023-24)****.*

**MH27 1-10**. Compared to last school year (2023-24), how has the percentage of students who have **sought** school-based mental health services changed? {Display if *MHly* = Yes}

* It has decreased a lot
* It has decreased a little
* It has remained the same
* It has increased a little
* It has increased a lot

**MH28 1-11**. Compared to last school year (2023-24), how has the amount of school-based mental health services **provided** to students changed? {Display if *MHly* = Yes}

* It has decreased a lot
* It has decreased a little
* It has remained the same
* It has increased a little
* It has increased a lot

**MH29 1-12**. Compared to last school year (2023-24), how has the percentage of staff expressing concerns with students exhibiting depression, anxiety, trauma, or emotional dysregulation/disturbance changed? {Display if *MHly* = Yes}

* It has decreased a lot
* It has decreased a little
* It has remained the same
* It has increased a little
* It has increased a lot

*The following items focus on mental health services provided to* ***STAFF during the 2024-25 school year****.*

**MH30 1-13**. During the 2024-25 school year, which of the following, if any, mental health services are available to **staff**? *Select all that apply.*

* Group-based or peer support interventions
* Referrals to mental health services outside of school
* Mental health-related professional development
* Regular staff self-assessments
* Proactive outreach to staff members
* Employee assistance programs (EAPs) that have a mental health component
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* There are no mental health services available for staff

**MH31 1-14**. For the 2024-25 school year, which of the following sources of funding, if any, have been used to support mental health services for staff? *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 available to* ***STAFF compared to the last school year (2023-24)****.*

**MH32 1-15**. Compared to last school year (2023-24), how has the amount of mental health services available to staff changed? {Display if *MHly* = Yes}

* It has decreased a lot
* It has decreased a little
* It has remained the same
* It has increased a little
* It has increased a lot

**MH33 1-16**. Compared to last school year (2023-24), how has the percentage of staff expressing concerns with themselves or their colleagues exhibiting depression, anxiety, trauma, or emotional dysregulation/disturbance changed? {Display if *MHly* = Yes}

* It has decreased a lot
* It has decreased a little
* It has remained the same
* It has increased a little
* It has increased a lot

**MH\_more 1-17**. We’d like to learn more about schools’ experiences with **student and staff mental health during the 2024-25 school year**. In the space below, please share any other information you would like us to know on this topic.

*This item is optional.*

## Drug Overdose Prevention

**DOP1 2-1**. Does your school or district provide formal training to teachers and staff on how to recognize the signs of a potential drug overdose?

* Yes
* No

**DOP2 2-2**. During this school year, please indicate whether your school included (or will include) information about the dangers of fentanyl in the following:

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Classroom instruction |  |  |
| Assemblies/guest speakers held during school hours |  |  |
| Events for students held outside of school hours |  |  |
| Events for families held outside of school hours |  |  |
| Other |  |  |

**DOP2\_open 2-3**. Please describe the other ways that information about the dangers of fentanyl have been shared. {Display if *DOP2\_5* “Other” = Yes}

**DOP3 2-4**. Is naloxone (Narcan) kept at your school?

*Naloxone is a medication that can reverse an overdose from opioids—including heroin, fentanyl, and prescription opioid medications—when given in time.*

* Yes
* No

**DOP4**. Are all, some, or none of the following at your school trained to administer naloxone?

|  |  |  |  |
| --- | --- | --- | --- |
|  | All | Only some | None |
| School nurses or nurse’s aides |  |  |  |
| Mental health professionals |  |  |  |
| School security personnel (i.e., School Resource Officers [SRO], sworn law enforcement officers, or other security officers) |  |  |  |
| Classroom teachers |  |  |  |
| Non-teaching staff (e.g., tutors, coaches, support staff) |  |  |  |
| Administrative staff |  |  |  |
| Students |  |  |  |
| Other |  |  |  |

**DOP4\_open.** Please tell us the other people at your school that are trained to administer naloxone.

**DOP5 2- 7**. During this school year, has anyone from your school administered naloxone on school grounds or at school-sponsored events?

* Yes
* No

## School and District Vaccine Requirements

**Vac1 3-1**. When does your school or district collect information from families about students’ vaccination status? *Select all that apply.*

* During initial enrollment or registration
* At the start of each academic year
* After the student reaches the age of a required immunization
* At regular intervals throughout the school year
* Before specific events, such as school field trips and sports activities
* As needed, such as when health concerns or outbreaks occur
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Not applicable, we do not collect this information

**Vac2 3-2**.

Which of the following are acceptable ways for families to report students’ vaccination status to your school? *Select all that apply.* {Display if *Vac1* ≠ not applicable}

* Self-report from families
* Family-held vaccination/immunization record card
* Unsigned report from a health care provider
* Signed report from a health care provider
* Direct communication with healthcare providers
* Electronic health records integrated with school systems (e.g., Immunization Information System)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Vac3a**. Who at your school is responsible for determining if students have documentation showing that they have received all required vaccinations? *Select all that apply.* {Display if *Vac1* ≠ not applicable}

* School nurse or nurse’s aide
* Principal
* Administrative staff other than the principal
* School counselor
* District-level staff
* Local or state health officials
* School volunteer
* Other staff, please specify: \_\_\_\_\_\_\_\_\_

**Vac3b**. Who at your school is responsible for following up with students without documentation showing that they have received all required vaccinations? *Select all that apply.* {Display if *Vac1* ≠ not applicable}

* School nurse or nurse’s aide
* Principal
* Administrative staff other than the principal
* School counselor
* District-level staff
* Local or state health officials
* School volunteer
* Other staff, please specify: \_\_\_\_\_\_\_\_\_

**Vac4 3-4**. What does your school do if a student has not provided documentation that they have received all required vaccinations? *Select all that apply.*

* Notify families about the vaccination requirements
* Provide information on where to obtain vaccinations
* Student is given a “grace period” of a set number of days to provide complete documentation
* Student is offered an exemption from school vaccination requirements
* Student is allowed to attend school with proof of a vaccine appointment
* Restrict the student’s participation in certain activities or events
* Exclude the student from school until they provide documentation that they have received all required vaccinations
* Implement a formal disciplinary review process
* Report the situation to local health authorities
* Something else, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Vac5a**. How does your school or district communicate to families about required vaccines? *Select all that apply.*

* Direct communication with families (e.g., emails, phone calls)
* Newsletters or other handouts
* Through on-site vaccination clinics or services
* Information sessions with healthcare professionals
* School meetings or events (e.g., parent-teacher conferences, open house, back-to-school night)
* Dedicated campaigns (e.g., posters around the school)
* School website and social media
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We do not communicate with families about required vaccines

**Vac5b.** What information does your school or district communicate to families about vaccines? *Select all that apply.* {Display if *Vac5a* ≠ “We do not…”}

* Vaccination requirements
* Vaccination exemption procedures
* Recommended vaccination schedules for vaccines that are not required for school entry
* Vaccination information from the Centers for Disease Control and Prevention (CDC)
* Vaccination information from local or state health departments
* Information about potential vaccine providers
* Vaccination events
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_

**Vac6a 3-6**. How easy or difficult has it been for you to get **all** students at your school to **receive** their required vaccinations for the 2024-25 school year?

* Very easy
* Somewhat easy
* Somewhat difficult
* Very difficult

**Vac6b 3-7.** What barriers has your school faced in getting all students at your school to **receive** their required vaccinations? *Select all that apply.*

* Lack of access to vaccination services or clinics
* Insufficient communication with parents or guardians
* Limited school resources or funding for vaccination programs
* Inadequate tracking and follow-up systems
* Language or cultural barriers affecting vaccination compliance
* Families concerned about vaccine safety
* Refusal from families to vaccinate their child(ren) for religious or philosophical reasons
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We have not faced any barriers getting all students to receive their required vaccinations

**Vac7a**. How easy or difficult has it been for your school to get required vaccination status **documentation** for **all** students at your school?

* Very easy
* Somewhat easy
* Somewhat difficult
* Very difficult

**Vac7b 3-8**. What barriers, if any, has your school experienced when collecting required vaccination records for all students? *Select all that apply.*

* Insufficient communication with parents or guardians
* Inadequate student tracking and follow-up systems
* Limited school resources or funding for vaccination programs
* Reluctance from families to share medical data with schools
* Family language or cultural barriers affecting vaccination documentation requirements
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We have not faced any barriers getting required vaccination records for all students

**Vac8 3-10**. Does your school or district provide families with information about eligibility or enrollment in the following programs?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Vaccines for Children (VFC) Program |  |  |
| Medicaid |  |  |
| Children’s Health Insurance Program (CHIP) |  |  |
| Free or reduced cost vaccinations for students |  |  |

**Vac9a**. Does your school or district have partnerships with any of the following public health agencies to promote or provide vaccinations for your students? *Select all that apply.*

* Local health department
* State health department
* Federal health agencies (e.g., Center for Disease Control, Department of Health and Human Services)
* Community health clinics
* Non-profit health organizations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_
* We do not have partnerships with any public health agency to promote or provide vaccinations to our students

**Vac9b**. What kind of support does your school receive from your partnerships with public health agencies? {Display if *Vac9a* ≠ “We do not…”}

* Informational resources to share with families
* In-person education at school events
* School-located vaccination events
* Vaccination events at other community locations
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Vac10a.** During this school year, has your school or district held any vaccination events?

* Yes, at our school
* Yes, at a location other than our school
* No

**Vac10b.** Which vaccines were offered at these events? *Select all that apply.* {Display if *Vac10a* ≠ No}

* Measles, mumps, and rubella (MMR)
* Diptheria-Tetanus-Pertussis (DTaP)
* Polio
* Varicella
* Influenza
* COVID-19
* Don’t know

**Vac11 3-12**. To what extent do you agree or disagree with the following statement: “My school should be responsible for promoting vaccinations to all of our students.”?

* Strongly disagree
* Moderately disagree
* Neither agree nor disagree
* Moderately agree
* Strongly agree

**Vac12 3-13**. To what extent do you agree or disagree with the following statement: “My school should be responsible for promoting preventative health activities other than vaccinations (e.g., annual well visits, health screenings, healthy eating, physical activity, adequate sleep) to our students.”?

* Strongly disagree
* Disagree
* Neither agree nor disagree
* Agree
* Strongly agree

# School Pulse Panel April 2025 Survey

## Transportation

{Display section if *Inper\_Resp* or *Inper* = Yes}

**Tran\_gate .** Please indicate which of the following modes of transportation are available for your students to travel to and from school.

|  |  |  |
| --- | --- | --- |
|  | Yes, this mode of transportation is available to our students | No, this mode of transportation is not available to our students |
| By school bus |  |  |
| By public transportation (e.g., subway, metro, city bus) |  |  |
| By bike, scooter, skateboard, or other similar means |  |  |
| By walking to or from school |  |  |
| By being dropped off/picked up by car |  |  |
| By driving their own car |  |  |
| Other |  |  |

**Tran1**. On a typical school day, approximately what percentage of your students travel to and from school using the following modes of transportation? {Display responses based on Tran\_gate = Yes}

*If a student takes multiple modes of transportation during their commute, count only the mode of transportation they spend the most time on 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 must add up to 100%*

* By school bus \_\_\_\_\_\_%
* By public transportation (e.g., subway, metro, city bus) \_\_\_\_\_\_%
* By bike, scooter, skateboard, or other similar means \_\_\_\_\_\_%
* By walking to school \_\_\_\_\_\_%
* By being dropped off/picked up by car \_\_\_\_\_\_%
* By driving their own car \_\_\_\_\_\_%
* Other \_\_\_\_\_\_%

**Tran2**. Are there sidewalks on the streets immediately surrounding your school?

* Yes, on all streets
* Yes, on some streets
* No

**Tran3**. Are there school zones in the area immediately surrounding your school?

* Yes
* No

**Tran4a.** Is there a crossing guard(s) working on the streets immediately surrounding your school?

* Yes
* No

**Tran4b.** When is there a crossing guard(s) available to assist students? {Display if *Tran4a* = Yes}

* Every day before AND after school
* Every day only before school
* Every day only after school
* Some days before AND after school
* Some days only before school
* Some days only after school
* Other, please specify: \_\_\_\_\_\_\_\_\_

**Tran11a**. Is free or subsidized public transportation offered to students? {Display if *Tran\_gate* = By public transportation}

* Yes, to all students
* Yes, to some students
* No

**Tran11b**. Which of the following sources of funding have been used to provide free or subsidized public transportation to students? *Select all that apply.* {Display if *Tran11a* ≠ No}

* Federal grants or other federal programs
* State grants or other state programs
* City, county or other local grants or other city, county, or local programs
* District or school financial funding
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_
* None of the above
* Don’t know

**Tran5\_v2.** Which of the following traffic calming measures, if any, immediately surround your school? *Select all that apply*.

*Traffic calming measures are intended to encourage drivers to reduce speed.*

|  |  |
| --- | --- |
| ○Speed humps/tables |  |
| ○Speed safety cameras |  |
| ○Raised intersection crossings or other [crosswalk visibility enhancements](https://highways.dot.gov/safety/proven-safety-countermeasures/crosswalk-visibility-enhancements) |  |
| ○Mid-block crossings with [pedestrian hybrid beacons](https://highways.dot.gov/safety/proven-safety-countermeasures/pedestrian-hybrid-beacons) or [rapid rectangular flashing beacons](https://highways.dot.gov/safety/proven-safety-countermeasures/rectangular-rapid-flashing-beacons-rrfb) |  |
| ○Mid-block crossings without [pedestrian hybrid beacons](https://highways.dot.gov/safety/proven-safety-countermeasures/pedestrian-hybrid-beacons) or [rapid rectangular flashing beacons](https://highways.dot.gov/safety/proven-safety-countermeasures/rectangular-rapid-flashing-beacons-rrfb) |  |
| ○Curb extensions |  |
| ○Chicanes (diversions or shifts in vehicle travel lanes in order to reduce vehicle speeds) |  |
| ○Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| ○There are no traffic calming measures immediately surrounding our school |  |

**Tran6\_v2.** What, if any, types of bike infrastructure immediately surround your school? *Select all that apply*.

|  |  |
| --- | --- |
| ○Sharrow (painted lane marking indicating that bicycles and vehicles share a travel lane) |  |
| ○Bike Lane with a painted stripe |  |
| ○Buffered Bike Lane (i.e., painted buffer, bollard buffer) |  |
| ○ Protected Bike Lane (i.e., median/curb separated, parking separating car and bike lanes) |  |
| ○ Shared use path, off-street Bike Lane, or other trail |  |
| ○Raised/grade separated intersection crossings |  |
| ○ Bike light (time separated crossing) |  |
| ○Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| ○We have no bike infrastructure surrounding our school |  |

**Tran7a\_v2**. Which of the following bicycle parking types are available on your school grounds? *Select all that apply*.

* Bicycle racks
* Bicycle lockers
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Bicycle parking is not available on school grounds

**Tran7b**. Is the bicycle parking at your school adequate to accommodate the number of people who bike to your school? {Display if *Tran7a* = Yes}

* Yes
* No

**Tran7c.** Which of the following types of bicycle racks are available at your school? *Select all that apply.* {Display if *Tran7a\_v2* = Bicycle racks}

* Bicycle racks that are mounted and hold the bicycle firmly
* Bicycle racks that do not adequately secure the bicycle (e.g., bicycle racks that are not mounted, racks that do not allow bicycle locks, etc.)
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Tran8.** Please indicate whether PARENTS/GUARDIANS have reported the following as barriers to their children walking, biking, or using other non-automotive means to commute to school.

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| 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’s age |  |  |
| Other, please specify: \_\_\_\_\_\_\_ |  |  |

**Tran9.** To what extent do you agree or disagree with the following statement: “Traffic patterns around my school pose a threat to my students’ physical safety while commuting to school.”

* Strongly disagree
* Moderately disagree
* Neither agree nor disagree
* Moderately agree
* Strongly agree

**Tran10.** To what extent do you agree or disagree with the following statement: “Crime around my school poses a threat to my students’ physical safety while commuting to school.”

* Strongly disagree
* Moderately disagree
* Neither agree nor disagree
* Moderately agree
* Strongly agree

**Tran13**. What is the furthest distance students travel to your school?

* Less than 1 mile
* 1 to less than 5 miles
* 5 to less than 20 miles
* 20 miles or more

**Tran14**. To what extent do you agree or disagree with the following statement: “If the areas around my school had safer walking or biking infrastructure, more of my students would walk or bike to school.”

*This infrastructure may include improved sidewalks, separated bicycle lanes, or additional traffic calming measures.*

* Strongly disagree
* Moderately disagree
* Neither agree nor disagree
* Moderately agree
* Strongly agree

**Tran15**. Which of the following concerns have your students or their families expressed about traveling by school bus during the 2024-25 school year? *Select all that apply.* {Display if *Tran\_gate* = By school bus}

* Not available when needed
* Unreasonable travel times
* Unreliable
* Safety
* Accessibility or accommodations for students with disabilities
* Other, please specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* We have not heard any concerns about students traveling by school bus

**Tran16**. What level of concern do you have about the following risks to your students’ safety commuting to and from school?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | No concern | Slightly concerned | Somewhat concerned | Moderately concerned | Extremely concerned |
| Vehicle operating speeds on the roads surrounding your school |  |  |  |  |  |
| Reckless driving |  |  |  |  |  |
| Volume of traffic on roads surrounding your school |  |  |  |  |  |
| Number of lanes students cross to get to school |  |  |  |  |  |
| Visibility at crossing |  |  |  |  |  |
| Proximity of crossing to your school |  |  |  |  |  |
| Crime around the school |  |  |  |  |  |

**Tran17**. How familiar are you with the requirements listed in the *Elementary and Secondary Education Act* (ESEA) to support transportation for students living outside of their original district due to their **experiencing homelessness**?

* Not at all familiar
* Slightly familiar
* Moderately familiar
* Very familiar

**Tran18.** Does your school or district have a way of identifying students experiencing homelessness who are eligible for transportation provisions under ESEA?

* Yes
* No
* Don’t know

**Tran19**. How familiar are you with the requirements listed in ESEA to support transportation for students living outside of their original district due to their **being in foster care?**

* Not at all familiar
* Slightly familiar
* Moderately familiar
* Very familiar

**Tran20.** Does your school or district have a way of identifying students in foster care who are eligible for transportation provisions under ESEA

* Yes
* No
* Don’t know

**Tran21**. Does your school or district have a person or persons responsible for coordinating transportation for your students experiencing homelessness or foster care?

* Yes
* No
* Don’t know

**Tran1719\_open**. Please tell us what you know about the Elementary and Secondary Education Act (ESEA) requirements to support transportation for students living outside of their original district due to their experiencing homelessness or being in foster care? {Display if *Tran17*≠ Not at all familiar or if Tran19 ≠ Not at all familiar}

**Tran21\_open**. Tell us about the person or persons for coordinating transportation for your students experiencing homelessness or in foster care including their position and whether they coordinate for students experiencing homelessness, foster care, or both?

**Tran22.** Does your school or district coordinate with your local child welfare agency to ensure your student(s) in foster care remain in their school of origin if it is determined it is in the best interest of the student?

* Yes
* No – my school does not have students in foster care
* No – my school does have students in foster care, but the school or district does not coordinate with the local child welfare agency

**StaffVac\_tran**. Please enter the following information on staffing at your school.

*Please enter the number of staff and vacancies. Count each part-time position as 1. For example, if your have 3 full-time tutors and 2 part-time tutors, count this as 5 in the “Total number of positions at my school” column.*

*Please enter only numbers in the 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 |
| Transportation staff |  |  |  |  |

**HP6\_tran**. As of today, do you feel your school is understaffed in transportation staff?

{Display based on >0 responses in *StaffVac\_tran*}

* Yes
* No

## Housing Instability

**Hins1a**. Have YOU received training by your school or district to identify students experiencing homelessness?

* + Yes
  + No

**Hins1b**. Did all, some, or none of the following staff at your school receive training from your school or district to identify students experiencing homelessness?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | All | Only some | None | This position is not offered at my school |
| Other school administrators (excluding yourself) |  |  |  |  |
| Teachers |  |  |  |  |
| Guidance counselors |  |  |  |  |
| Homeless liaisons |  |  |  |  |
| Other Staff |  |  |  |  |

**Hins2**. How effective has the training you attended been at strengthening your school’s ability to serve students experiencing homelessness? {Display if *Hins1a* = yes}

* + Not at all effective
  + Slightly effective
  + Moderately Effective
  + Very Effective

**Hins3**. To what extent do you agree or disagree with the following statement: “My school is able to effectively identify students who may be experiencing homelessness.”?

* + Strongly disagree
  + Moderately disagree
  + Neither agree nor disagree
  + Moderately agree
  + Strongly agree

**Hins4**. Compared to last school year (2023-24), how has the percentage of students at your school who are experiencing homelessness changed?

* It has decreased a lot
* It has decreased a little
* It has remained the same
* It has increased a little
* It has increased a lot
* Not applicable – my school did not have any students experiencing homelessness this year or last

## **School Preparedness and Safety Procedures**

**Prep1 2-1.** How often does your school update its emergency operations plan (EOP)?

* Never
* Only after an emergency occurs
* Every few years
* Annually
* Twice a year
* More than twice a year

**Prep2 2-2.** How often does your school collaborate with local public/private health agencies to evaluate the school's emergency prevention measures?

* Never
* Only after an emergency occurs
* Every few years
* Annually
* Twice a year
* More than twice a year

**Prep3 2-3.** How often do you send communications to parents about emergency operations plans?

* Never
* Annually
* Monthly
* Twice a month
* Weekly

**Prep4 2-4.** Please indicate whether your school receives input from any of the following local community partners regarding your emergency operation plan.

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| 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 |  |  |
| Other, please specify: \_\_\_\_\_\_\_\_ |  |  |

**Prep5 2-5.** 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

**Prep6 2-6.** Does your school have a dedicated person who is responsible for coordinating and managing emergency preparedness?

* Yes
* No

**CS3 2-7a**. 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 |
| 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 |  |  |

**CS3a 2-7b.** How often does your school review each of the following written planswith staff?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| {Display rows *CS3a* selections} | Never | Only after an emergency | Every few years | Annually | Twice a year | More than twice a year |
| 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 2-8a**. During the 2024-25 school year, has your school drilled (or will it drill) students on the use of the following emergency procedures or drills?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| 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 inside the building or a room than outside) |  |  |
| Active assailant drill (i.e., a real-time simulation of someone on campus who poses a serious threat of violence) |  |  |

**CS4b 2-8b.** How often does (or will) your school drill students in these emergency procedures?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| {Display based on responses to *CS4a*} | Every other school year or less frequently | 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 |
| 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 inside the building or a room than outside) |  |  |  |  |  |  |
| Active assailant drill (i.e., a real-time simulation of someone on campus who poses a serious threat of violence) |  |  |  |  |  |  |

**CS13 2-9.** 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) |  |  |  |  |

**CS1 2-10**. During the 2024-25 school year, is it a practice at your school to do the following?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| 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 |  |  |

**CS5a 2-11a**. During the 2024–25 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

**CS5b 2-11b.** 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 |
| Toward themselves |  |  |
| Toward others |  |  |

**CS\_more 2-12**. We’d like to learn more about you school’s emergency preparedness and safety procedures for the 2024-25 school year. In the space below, please share any other information you would like us to know about this topic.

*This item is optional.*

# School Pulse Panel May 2025 Survey

## Student Behavior

**SB2\_24 1-1**. To what extent do you agree or disagree with the following statement:

“The COVID-19 pandemic and its lingering effects continue to negatively impact the **behavioral development** of students at my school.”

* Strongly disagree
* Disagree
* Neither agree nor disagree
* Agree
* Strongly agree

**SB3\_24 1-2**. To what extent do you agree or disagree with the following statement:

“The COVID-19 pandemic and its lingering effects continue to negatively impact the **socioemotional development** of students at my school.”

* Strongly disagree
* Disagree
* Neither agree nor disagree
* Agree
* Strongly agree

**SB11\_24 1-3**. Compared to your typical behavioral expectations for students in their grade, please indicate how MOST students in each grade or grade equivalent at your school behaved during this school year.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| {Display based on responses to *Grades*} |  | Behaved worse than expected | Behaved as expected | Behaved better than expected |
| 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 |  |  |  |  |

**CS2 1-9.** As of today, have any of the following contraband items been confiscated from students at your school during the 2024-25 school year?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| 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) |  |  |
| Other substances |  |  |

**CS2\_other.** What other weapons and/or substances have been confiscated from students at your school during the 2024-25 school year? {Display if *CS2\_7* OR *CS2\_12* = Yes}

**SB12a.** Did your school close (either for the full day or part of the day) in response to any violent threats received this school year?

*Violent threats may include threats of gun violence, bomb threats, etc.*

* Yes
* No

**SB12b.** How many days did your school close due to violent threats? {Display if *SB12a* = Yes}

*Count partial closures as a half day.*

\_\_\_\_ days

**SB13.** In the case of unexpected school closures (whether due to violent threats or other reasons), how are students and their families notified?

**SB6 1-10**. 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

**SB\_more 1-11**. We’d like to learn more about schools’experiences with **student behavior and discipline.** In the space below, please share any information you would like us to know on this topic.

## **Social and Emotional Skills**

**SECfc\_gate.** Does your school use a formal curriculum designed to support the development of student’s social and emotional skills?

* Yes
* No

**SECfc5**. How effective has your school’s social and emotional skills curriculum been at improving student outcomes? {Display if *SECfc\_gate* = Yes}

* Not at all effective
* Slightly effective
* Moderately effective
* Very effective
* Extremely effective

**SECfc6**. What barriers, if any, has your school experienced in implementing its social and emotional skills curriculum? {Display if *SECfc\_gate* = Yes}

* Curriculum is too burdensome for teachers to implement completely
* Time limitations
* Lack of teacher support for the curriculum
* Lack of materials and resources
* Lack of funding
* Lack of parental/guardian support for the curriculum
* Lack of district-level support for the curriculum
* Other, please specify: \_\_\_\_\_\_\_\_\_\_
* We have not experienced any barriers implementing our social and emotional skills curriculum

**SECfc7**. Which of the following are reasons why your school has not implemented a formal curriculum designed to support the development of students’ social and emotional skills? {Display if *SECfc\_gate* = No}

* Implementing a formal curriculum is not a priority for our school
* Restrictions on what can be included in our curriculum
* Time limitations
* Lack of teacher support for the curriculum
* Lack of materials and resources
* Lack of funding
* Lack of parental/guardian support for the curriculum
* Lack of district-level support for the curriculum
* Other, please specify: \_\_\_\_\_\_\_\_\_\_
* Don’t know

**SEC\_more.** We’d like to learn more about schools’ social and emotional learning practices during the 2024-25 school year. In the space below, please share any other information you would like us to know on this topic.

*This item is optional.*

## **Crime and Safety (Security Officers and Staff Training)**

*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 2024-25 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? {Display if Treatment = 1}

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

* Yes
* No

**CS6a\_ii.** Do you have any sworn law enforcement officers (SLEOs), including School Resource Officer (SROs), **assigned** to your school? {Display if *CS6a* = No OR Treatment = 2}

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

* Yes
* No

**CS6aa**. During the 2024-25 school year, how often does your school have any sworn law enforcement officers (SLEOs), including School Resource Officers (SROs), **present** at your school? {Display if *CS6a\_ii* = Yes & Treatment = 2}

* Daily
* At least once a week
* At least once a month
* Less than once a month
* Never

**CS6c.** Do any of the SLEOs (including SROs) at your school routinely: {Display if *CS6a* = Yes OR CS6aa = Daily or at least once a week}

*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 |  |  |  |

**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

**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

**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

**CS8.** Aside from SLEOs (including SROs) or other security officers or personnel who carry firearms, during the 2024-25 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 2024-25 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) |  |  |  |

**CS9a.** How many classroom teachers or aides **participated** in these trainings?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| {Display rows based on *CS9* = Yes} | All | Most | Some | 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 2024-25 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.*

## Staffing Follow-Up

**HP5\_open1.** At any point this school year, have you felt understaffed?

* Yes
* No

**HP5\_open2.** Why have you felt understaffed?{Display if *HP5\_open1* = Yes}

# School Pulse Panel June 2025 Survey

## **Learning Strategies & Recovery**

**SR2a**. Approximately what percentage of students at your school **will or have ENDED the 2024-25 school year** behind grade level in at least one academic subject?

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

**SR2c**. In which of the following academic subjects did students at your school **end the 2024-25 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 has your school used to support learning recovery for students during this school year? *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

**SR3b.** How effective have these strategies been in supporting pandemic-related learning recovery for your students during the 2024-25 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 |  |  |  |  |  |

**SR3c.** Has use of this strategy decreased, remained the same, or increased since last school year?

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| {Rows populate based on answers in SR3a} | Decreased | Remained the same | Increased | Did not do last year |
| 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 |  |  |  |  |

**Tutoring\_gate**. At any time during this school year, which of the following types of tutoring, if any, were 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,
  + that aligns with evidence-based core curriculum or programs, AND
  + is NOT drop-in homework help
* **Standard tutoring:** A less intensive method of tutoring 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
* **Self-paced tutoring**: A method of tutoring in which a student works on their own, typically online, where they are provided guided instruction that allows them to move on to new material after displaying mastery of content.
* **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.
* **Other method(s) of tutoring**, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* No tutoring was provided to students by our school

**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 |  |  |  |  |  |

**SR\_more**. We’d like to learn more about your school’s experiences with **students’ learning recovery** during the 2024-25 school year. In the space below please share any other information you would like us to know on this topic.

## **Attendance and Absenteeism**

**ABS7end.** What is (or was) the **average daily attendance** rate for your school for the 2024-25 school year?

*An attendance rate is the percentage of your students who are* ***present*** *for school.*

* \_\_\_\_\_%

*Next, we are interested in chronic absenteeism at your school during the 2024-25 school year. You may either report the* percentage *or* number *of students who were chronically absent this school year.*

**ABS1\_ch**. Would you prefer to report the percentage of students or the number of students who were chronically absent during the 2024-25 school year?

* Percentage of students chronically absent
* Number of students chronically absent

**ABS1\_p**. During the 2024-25 school year, approximately what percentage of students at your school have been **chronically** **absent**? Include excused and unexcused absences. {Display if *ABS1\_ch* = percentage}

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

* \_\_\_\_ percent of students chronically absent

**ABS1\_c**. During the 2024-25 school year, approximately how many students at your school have been chronically absent for the 2024-25 school year? {Display if *ABS1\_ch* = number}

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

\_\_\_\_ number of students chronically absent

**ABS2z**. Compared to **LAST school year (2023-24)**, how have student absences at your school changed during the 2024-25 school year? Include excused and unexcused absences.

* Student absences have decreased a lot
* Student absences have decreased a little
* Student absences have remained about the same
* Student absences have increased a little
* Student absences have increased a lot

**ABS3b**. Compared to **LAST school year (2023-24)**, how have teacher absences at your school changed during the 2024-25 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

**ABS4b**. Compared to **LAST school year (2023-24)**, how easy or difficult has it been for your school to get substitute teachers during the 2024-25 school year?

* Much easier
* Somewhat easier
* About the same
* Somewhat more difficult
* Much more difficult

**ABS5a**. During the 2024-25 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
* Staff who are not regular classroom teachers (e.g., media specialists, paraprofessionals, coaches, interventionists, etc.) cover classes
* Other teachers cover classes during their prep periods
* Separate sections or classes are combined into one room
* Cancel classes
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Not Applicable – my school has always been able to find substitute teachers

**ABS5b**. During the 2024-25 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

**ABS16**. Which of the following, if any, were reasons that students at your school missed too much school this year? *Select all that apply.*

* Students at my school did **not** miss too much school
* Bullying
* Food insecurity
* Instruction was perceived to not be interesting or relevant
* Lack of access to health care
* Lack of relationships to adults at the school
* Lack of relationships to peers at school
* Lack of routine
* Mental health issue
* Physical illness
* Staying home unnecessarily for minor symptoms
* Student apathy
* Taking care of siblings
* Transportation issues
* Unstable housing
* Violence in the community
* Work schedule conflicts with school
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Parent apathy
* Family vacations

**ABS17a**. Does your school use a universal screening tool\* that utilizes student-level data to systematically identify students at-risk?

*\*Universal screening tools may be referred to as Early Warning Systems (EWS), Early Identification Systems (EIS), or Early Warning Intervention and Monitoring System (EWIMS), among other similar titles.*

* Yes
* No

**ABS17b**. Which of the following data are used in your school’s universal screening tool to identify students who might be at-risk and require intervention? {Display if *ABS17a* = Yes}

* Poor attendance
* Poor course performance (i.e., low grades)
* Low achievement test scores
* Signs or symptoms of mental health or socio-emotional issues
* Behavioral issues or referrals
* Signs of high mobility (i.e., frequent address changes)
* Interactions with the criminal justice system
* Other, please specify: \_\_\_\_\_\_\_\_\_

**ABS17c**. Which of the following actions occur when a student has been identified **for poor attendance** in your school’s early warning system? {Display if *ABS17b* = poor attendance}

* Notification sent to parent/guardian about student’s poor attendance
* Meeting of teachers and administrators
* Meeting of parents and school staff
* Develop an intervention plan
* Assign a case manager
* Assign an adult mentor
* Arrange access to social services
* Refer to student support team
* Assign to a dropout prevention program
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_

**ABS11a.** Did your school use any of the following strategies to improve **student** **attendance** during the 2024-25 school year?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Incentives for students (e.g., perfect attendance awards, school-wide recognition) |  |  |
| Increased communication with parents when the days a student is absent reaches a certain number |  |  |
| At-home visits by school or district personnel |  |  |
| Increased communication about the importance of school attendance to students and parents (e.g., through newsletters, text messages, postcards) |  |  |
| Use of support services (e.g., Positive Behavioral Interventions and Supports [PBIS] team, attendance teams) |  |  |
| Adult-student mentoring programs |  |  |
| Peer mentoring programs |  |  |
| Use of legal system services (e.g., truancy officers, department of child services, wellness checks) |  |  |
| Efforts to build a supportive environment for students (e.g., improving school culture/morale, implementing wellness programs) |  |  |
| Changes to school calendar (e.g., 4-day school week, extended school breaks) |  |  |

**ABS11b**. How effective was each strategy at improving **student** **attendance**?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| {display rows based on responses to ABS11a} | Not at all effective | Slightly effective | Moderately effective | Very effective | Extremely effective |
| Incentives for students (e.g., perfect attendance awards, school-wide recognition) |  |  |  |  |  |
| Increased communication with parents when the days a student is absent reaches a certain number |  |  |  |  |  |
| At-home visits by school or district personnel |  |  |  |  |  |
| Increased communication about the importance of school attendance to students and parents (e.g., through newsletters, text messages, postcards) |  |  |  |  |  |
| Use of support services (e.g., PBIS team, attendance teams) |  |  |  |  |  |
| Adult-student mentoring programs |  |  |  |  |  |
| Peer mentoring programs |  |  |  |  |  |
| Use of legal system services (e.g., truancy officers, department of child services, wellness checks) |  |  |  |  |  |
| Efforts to build a supportive environment for students (e.g., improving school culture/morale, implementing wellness programs) |  |  |  |  |  |
| Changes to school calendar (e.g., 4-day school week, extended school breaks) |  |  |  |  |  |

**ABS12a**. Did your school use any of the following strategies to improve **teacher and non-teaching staff attendance** during the 2024-25 school year?

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Incentives for staff (e.g., financial bonuses or rewards, school-wide recognition, “jeans days”) |  |  |
| Efforts to build a supportive environment for staff (e.g., improving school culture/morale, implementing wellness programs, reducing paperwork) |  |  |
| Allowing more flexibility with leave time (e.g., partial day leave, mental health days use as sick days) |  |  |
| Disciplinary actions (e.g., implement performance improvement plan, letter in personnel file) |  |  |
| Changes to school calendar (e.g., 4-day school week) |  |  |
| Changes to daily work schedule (e.g., more dedicated prep time, reduced teaching time) |  |  |

**ABS12b.** How effective was each strategy at improving **teacher and non-teaching staff** **attendance**?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| {display rows based on responses to ABS12a} | Not at all effective | Slightly effective | Moderately effective | Very effective | Extremely effective |
| Incentives for staff (e.g., financial bonuses or rewards, school-wide recognition, “jeans days”) |  |  |  |  |  |
| Efforts to build a supportive environment for staff (e.g., improving school culture/morale, implementing wellness programs, reducing paperwork) |  |  |  |  |  |
| Allowing more flexibility with leave time (e.g., partial day leave, mental health days use as sick days) |  |  |  |  |  |
| Disciplinary actions (e.g., implement performance improvement plan, letter in personnel file) |  |  |  |  |  |
| Changes to school calendar (e.g., 4-day school week) |  |  |  |  |  |
|  |  |  |  |  |  |

**ABS6.** We’d like to learn more about schools’ experiences with **student, teacher, and staff absences.** In the space below, please share any information you would like us to know on this topic.

*This item is optional.*

## **Learning Modes**

**Learning24a**. During this school year, did any of the following reasons cause your school to cancel in-person learning on short or unexpected notice for at least one day? {Display if *inper*= Yes}

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Excessive illness among students |  |  |
| Excessive illness among staff |  |  |
| Excessive illness in the general community (e.g., COVID-19, Influenza) |  |  |
| Excessive staff absence (non-illness related) |  |  |
| Excessive student absence (non-illness related) |  |  |
| Safety concerns due to violence (e.g., threats made against the school) |  |  |
| Safety concerns due to other factors (e.g., fire at nearby building, industrial issue impacting air quality) |  |  |
| Weather event or natural disaster |  |  |
| Other reason not listed |  |  |

**Learning24b.** When you had to cancel in-person learning, how many days did you do the following? {Display if ANY of *Learning24a* = yes}

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

## **Operations Follow-up**

[These data are for internal purposes only and are not released to the public.]

*As this is the last month for 2024-25 School Pulse Panel (SPP), we are interested in learning about your experiences as a participant in the School Pulse Panel.*

**Par2**. 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
* Other, please specify: \_\_\_\_\_\_\_\_\_
* None of the above

**Par1**. If you did not participate in every monthly collection (August 2024-June 2025), 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 $200 was not high enough {Display if SCHFLAG = 1 OR 2}
* Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Sur1**. 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**. What challenges, if any, did you experience completing the monthly surveys? *Select all that apply.*

* I did not experience any challenges completing monthly surveys
* 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: \_\_\_\_\_\_\_\_\_\_\_\_

**DC1**. You were given two weeks to complete each monthly survey. Was this a long enough timeframe to complete the survey?

* Yes
* No

**DC2**. 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

**RE3**. Would you have participated in this study on a monthly basis if the reimbursement was less than $200? {Display if *SCHFLAG* = 1 OR 2}

* Yes
* No

**FutTest.** Would you be interested in helping test question wording on future School Pulse Panel survey questions? If you select yes, the Census Bureau may contact you with future opportunities. Compensation is provided.

* Yes
* No