

Magnet Schools Assistance Program Evaluation
Sponsored by the U.S. Department of Education

Project Director Interview Guide

1999-2000 School Year



AMERICAN INSTITUTES FOR RESEARCH

General Information

1. Like all MSAP projects, yours did not receive the full amount of money requested in your application. How did you deal with the disparity between the amount requested and the amount received? Were any activities dropped or modified as a result of the budget reduction?
2. In addition to any changes you just described, does your MSAP project differ from the description in your application? Yes No (If Yes) Please describe any changes.
3. a. **(If applicable:** Most projects have submitted school budgets. Interviewer will determine in advance and omit question for projects that have submitted them.) The revised budgets that we have on file are for your project as a whole, not by school. We allocated funds equally to all of your schools. Is that accurate? Yes No (If No) What differences were there?
b. **(Again if applicable:** for projects that indicated only school-level expenses) Were any funds used for project costs at the district level? Yes No (If Yes) Please describe.
4. Is the evaluator for your project gathering any data besides what is required by the MSAP performance indicators? (If Yes) What data?
5. We have attached printouts from our database and would like for you to verify their accuracy for your project. Please review them and let me know of any errors. Let's review them one by one:
 - a. the schools in which MSAP programs are being implemented. Correct? Yes No (If No, error is:)
 - b. the grade levels included in each school. Correct? Yes No (If No, error is:)
 - c. target and feeder schools. Correct? Yes No (If No, error is:)
 - d. **(If applicable:** Most projects included 1997-1998 enrollment data for magnet and feeder schools in their applications and/or performance reports. Interviewer will determine in advance and omit this question for projects that did provide these data.) Your application or performance report raised one of these questions about the 1997-1998 enrollment data for target and feeder schools: (1) The 1997-1998 enrollment data were not included. Can you obtain those data for us? Yes No (2) The 1997-1998 enrollment data were incomplete. Can you obtain the missing data for us? Yes No (3) Pre-grant enrollment data were included but not the date for those data. Can you get the date for us?
 - e. each MSAP-supported program as whole-school (i.e., serving all students in the school or all students in specified grades) or program-within-a-school (PWS—i.e., serving only some of the students). Correct? Yes No (If No, error is:) If PWS, what students and grades are served?
 - f. each targeted school's desegregation objective as Reduce, Eliminate, Prevent, or Reduce in Targeted Feeder. Correct? Yes No (If No, error is:)

Minority Student Isolation

6. For 1999-2000, how would you characterize your success in meeting the desegregation objectives for each MSAP-supported school? Would you say that you Met the Objectives, Made Progress, or Failed to Meet the Objectives and why? (Please provide one response for each MSAP school.)
7. a. Does this district maintain waiting lists of students who want to enroll in each magnet program but for whom no place is currently available? Yes No

(If Yes):
 - b. Who maintains the lists?
 - c. How long are they kept?
 - d. If space becomes available during the school year, may students on the waiting list be admitted to a magnet program?
8. a. Following the initial assignment of students to schools for this school year (1999-2000), how many students were on the waiting lists for admission to each of the MSAP magnet schools or programs?
 - b. Of these, how many were likely to be admitted to the magnet program over the course of the year?
9. a. We have enclosed a District Data Request that lists the information we would like to have for each school in your district as of October 1, 1999. If your district can provide these data on diskette, please arrange to have it sent to us. Will this be possible? Yes No (If No) If not, please arrange to have the form completed. Who is the contact person for this? Please provide his/her name and phone number.
 - b. Should we do any follow up to facilitate this? Yes No (If Yes, clarify.)

Student Achievement

10. We have also attached printouts related to student achievement from our database and would like for you to verify their accuracy. Please review them and let me know of any errors:
 - a. student achievement objectives. Correct? Yes No (If No, error is:)
 - b. measures being used to assess student achievement. Correct? Yes No (If No, error is:)
 - c. grade levels being assessed. Correct? Yes No (If No, error is:)
 - d. comparison groups used. Correct? Yes No (If No, error is:)
11. a. We have attached a printout related to the state and/or district standardized tests taken by students in each of the grades in your magnet project. Please review them and let me know of any errors. Is it correct? Yes No (If No, error is:)

- b. Are there additional tests that should be listed? (If Yes) Which tests? At what grade levels are they administered?
12. a. What are this district's policies regarding the participation of special education students in standardized testing?
- b. the participation of limited English proficient students?
13. Can parents of other students arrange to have them excused from testing? Yes No (If Yes) About how many students are excluded at their parent's request?
14. Is your project measuring achievement in any ways not described in the application (e.g., with portfolio assessments)? Yes No (If Yes) In what ways?
15. (**For information only**, not a data request) Could your district provide us with computer-readable files of data on the following *individual* student achievement and background characteristics:
- a. attendance (absences)? Yes No courses completed? Yes No SAT/ACT scores? Yes No
 - b. students' ethnicity? Yes No English proficiency? Yes No special education participation? Yes No identification for Title I? Yes No eligibility for free or reduced price meals? Yes No
 - c. individual test scores? Yes No
16. a. (**For information only**, not a data request) Would your district (or the magnet project) be able to identify specific students who are on waiting lists for admission to magnet schools/programs? Yes No
- b. (If Yes) Could the district identify the attendance area in which each of those students resides? Yes No
17. a. (If Yes, again **for information only**) For which assessments are data available?
- b. Can the scores be linked to other information about the student (e.g., ethnic group, English proficiency)? Yes No (If Yes) What other information?
18. Do you anticipate any changes in your assessment plans over the course of the project (e.g., changes in your state or district assessment)? Yes No (If Yes) What changes?
19. a. For 1998-1999, how would you characterize your success in meeting the achievement objectives for each MSAP-supported school? Would you say that you Met the Objectives, Made Progress, or Failed to Meet the Objectives and why? (Provide one response for each MSAP school.)
- b. How have the priorities and activities of the MSAP project been affected by these initial achievement results?

MSAP Contributions

20. Is your project showing any positive effects *outside* the MSAP schools it includes? For example, are you sharing innovative practices, encouraging other schools to adopt MSAP strategies, or receiving inquiries and visitors from outside the district? Yes No (If Yes) What effects?
21. Has your project had any noteworthy achievements or problems and solutions that might help inform other projects? Examples of achievement might be effective recruitment strategies, community group involvement or effective innovative methods and practices. Problems might be conflicts between district and project priorities or delays in receiving critical equipment. Please describe any achievements and problems and solutions.
22. a. Was your project set up to include a planning year? Yes No
b. (If Yes) What planning activities took place for this project last year (i.e., the project's first year)? Who was involved? Parents? Teachers? Students? How was the planning time used?
23. What are your district's strategies for continuing the MSAP-supported programs after the three-year grant period ends?

Thank you for your time and assistance!

Contact information for the directors of the Magnet Schools Assistance Program Evaluation:

Phyllis DuBois, Project Director
American Institutes for Research
John C. Flanagan Research Center
1791 Arastradero Road
Palo Alto, CA 94304-1337
650/493-3550
FAX 650/858-0958

Mike Garet, Principal Investigator
American Institutes for Research
Pelavin Research Center
1000 Thomas Jefferson Street, NW
Washington, DC 20007
202/944-5300
FAX 202/944-5454

District Data Request

The American Institutes for Research needs the information listed below for their evaluation of the Magnet Schools Assistance Program (MSAP). If possible, please send it on computer diskettes or as attachments to e-mail to the address below. If this is not possible but existing reports include this information, please send copies of those reports. If you need forms on which to enter this information, let us know and we will send them to you.

STUDENT INFORMATION

For each school in your district that includes the grade ranges in your MSAP project, please provide this student information:

- The per pupil allocation for each student in your district for 1999-2000: \$ _____ per pupil.

Please see Exhibit A with the corresponding data template for the following information:

- Grade range in 1999-2000 of each school
 - a) Low (e.g., Prekindergarten, Kindergarten)
 - b) High (e.g., 6th grade, 8th grade, 12th grade)
- Total student enrollment in October 1, 1999
 - c) Students
- Current enrollment data as of October 1, 1999 by race and ethnicity. Please indicate number of students in each category.
 - d) Hispanic (regardless of race)
 - e) White (not of Hispanic origin)
 - f) Black (not of Hispanic origin)
 - g) Asian/Pacific Islander
 - h) American Indian/Alaska native
- Number of male and female students as of October 1, 1999
 - i) Male
 - j) Female
- Number of students eligible for free or reduced price lunch
 - k) Students
- Title I program information: Please indicate the type of Title I program, i.e., school wide or targeted assistance, and the number of students served if targeted assistance is provided.
 - l) Did any students enrolled in the school receive Title I services? (Yes or No)
 - m) Does school operate a Title I school-wide or a targeted assistance program? (School wide or Targeted)
 - n) If targeted, how many students are served as October 1, 1999.
- Number of students with Individualized Education Plans (IEPs) (i.e., identified under the Individuals with Disabilities Education Act or Section 504) as of October 1, 1999
 - o) Students
- Number of students identified as limited-English Proficient (LEP) as of October 1, 1999
 - p) Students
- Student mobility ratio
 - q) Ratio
- Migrant Students
 - r) Number of migrant students enrolled in this school on October 1, 1998
 - s) Number of migrant students enrolled in this school on October 1, 1999
 - t) Total cumulative enrollment of migrant students during the regular school year (1998-1999) and the 1999 summer session

STAFF INFORMATION

For each school in your district that includes the grade ranges in your MSAP project, please provide this information about the administrators and teachers as of October 1, 1999:

Please see Exhibit B with the corresponding data template for the following information:

Administrators (principals and assistant or vice principals as of October 1, 1999)

- Number of administrators by type
 - a) Principals
 - b) Assistant or Vice Principals
- Number of administrators by racial-ethnic background
 - c) Hispanic (regardless of race)
 - d) White (not of Hispanic origin)
 - e) Black (not of Hispanic origin)
 - f) Asian/Pacific Islander
 - g) American Indian/Alaska native
- Number of administrators by gender
 - h) Male
 - i) Female
- Number of administrators by highest education level attained
 - j) BA
 - k) MA
 - l) Education specialist
 - m) Ph.D./Ed.D.
 - n) Other
- Number of administrators with 5 or more years of administrative experience
 - o) Administrators

Please see Exhibit C with the corresponding data template for the following information:

Teachers (as of October 1, 1999):

(Note: If school includes prekindergarten, please provide separate counts for PreK teachers. If PreK teachers also have regular assignments at other grade levels within the school, include them in the counts for the other teachers.)

- Number of full-time equivalent (FTE)
 - a) FTE
- Total number of teachers
 - b) 1999-2000 school year
- Number of teachers by racial-ethnic background
 - c) Hispanic (regardless of race)
 - d) White (not of Hispanic origin)
 - e) Black (not of Hispanic origin)
 - f) Asian/Pacific Islander
 - g) American Indian/Alaska native
- Number of teachers by gender
 - h) Male
 - i) Female
- Number of teachers by highest education level attained
 - j) BA
 - k) MA
 - l) Education specialist
 - m) Ph.D./Ed.D.
 - n) Other

- Number of teachers certified in field of main teaching assignment
 - o) Teachers
- Number of teachers with 5 or more years of teaching experience
 - p) Teachers
- Number of newly hired teachers
 - q) 1999-2000 school year
- (secondary teachers only) Number of educational degrees in assigned field of teaching
 - r) Majored or minored in assigned field
 - s) Did not major or minor in assigned field

Thank you very much for sending us these materials. Please send them to:

Mr. Andrew Davis
e-mail: ADavis@air-ca.org
Address: American Institutes for Research
1791 Arastradero Rd
Palo Alto, CA 94304
Phone: (650) 493-3550
Fax: (650) 858-0958

If you have questions, please contact Andrew Davis (database specialist) or Phyllis DuBois (Project Director) at above address.

District Data Request: Exhibits A, B, and C

Exhibit A: Student Information

#	School Name	Grade Range		Total	Race-Ethnic Background					Gender		Lunch	Title I			IEP	LEP	Ratio	Migrant Students		
		a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	p	q	r	s	t
1																					
2																					
3																					
4																					
.																					

Depending on need, insert additional rows.

Exhibit B: Staff Information for Administrators

#	School Name	Type		Race-Ethnic Background					Gender		Education Level				Experience	
		a	b	c	d	e	f	g	h	i	j	k	l	m	n	o
1																
2																
3																
4																
.																

Depending on need, insert additional rows.

Exhibit C: Staff Information for Teachers

#	School Name	FTE	Total	Race-Ethnic Background					Gender		Education Level				Certified	Exp.	New Hires	Degrees		
		a	b	c	d	e	f	g	h	i	j	k	l	m	n	o	p	q	r	s
1																				
2																				
3																				
4																				
.																				

Depending on need, insert additional rows.

Magnet Schools Assistance Program Evaluation
Sponsored by the U.S. Department of Education

Project Survey

1999-2000 School Year



AMERICAN INSTITUTES FOR RESEARCH

For Project Directors of Magnet Schools Assistance Program (MSAP) Projects

This survey is part of a national evaluation of the MSAP being conducted by the American Institutes for Research (AIR), in collaboration with The McKenzie Group, under contract to the U.S. Department of Education (ED).

Why is the U.S. Department of Education sponsoring this study? The evaluation is tracking the progress of the 57 1998 MSAP grantees in attaining the statutory objectives for MSAP projects and in reaching project-specific objectives over the course of the three-year grants. The evaluation will provide information to the Congress and the U.S. Department of Education on the uses, successes, and problems associated with federal funding to magnet projects. Evaluation results will also inform the reauthorization of MSAP in 2003.

Why should you participate in this evaluation? You are the expert about the magnet project in your district, and your assistance is critical to the success of the evaluation. You are asked to participate in a telephone interview and to complete a Project Survey. Your participation is vital for a complete and accurate picture of the varied projects funded by the MSAP.

How will confidentiality be handled? Your response will be kept strictly confidential and will be used only for statistical purposes. The results will never be presented in any way that would permit any response to be associated with a specific school or individual.

How long will it take you to complete this survey? We estimate that you can complete this survey in 30 minutes or less.

How should you return your completed questionnaire? Please place your completed survey in the enclosed envelope and send it to:

American Institutes for Research
1791 Arastradero Road
Palo Alto, CA 94304-1337
Attn: Matt Gaertner

We are grateful to you for assisting with this study last year and for completing this survey again this year. Thank you for your cooperation in this important study.

INFORMATION ABOUT REPORTING BURDEN

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1875-0174. The time required to complete this information collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651. If you have comments or concerns regarding your individual submission of this form, write directly to: Meredith Miller, Planning and Evaluation Service, U.S. Department of Education, 400 Maryland Ave., SW, FOB-6, #6W211, Washington, DC 20202.

OMB Number 1875-0174 Expiration date: 12-31-2002

Student Recruitment

1. About how much of your district's Magnet Schools Assistance Program (**MSAP**) funds are spent on the production and distribution of outreach and recruitment materials (i.e., dollars spent on brochures, mailings, advertisements) for MSAP-funded magnets each year? *Please indicate the amount.*
 - a. 1998-1999 school year: \$ _____
 - b. 1999-2000 school year: \$ _____

2. About how much of **other district funds** (i.e., non-MSAP funds) are spent on production and distribution of outreach and recruitment materials for MSAP-funded magnets each year? *Please indicate the amount.*
 - a. 1998-1999 school year: \$ _____
 - b. 1999-2000 school year: \$ _____

3. About how much of the outreach efforts for the magnet program are focused on **targeted groups** of students (e.g., students in a feeder school, low income students, high achieving students, etc.)? *Please mark (X) one box.*
 - None—We focus outreach on all students in the district.
 - Less than half of our outreach is focused on targeted groups of students.
 - About three-fourths of our outreach is focused on targeted groups.
 - All of our efforts are focused on targeted groups of students.

4. a. What is the full-time equivalent (FTE) of **MSAP-funded staff** devoted to recruitment activities? *Please indicate full-time equivalent.*

About _____ FTE

b. About how much of this FTE is covered by:

MSAP Project Director _____%

Other MSAP-funded staff _____%

5. Does the district employ any other recruitment specialists?
 - Yes—What is the full-time equivalent of these district-funded staff?

About _____ FTE
 - No

6. a. Do school-based personnel (e.g., principals, resource teachers, classroom teachers, students, parents) play a role in recruitment and outreach activities?

Yes—*Continue with Item 6b.*

No—*Go to Item 7.*

b. Please indicate which school-based personnel play a role and how. *Please mark (X) all that apply.*

Principals or assistant principals organize school tours for parents and students.

Teachers in magnet schools make oral presentations to visiting parents and students.

Teachers visit other schools to make presentations to potential students.

Students help conduct school tours.

Students visit other district schools to recruit students.

Parents make presentations about magnet schools for other parents.

Parents make telephone calls to provide information about the magnet schools.

Other—*Please describe briefly:*

7. Which of the following types of special publicity or outreach does your district use for your MSAP program? *Please mark (X) all that apply.*

Printed brochures

Distribution of information/applications to students

Mailed information/applications to parents who request it

Mailed information/applications to all parents of eligible students

Presentations by administrators, magnet teachers, or students at other schools

Presentations by administrators, magnet teachers, or students at churches or other community organizations

Planned visits/tours for parents/students at magnet schools, without transportation provided by the district

Planned visits/tours for parents/students at magnet schools, with transportation provided by the district

Babysitting service during school-sponsored events for parents

Telephoning parents to explain program

Home visits to parents/students

Advertising in media (print, radio, TV, etc.)

Fairs or other forums that feature information about magnet schools

Information on an Internet site

Other—*Please specify:* _____

8. As your district tries to attract students to MSAP magnet programs, to what extent do each of the following types of schools present competition? *Please mark (X) one box for each line.*

Type of school	Not at all	To some extent	To a great extent
a. Other magnet schools within the district	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Charter schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Other public schools (not magnet, not charter) within the district	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Public schools in nearby districts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Private religious schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Private nonsectarian schools	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Home schooling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. At the grade levels at which your MSAP project is operating, how many schools in the district have magnet programs that are NOT funded by MSAP?

_____ schools

10. Are student admissions to your MSAP programs based on any of the following? *Please mark (X) one box for each line.*

	Yes	No
a. Scoring at or above a particular level on a test of academic skills	<input type="checkbox"/>	<input type="checkbox"/>
b. Demonstrated special skills or talents (e.g., through audition or portfolio)	<input type="checkbox"/>	<input type="checkbox"/>
c. Academic record demonstrating high levels of achievement in previous grades	<input type="checkbox"/>	<input type="checkbox"/>

12. Think back to last year (1998-1999). On average, how frequently did you or other MSAP-supported district staff provide technical assistance or guidance in the following areas to each MSAP school? Include visits you or other MSAP district staff made to the school, as well as visits the principal or other school staff made to the district office. *Please mark (X) one box for each line.*

If you were not here last year (1998-1999), check the box and go on to Item 13.

Areas of technical assistance	Never	Less than once a month	About once a month	About once every 2 weeks	Once a week or more
a. Recruiting teachers for MSAP program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Planning toward full project implementation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Budgeting and resource allocation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Recruiting students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Designing curriculum or selecting curriculum materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Planning professional development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Developing theme-related activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Designing assessments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Interpreting assessment scores	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Helping principals provide leadership for magnet program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Keeping teachers motivated to implement the magnet program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Working with parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Establishing links with businesses and universities in the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Locating appropriate consultants and other support staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Now focus on this year (1999-2000). On average, how frequently do you or other MSAP-supported district staff provide technical assistance or guidance in the following areas to each MSAP school? Include visits you or other MSAP district staff make to the school, as well as visits the principal or other school staff make to the district office. *Please mark (X) one box for each line.*

Areas of technical assistance	Never	Less than once a month	About once a month	About once every 2 weeks	Once a week or more
a. Recruiting teachers for MSAP program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Planning toward full project implementation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Budgeting and resource allocation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Recruiting students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Designing curriculum or selecting curriculum materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Planning professional development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Developing theme-related activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Designing assessments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Interpreting assessment scores	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Helping principals provide leadership for magnet program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Keeping teachers motivated to implement the magnet program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Working with parents	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Establishing links with businesses and universities in the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Locating appropriate consultants and other support staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Accountability

14. a. Aside from your MSAP project reports, does this district have performance reports that include—
Please mark (X) one box for each line.

Reporting item	Yes	No
(1) Test results from state, local, or nationally standardized assessments?	<input type="checkbox"/>	<input type="checkbox"/>
(2) Student attendance rates?	<input type="checkbox"/>	<input type="checkbox"/>
(3) Graduation rates?	<input type="checkbox"/>	<input type="checkbox"/>
(4) Dropout rates?	<input type="checkbox"/>	<input type="checkbox"/>
(5) Student mobility rates?	<input type="checkbox"/>	<input type="checkbox"/>
(6) SAT/ACT scores?	<input type="checkbox"/>	<input type="checkbox"/>
(7) Postsecondary placements of graduating seniors?	<input type="checkbox"/>	<input type="checkbox"/>
(8) Employment placements of graduating seniors?	<input type="checkbox"/>	<input type="checkbox"/>
(9) Data reported by demographic group (limited English proficiency, gender, race, special education, socioeconomic status, etc.)?	<input type="checkbox"/>	<input type="checkbox"/>
(10) Other— Please specify: _____	<input type="checkbox"/>	<input type="checkbox"/>

If all responses above are No, go to Item 15.

If some are Yes, continue with Item 14b.

- b. Does this district use these reports— Please mark (X) one box for each line.

Use	Yes	No
(1) To evaluate the progress of students in your district or schools?	<input type="checkbox"/>	<input type="checkbox"/>
(2) To determine the next year's instructional focus?	<input type="checkbox"/>	<input type="checkbox"/>
(3) To realign the curriculum (e.g., with assessment and other indicator criteria)?	<input type="checkbox"/>	<input type="checkbox"/>
(4) To inform parents and the community of the district's and/or school's progress?	<input type="checkbox"/>	<input type="checkbox"/>
(5) To prompt school-level initiatives for improvements?	<input type="checkbox"/>	<input type="checkbox"/>
(6) To monitor compliance with court orders?	<input type="checkbox"/>	<input type="checkbox"/>
(7) Other— Please specify: _____	<input type="checkbox"/>	<input type="checkbox"/>

15. a. Since 1998-1999, has the district or state targeted any of the MSAP-supported schools for improvement because of poor academic performance?

Yes—*Continue with Item 15b and c.*

No—*Go to Item 16.*

b. Which MSAP-supported schools were targeted for improvement?

In 1998-1999: _____

In 1999-2000: _____

c. Were these schools targeted as a one-time event (i.e., the year the school was identified) or as an on-going condition (e.g., the school is on probation for three years)? *Please explain briefly below.*

Systemic Reform

17. To what extent has your district focused its resources on the following strategies for improving student performance? *Please mark (X) one box for each line.*

Strategy	Not focused at all	Moderate focus	Heavy focus
a. Establishing high content and performance standards for all students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Increasing instructional time for low-achieving students through before- or after-school, weekend, summer, or year-round programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Aligning curricula and instructional materials with content and performance standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Developing professional development linked to standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Building partnerships with parents and the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Expanding the use of technology	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Reducing class size	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Providing supplemental targeted academic services to students (e.g., tutoring)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Coordinating with other public agencies to provide health and social services for students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Selecting and implementing research-based comprehensive reform models	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. How do your MSAP project and the district as a whole compare in terms of implementing reform strategies (e.g., those listed in Item 17 above)? *Please mark (X) one box.*

- The district is considerably ahead of the MSAP project.
- The district and project are at about the same point in implementing reform strategies.
- The MSAP project is considerably ahead of the district.

19. How familiar are you with the state frameworks, assessments, and performance standards in the following core academic subjects? *Please mark (X) one box for each line.*

Subject	Not at all familiar	Somewhat familiar	Familiar	Quite familiar	Not yet developed
Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Language arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Social Studies |

20. To what extent have the state frameworks, assessments, and performance standards influenced the themes and goals of your MSAP schools? *Please mark (X) one box for each line*

Subject	Not at all	Only slightly	Somewhat	To a great extent	Not yet developed
Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Language arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

21. To what extent do the state frameworks, assessments, and performance standards **match** the MSAP schools' instructional goals in the following core subjects? *Please mark (X) one box for each line.*

Subject	Not at all	Only slightly	Somewhat	To a great extent	Not yet developed
Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Language arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. a. Has your district developed curriculum frameworks, assessments, and/or student performance standards, in addition to those developed by the state?

Yes—*Continue with Item 22b.*

No—*Go to Item 23.*

b. To what extent do the **district** frameworks, assessments, and/or performance standards match the MSAP schools' instructional goals in the following core subjects? *Please mark (X) one box for each line.*

Subject	Not at all	Only slightly	Somewhat	To a great extent	Not yet developed
Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Language arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MSAP Contribution

23. a. Has your district been able to augment the MSAP grant with funds from other outside sources for the magnet program? That is, have you obtained funds specifically for the MSAP-supported schools in addition to federal, state, and local funds that are available for all schools in your district?

Yes—*Continue with Item 23b.*

No—*Go to Item 24.*

b. From what other sources were these funds obtained and in what amounts? (*Please list below.*)

Source	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____

24. a. Are there activities or items that you would like to fund through MSAP but which are not currently allowed?

Yes—*Continue with Item 24b.*

No—*Go to Item 25.*

b. What activities would you like to fund through MSAP? *Please describe briefly.*

25. In the period since your district first considered applying for a 1998-1999 MSAP grant, have you **received** technical assistance from any of the following sources to help you with your MSAP application or project? *Please mark (X) Yes or No for each line.* If Yes, please indicate how frequently you communicated with the provider and how useful you found the information provided.

If you did not receive technical assistance from any of these sources, check the box, skip Item 26, and go to Item 27.

Sources	Did you receive assistance from this source?		If Yes: How frequently did you communicate with the provider?			If Yes: How useful was the technical assistance in meeting your needs?		
	Yes	No	Rarely	Some-times	Often	Not very useful	Some-what useful	Very useful
U.S. Department of Education (ED):								
a. MSAP office in ED*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The Office for Civil Rights	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Equity Assistance Centers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Other ED agencies <i>Please specify:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>								
Other sources of assistance:								
e. Magnet Schools of America	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. State organizations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Other <i>Please specify:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>								

* MSAP office staff includes Sylvia Wright, Steve Brockhouse, Sandra Brown, Donna Hoblit, Richard Kress, Iris Lane, Joanne Osborne, LaTonya Simpson, Kay Voyatzis, and others in the Office of Elementary and Secondary Education.

26. What was the purpose or focus of the technical assistance you requested from each source you identified in Item 25, above? *Please mark (X) the box in each line that indicates the purpose of the assistance.* Did the source provide assistance in....

Source	Preparing MSAP application	Developing desegregation plan	Designing selection process	Choosing magnet theme/ approach	Planning district supports	Dealing with implementation problems	Completing MSAP reports	Identifying other sources of assistance
U.S. Department of Education (ED):								
a. MSAP office in ED	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The Office for Civil Rights	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Equity Assistance Centers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Other agencies of ED <i>Please specify:</i> _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other sources of assistance:								
e. Magnet Schools of America	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. State organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Other <i>Please specify:</i> _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

27. a. Since your district first considered applying for a 1998-1999 MSAP grant, have you **requested** any assistance from one of the above groups that was *not* provided?

Yes—*Continue with Item 27b.*

No—*Go to Item 28.*

b. What type of assistance did you request and from what source (agency or organization)? *Please describe briefly.*

Project Director Background and Role

28. When did you start work as MSAP Project Director?

_____ Month _____ Year

29. To what extent were you involved in writing your district's MSAP application? *Please mark (X) one box.*

- Not involved
- Slightly involved
- Moderately involved
- Strongly involved

30. a. Did you hold an administrative position in this district during the **1997-1998** school year?

- Yes—*Continue with Item 30b.*
- No—*Go to Item 31.*

b. What role, if any, did the fact that the district received an MSAP grant have in your continuing in the district after the 1997-1998 school year? *Please mark (X) one box.*

- Little or no role
- Some role
- A strong role

31. a. Before the 1997-1998 school year, did you serve in any other capacity in the district (for example, teacher or principal)?

- Yes—*Continue with Item 31b.*
- No—*Go to Item 32.*

b. Please describe your prior experience in the district.

32. a. Before coming to this district, did you serve as a teacher or administrator in any other district?

- Yes—*Continue with Item 32b.*
- No—*Go to Item 33.*

b. Please describe the positions and the number of years of experience you had in each district.

33. a. Prior to becoming Project Director for this grant, did you have experience in planning and implementing magnet school programs?

Yes—*Continue with Item 33b.*

No—*Go to Item 34.*

b. Please describe the positions and the number of years of experience you had in each.

34. a. What is your ethnicity?

Hispanic or Latino

Not Hispanic or Latino

b. What is your race? *Mark (X) one or more.*

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or other Pacific Islander

White

35. What is the highest degree you have earned? *Please mark (X) only one box.*

Associate degree

Bachelor's degree (B.A., B.S., B.E., etc.)

Master's degree (M.A., M.A.T., M.B.A., M.Ed., M.S., etc.)

Education specialist or professional diploma (at least one year beyond master's level)

Doctorate or first professional degree (Ph.D., Ed.D., M.D., L.L.B., J.D., D.D.S.)

Do not have a degree.

36. Are you a full-time or part-time employee of the district?

Full time

Part time—How many hours do you work per week? _____ hours

37. What percent of your time do you spend as Director of your district's MSAP project?

_____ %

38. Do you have other responsibilities in the district as well?

Yes—What are those responsibilities? *Please describe briefly.*

No

39. What is your direct supervisor's job title?
40. If you have any comments to make about this survey or its appropriateness for your MSAP project, please add them here.

Thank you for your help!

IDENTIFICATION	
<i>All responses provided for this study are kept confidential; however, sometimes we need to follow up to clarify a response. To help us make this contact, we request that the person who completes this survey please fill in the box below. We probably will not need the information but would appreciate having it, just in case. Once the survey data are all entered, we will delete all identifying information from our files.</i>	
District Name: _____	Site ID Code: _____ (leave blank)
School Name: _____	
Respondent Name: _____	Phone: (____) _____ - _____ ext. _____
Best Day and Times to Reach You	
Days: M Tu W Th F <i>between the following times</i> _____ : _____ and _____ : _____ AM or PM (circle)	

Contact information for the directors of the Magnet Schools Assistance Program Evaluation:

Phyllis DuBois, Project Director
 American Institutes for Research
 John C. Flanagan Research Center
 1791 Arastradero Road
 Palo Alto, CA 94304-1337
 650/493-3550
 FAX 650/858-0958

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 American Institutes for Research
 Pelavin Research Center
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Magnet Schools Assistance Program Evaluation
Sponsored by the U.S. Department of Education

Principal Survey—MSAP Schools

1999-2000 School Year



AMERICAN INSTITUTES FOR RESEARCH

For Principals of Schools Receiving Support from the Magnet Schools Assistance Program (MSAP)

This survey is part of a national evaluation of the MSAP being conducted by the American Institutes for Research (AIR), in collaboration with The McKenzie Group, under contract to the U.S. Department of Education (ED).

Why is the U.S. Department of Education sponsoring this study? The evaluation will track the progress of the 57 1998 MSAP grantees in attaining the statutory objectives for MSAP projects and in reaching project-specific objectives over the course of the three-year grants. The evaluation will provide information to the Congress and the U.S. Department of Education on the uses, successes, and problems associated with federal funding to magnet projects. Evaluation results will also inform the reauthorization of MSAP in 2003.

Why should you participate in this evaluation? The evaluation includes all 293 schools that receive support from MSAP and because your school is unique, it is important that you participate. You are the expert about the magnet program in your school, and your response to this survey is needed for a complete and accurate picture of the varied programs being implemented in MSAP-supported schools.

How will confidentiality be handled? Your response will be kept strictly confidential and will be used only for statistical purposes. The results will never be presented in any way that would permit any response to be associated with a specific school or individual.

How long will it take you to complete this survey? We estimate that you can complete this survey in 60 minutes or less.

How should you return your completed questionnaire? Please place your completed survey in the enclosed envelope and send it to:

American Institutes for Research
1791 Arastradero Road
Palo Alto, CA 94302-1113
Attn: Andy Davis

Thank you for your cooperation in this important study.

INFORMATION ABOUT REPORTING BURDEN

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1875-0174. The time required to complete this information collection is estimated to average 40 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651. If you have comments or concerns regarding your individual submission of this form, write directly to: Meredith Miller, Planning and Evaluation Service, U.S. Department of Education, 400 Maryland Ave., SW, FOB-6, #6W211, Washington, DC 20202.

OMB Number 1875-0174 Expiration date: 12-31-2002

Principal Background and Role

1. Prior to this school year, how many years were you employed in each of the following positions?
Count part of a year as 1 year. If none, please mark (X) the box.
 - a. As principal of this school
 None or _____ years
 - b. As principal of other schools
 None or _____ years
2.
 - a. How many years of elementary or secondary teaching experience did you have PRIOR to becoming a principal? *Count part of a year as one year. If none, please mark (X) the box.*
 None or _____ year(s) of teaching
 - b. Did you hold any school position other than teaching BEFORE you became a principal (e.g., department head, curriculum specialist, assistant principal or program director, guidance counselor, athletic coach)?
 Yes—*Please describe* _____
 No
3. Are you currently teaching in the school in which you are currently serving as principal?
 Yes
 No
4.
 - a. What is your ethnicity?
 Hispanic or Latino
 Not Hispanic or Latino
 - b. What is your race? *Please mark (X) one or more.*
 American Indian or Alaska Native
 Asian
 Black or African American
 Native Hawaiian or other Pacific Islander
 White
5. Are you male or female?
 Male
 Female

6. What is the highest degree you have earned? *Please mark (X) only one box.*
- Associate degree
 - Bachelor's degree (B.A., B.S., B.E., etc.)
 - Master's degree (M.A., M.A.T., M.B.A., M.Ed., M.S., etc.)
 - Education specialist or professional diploma (at least one year beyond master's level)
 - Doctorate or first professional degree (Ph.D., Ed.D., M.D., L.L.B., J.D., D.D.S.)
 - Do not have a degree.

7. a. When did you start work as principal at this school?

_____ Month ___ ___ ___ Year

*If you were principal of this school **during** the 1997-1998 year, continue with Item 7b.
If you became principal of this school **after** the 1997-1998 school year, please go to Item 7c.*

- b. What role, if any, did the fact that this school was designated as an MSAP¹ magnet school (i.e., received a federal magnet grant) have in your continuing as principal after the 1997-1998 school year? *Please mark (X) one box.*
- Little or no role: I would have remained as principal without the magnet program.
 - Some role: I remained in part because I was interested in the magnet program.
 - The MSAP designation played a strong role: I remained as principal specifically because of my interest in the magnet program.

Go to Item 8.

- c. What role, if any, did the fact that this school was designated as an MSAP magnet school (i.e., received a federal magnet grant) have in your becoming principal after the 1997-1998 school year? *Please mark (X) one box.*
- Little or no role: I would have become principal here even without the magnet program.
 - Some role: I became principal here in part because I was interested in the magnet program.
 - A strong role: I was hired specifically to manage the magnet program in this school.

8. To what extent were you involved in applying for or planning the magnet program for this school (i.e., during the development of the MSAP grant application and the start-up of the program)?

Please mark (X) one box.

- Not involved
- Slightly involved
- Moderately involved
- Strongly involved

¹ MSAP is the Magnet Schools Assistance Program, the federal grant that is supporting your magnet program.

9. How easy or difficult has it been to build a staff in this school that actively supports the magnet program (e.g., its curriculum, teaching methods, and activities)? *Please mark (X) one box.*

- Very easy
- Fairly easy
- Fairly difficult
- Very difficult

10. Since Fall 1998, how much of your time as principal have you spent on each of the following activities? *If you were not principal at this school last year, answer just for the time you have been principal of the school this year. Please mark (X) one box for each line.*

	None	Very little	Moderate	Considerable
Negotiating for resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responding to requests from parents and students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building broad agreement among the faculty about the school's mission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bolstering faculty morale	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completing paperwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discussing curriculum standards with the teaching staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discussing student progress or evaluation results with the teaching staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Providing support for teachers to change teaching methods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creating opportunities for professional collaboration among teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working with teaching staff to solve school problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other— <i>Please describe:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Working Environment

11. To what extent do you agree or disagree with each of the following statements? *Please mark (X) one box for each line.*

Statement	Strongly disagree	Disagree	Agree	Strongly agree
I have confidence in the expertise of teachers on my staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Rules for student behavior are consistently enforced by teachers in this school, even for students who are not in their classes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have the support of teachers in enforcing school rules.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The level of student misbehavior interferes with teaching.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most teachers at this school make a conscious effort to coordinate their teaching with instruction at other grade levels.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
This school seems like a big family. Everyone is close and cordial.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most staff members support and encourage each other at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most teachers are willing to put in extra hours to help this school be successful.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most teachers share my beliefs and values about what the central mission of this school should be.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most teachers at this school are continually learning and seeking new ideas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Most teachers at this school really care about their students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I usually look forward to working each day at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sometimes I feel it is a waste of time to try to do my best.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The administration and teaching staff collaborate to make school run effectively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Racial and ethnic differences among staff members create tensions in the school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I worry about the security of my job because of the performance of our students on state or local tests.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. To what extent is each of the following matters a problem in this school? Indicate whether it is a SERIOUS problem, a MODERATE problem, a MINOR problem, or NOT a problem in this school. *Please mark (X) one box for each line.*

	Serious problem in this school	Moderate problem in this school	Minor problem in this school	Not a problem in this school
Student tardiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student absenteeism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student transience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teacher absenteeism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students cutting classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physical conflicts among students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Robbery or theft	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vandalism of school property	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student pregnancy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student use of alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student drug abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student possession of weapons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verbal abuse of teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Physical abuse of teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student disrespect for teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students dropping out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student apathy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of parent involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poverty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students coming to school unprepared to learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Poor student health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. a. Of the total kindergarten through grade 12 students enrolled in this school on October 1, 1999, how many have disabilities or are **special education** students? That is, how many have an Individualized Education Plan (IEP)?

None—Go to Item 14.

_____ students—Continue with Item 13b.

- b. Approximately how many of these special education students participate in magnet program activities in the following ways? (Count each student in each instructional category that applies.)

_____ Participate in the same magnet activities in the same (regular) classrooms as other students

_____ Participate in magnet-related activities specifically designed to accommodate their special needs

_____ Do not participate in magnet-related activities

_____ Other—Please describe: _____

14. a. Of the K-12 students enrolled in this school on October 1, 1999, how many have been identified as **limited English proficient**?

Do not include pre-kindergarten, post-secondary, or adult education students. (Limited English proficient [LEP] refers to students whose native or dominant language is other than English and who have sufficient difficulty speaking, reading, writing, or understanding the English language as to deny them the opportunity to learn successfully in an English-speaking-only classroom.)

None—Go to Item 15.

_____ students—Continue with Item 14b.

- b. Approximately how many of these limited English proficient students participate in magnet program activities in the following ways? (Report each student in each instructional setting that applies.)

_____ Participate with their English-fluent classmates in the same magnet-related activities, conducted in English

_____ Participate in magnet-related activities modified to accommodate their level of English proficiency (e.g., “sheltered English” instruction, assisted by bilingual aides)

_____ Participate in magnet activities conducted in their non-English language (e.g., in “bilingual” classrooms)

_____ Do not participate in magnet-related activities

_____ Other—Please describe: _____

Systemic Reform and Accountability

15. Using the scale below, which ranges from “No influence” to “A great deal,” how much ACTUAL influence do you think each group or person has on decisions concerning the following activities? Please mark (X) one box for each line.

a. Setting performance standards for students at this school	No influence				A great deal	
State department of education or other state-level bodies (e.g., state board of education)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local school board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School district staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Principal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent association or school site council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Establishing curriculum at this school	No influence				A great deal	
State department of education or other state-level bodies (e.g., state board of education)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local school board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School district staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Principal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent association or school site council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Hiring new full-time teachers at this school	No influence				A great deal	
State department of education or other state-level bodies (e.g., state board of education)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local school board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School district staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Principal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent association or school site council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Deciding how your school budget will be spent	No influence				A great deal	
State department of education or other state-level bodies (e.g., state board of education)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local school board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
School district staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Principal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent association or school site council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16. In this district, do schools receive any of the following rewards or sanctions for student achievement? *Please mark (X) one box for each line.*

	Yes	No
Receive cash or resource rewards?	<input type="checkbox"/>	<input type="checkbox"/>
Receive other recognition award?	<input type="checkbox"/>	<input type="checkbox"/>
Receive technical assistance to improve the school?	<input type="checkbox"/>	<input type="checkbox"/>
Have the principal reassigned or released?	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>		
Be taken over by a higher level governing body?	<input type="checkbox"/>	<input type="checkbox"/>
Have the teaching staff reconstituted?	<input type="checkbox"/>	<input type="checkbox"/>
Other— <i>If yes, please specify:</i>	<input type="checkbox"/>	<input type="checkbox"/>

17. Does your school have a written comprehensive plan to improve student achievement for all students in—

a. Reading?

Yes

No

b. Math?

Yes

No

c. Other subjects?

Yes—*Please indicate subjects:* _____

No

18. Have quantifiable goals been set for how far students in this school will advance each year in—

a. Reading?

Yes

No

b. Math?

Yes

No

c. Other subjects?

Yes—*Please indicate subjects:* _____

No

19. Who has the greatest influence in setting those goals? *Please mark (X) one box.*

- Federal program
- State
- District
- School
- Other—*Please describe:* _____
- Not applicable (School does not have quantifiable goals.)

20. What steps are taken if your students are not showing adequate progress? Do you... *Please mark (X) one box for each line.*

	Yes	No
Target individual teachers for professional development?	<input type="checkbox"/>	<input type="checkbox"/>
Target individual students for extra help?	<input type="checkbox"/>	<input type="checkbox"/>
Change class size?	<input type="checkbox"/>	<input type="checkbox"/>
Reassign teachers?	<input type="checkbox"/>	<input type="checkbox"/>
Reassign students?	<input type="checkbox"/>	<input type="checkbox"/>
Increase students' practice of basic skills using computers?	<input type="checkbox"/>	<input type="checkbox"/>
Alter curriculum and instruction across the whole school?	<input type="checkbox"/>	<input type="checkbox"/>
Other— <i>Please describe:</i> _____	<input type="checkbox"/>	<input type="checkbox"/>

21. a. Does this school receive performance reports from the district on such things as students' scores on achievement tests or graduation rates?

- Yes—*Continue with 21b.*
- No—*Go to Item 22.*

b. Does this school use these performance reports to— *Please mark (X) one box for each line.*

	Yes	No
Evaluate the progress of students in this school?	<input type="checkbox"/>	<input type="checkbox"/>
Determine the next year's instructional focus?	<input type="checkbox"/>	<input type="checkbox"/>
Realign the curriculum (e.g., with assessment and other indicator criteria)?	<input type="checkbox"/>	<input type="checkbox"/>
Inform parents and the community of the school's progress?	<input type="checkbox"/>	<input type="checkbox"/>
Prompt school-level initiatives for improvement?	<input type="checkbox"/>	<input type="checkbox"/>

22. Are the following means of assessing this school's performance being used this year? *For each line, please mark (X) all that apply.*

	Yes, used for self-assessment	Yes, required by district, state or chartering agency	No
State or national assessment program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Standardized norm-referenced tests (e.g., CTBS, ITBS, MAT)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Criterion-referenced test with proficiency levels or cut scores?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance-based tests developed locally?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performance-based tests developed as part of national or state effort?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student portfolios? (A student portfolio is a subset of the student's work used to assess his/her progress.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students' demonstration of their work? ("Demonstration of work" refers to a presentation of the results of learning before an audience and may involve multiple media.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent satisfaction surveys?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student interviews or surveys?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Behavioral indicators such as attendance, expulsion, and college application rates?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other assessments currently used? <i>Please describe:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

23. Does the school receive summaries that report standardized test scores for students by race-ethnic group?
 Yes
 No

Features of the School Program

24. How long is the school day for students in this school? *Report BOTH hours and minutes (e.g., 6 hours and 0 minutes, 5 hours and 45 minutes, etc.) If the length of the day varies by grade level, record the longest day. Calculate the school day as the time elapsed between arrival and dismissal from school.*

_____ hours and _____ minutes

25. Since the beginning of the 1998-1999 school year, has this school implemented any of the following school improvement strategies? *For each line, please mark (X) the box for the earliest alternative that applies to your school.*

Strategy	Imple- mented before 1998-1999	Imple- mented since 1998-1999	A priority for the next 2 years	No plans to implement
<i>Systemic Reforms</i>				
Establishing high content and/or performance standards for all students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Aligning curricula and instructional materials with (district and/or state) content or performance standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Designing professional development linked to (district and/or state) standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Selecting and implementing research-based comprehensive reform models	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>				
<i>Instructional Time and Class Size</i>				
Reducing class sizes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extending the school year (providing more than the state- or district-mandated instructional days per year)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Block scheduling in secondary schools (i.e., reducing the number of periods that meet each day to allow extended blocks of instructional time)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conducting academic enrichment programs before or after school, on weekends, or during the summer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Strategy	Imple- mented before 1998-1999	Imple- mented since 1998-1999	A priority for the next 2 years	No plans to implement
Providing additional instructional time for low-achieving students before or after school, on weekends, or during the summer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Individualized or small-group instruction provided by regular staff for students with academic difficulties or protracted absences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tutoring provided by individuals other than regular staff (e.g., same-age or older students, college or community volunteers)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>				
<i>Fostering collaboration (professional community) among staff</i>				
Teachers teaching in teams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teachers collaborating to design curriculum that integrates instruction across disciplines or subjects (e.g., “thematic” instruction)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scheduling collaborating teachers into a common preparation period	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>				
<i>Parental involvement and student support</i>				
A systematic program for involving parents in the academic life of students (beyond the usual PTA activities, parents’ night, and extracurricular events)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Coordinating with other public agencies to provide health and social services for students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assigning students to the same teacher for two or more years (e.g., in self-contained elementary classrooms, in a secondary advisory class or homeroom)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Targeting students in groups traditionally under-represented among college-goers for college awareness activities, counseling and/or special academic support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Strategy	Imple- mented before 1998-1999	Imple- mented since 1998-1999	A priority for the next 2 years	No plans to implement
Initiating a dropout prevention program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Providing youth, adult, and/or business mentors to students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>				
<i>Instructional practices</i>				
Organizing students with different levels of academic ability into heterogeneous rather than homogeneous ability groups within classrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Making extensive use of cooperative learning groups in classrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrating multi-sensory or “hands-on” learning activities into the curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using curriculum content, guest speakers, and/or special events to increase multicultural awareness and validation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>				
Integrating computer and/or multimedia technology across the curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using internships, job shadowing, and/or guest speakers arranged by local employers to foster students’ career awareness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scheduling field trips to extend classroom learning activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using long-term project-based learning activities through which students apply or integrate knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Making extensive use of role-playing or simulation (e.g., simulated court proceedings, space exploration) in instruction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>				
Making extensive use of open-ended problems (e.g., problems with no single correct answer or immediate obvious solution)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Having students give each other constructive feedback on academic work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Strategy	Imple- mented before 1998-1999	Imple- mented since 1998-1999	A priority for the next 2 years	No plans to implement
constructive feedback on academic work				
Using alternative forms of student assessment (e.g., portfolios, performance-based or criterion referenced assessments)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Giving students practice tests and/or direct instruction in test-taking to prepare them for state or district achievement tests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using specialized staff for instruction (e.g., drama coaches, science resource teachers)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Using specialized staff to provide guidance on curriculum, instruction, or professional development for teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

26. Has your school selected or developed any school reform models (i.e., research-based models of school reform) such as “Accelerated Schools,” “Coalition of Essential Schools,” or “Success for All”?

Yes—Go to Item 27.

No—Go to Item 28.

27. Please list the model(s) you have implemented. If the model is locally developed, please describe it briefly.

Professional Development

28. a. Does this school provide teachers with time for professional development during regular contract hours?

Yes—*Continue with Item 28b.*

No—*Go to Item 29.*

b. Are the following used to provide teachers with time for professional development during regular contract hours? *Please mark (X) one box for each line.*

	Yes	No
Substitutes to cover teachers' classes?	<input type="checkbox"/>	<input type="checkbox"/>
Early dismissal of students?	<input type="checkbox"/>	<input type="checkbox"/>
Professional days built in before the beginning of the school year?	<input type="checkbox"/>	<input type="checkbox"/>
Professional days built in during the school year?	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>		
Professional days built in after the school year?	<input type="checkbox"/>	<input type="checkbox"/>
Common planning time for teachers?	<input type="checkbox"/>	<input type="checkbox"/>
Reduced teacher work loads (<i>If necessary: Less time in the classroom with students, or less time or assigned non-instructional duties</i>)?	<input type="checkbox"/>	<input type="checkbox"/>

29. Over the past 12 months, how much emphasis has this school placed on providing professional development for teachers in the following areas? *Please mark (X) one box for each line.*

Professional development areas	No emphasis	Little emphasis	Moderate emphasis	A great deal of emphasis
In-depth study in the core academic subjects taught	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New methods of teaching (e.g., cooperative learning)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
State or district curriculum and performance standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integration of educational technology in the grade or subject taught	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student performance assessment (e.g., methods of testing, interpreting assessment data, applying results to modify instruction)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Classroom management (including student discipline)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Addressing the needs of students with limited English proficiency or from diverse cultural backgrounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Addressing the needs of students with disabilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other— <i>Please specify:</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

30. In the last 12 months, how often have you participated in professional development activities WITH teachers from your school? *Please mark (X) one box.*

- Never
- Once or twice
- 3-5 times
- 6 or more times

32. Does your school operate a Title I school-wide program? *Please mark (X) one box.*

Yes

No

In the process of becoming a school-wide program

33. Please indicate the three most important things that MSAP funds (federal magnet funds) have allowed your school to do that it otherwise could not have done. *Mark the item you consider to be most important with a "1" and the next most important items with a "2" and "3."*

_____ Add staff (e.g., content area specialists, technical support, classroom aides, school program coordinator)

_____ Support professional development (e.g., fees for training, substitute teachers)

_____ Support the acquisition and use of computers in instruction

_____ Develop specialized learning centers (e.g., science study centers, gardens or nature study facilities, Montessori classrooms)

_____ Purchase books, supplies, or other instructional materials (e.g., multicultural literature, manipulatives for mathematics or Montessori instruction, desktop publishing software)

_____ Provide support for designing or planning the magnet (e.g., to visit other schools, attend magnet association conferences, support summer meetings to design curricula)

_____ Provide support for on-going teacher planning and collaboration

_____ Support activities for students before or after school, or during the summer or intersessions

_____ Other—*Please describe:*

35. Are the following in place at this school?—Please mark (X) one box for each line.

	Yes	No
Staff member assigned to work on parent involvement?	<input type="checkbox"/>	<input type="checkbox"/>
Parents or staff maintain a log of parent participation?	<input type="checkbox"/>	<input type="checkbox"/>
A reliable system of communication with parents, such as newsletters or phone trees?	<input type="checkbox"/>	<input type="checkbox"/>
Services to support parent participation, such as providing child care or transportation?	<input type="checkbox"/>	<input type="checkbox"/>
Parent drop-in center or lounge?	<input type="checkbox"/>	<input type="checkbox"/>
Parent materials in culturally or linguistically appropriate formats?	<input type="checkbox"/>	<input type="checkbox"/>

36. Does your school provide the following to parents of students at your school?—Please mark (X) one box for each line.

	Yes	No
The school plan or school improvement plan?	<input type="checkbox"/>	<input type="checkbox"/>
A school performance profile or school report card?	<input type="checkbox"/>	<input type="checkbox"/>
A district, state, tribal, or national comparison of your school?	<input type="checkbox"/>	<input type="checkbox"/>
Content standards or performance standards?	<input type="checkbox"/>	<input type="checkbox"/>

37. a. During the last school year (1998-1999) did your school provide information, host visits, or provide professional development opportunities to educators from other schools in your district, state, or out of the state?

- Yes—Continue with Item 37b, c, and d.
 No—Go to Item 38.

b. About how many requests for information about your program did your school receive and answer in the 1998-1999 school year?

_____ requests

c. About how many educators visited your school during 1998-1999 (excluding your staff)?

_____ educators

d. Besides your own staff and student teachers, about how many teachers and staff from other schools participated in professional development opportunities sponsored by this school during 1998-1999?

_____ individuals

38. a. During the last school year (1998-1999), did your school receive requests for information or permission to visit from reporters, researchers, or any other individuals or groups besides educators or parents?

Yes—*Continue with Item 38b and c.*

No—*Go to Item 39.*

b. Please briefly describe the types of individuals or groups.

c. Which aspects of your magnet program are of most interest to the educators, parents, and other visitors who want to learn more about your school? Please describe briefly.

Magnet School: Structure and History

39. Which of the following best describes the way the MSAP-funded magnet program(s) in your school is (are) related to the school program in place before 1998-1999? *Please mark (X) one box.*

This school has never had a magnet program of any kind.

This school was already operating a magnet program in 1997-1998.

This school was not a magnet in 1997-1998, but had been a magnet before then.

Other—*Please specify:*

40. When your district reports achievement scores, what definition of a *magnet student* is used? *Please mark (X) one box.*

All students enrolled in the school are considered magnet students.

All students enrolled in a specified program or programs are defined as magnet students.

All students who have been enrolled for at least _____ (length of time) are considered magnet students.

All students who are enrolled in at least _____ (number of classes/courses) are defined as magnet students.

Other—*Please specify:*

41. a. Was this school open during the 1997-1998 school year?
- Yes—*Continue with Item 41b.*
 - No—*Go to Item 42.*
- b. How were staff selected for this magnet program? *Please mark (X) all that apply.*
- All teachers had to apply to teach in the magnet program, even if they had been teaching in the school before the MSAP program was implemented.
 - The previous teaching staff was retained, and no provision was made to transfer any teachers out of the school.
 - The previous teaching staff was retained, but teachers who did not wish to teach in the magnet were supported in their requests to transfer to other schools in the district.
 - The previous teaching staff was retained, but teachers who did not wish to teach in the magnet were assigned to non-magnet classes.
 - The principal or magnet project director was assisted in transferring some teachers out of the school to make room for teachers considered more compatible with the magnet’s philosophy or special needs.
42. a. Does this school have a neighborhood attendance area whose residents are given priority for enrollment in the magnet program?
- Yes—*Continue with Item 42b.*
 - No (the school is a district-wide or “dedicated” magnet with no local attendance area)—*Go to Item 43.*
- b. About what percent of the students currently enrolled in the magnet program reside in the school’s neighborhood attendance area? *Please mark (X) one box.*
- Less than 10 percent
 - 10–49 percent
 - 50–74 percent
 - 75–99 percent
 - 100 percent
43. Are any of the following required for admission to this magnet program? *Please mark (X) one box for each line.*

	Yes	No
a. Scoring at or above a particular level on a test of academic skills	<input type="checkbox"/>	<input type="checkbox"/>
b. Demonstrated special skills or talents (e.g., through audition or portfolio)	<input type="checkbox"/>	<input type="checkbox"/>
c. Academic record demonstrating high levels of achievement in previous grades	<input type="checkbox"/>	<input type="checkbox"/>

Instructional Features of the Magnet Program

The following items ask about your school's magnet program(s). By **magnet program**, we mean the collection of special curricula, courses, activities, and/or instructional approaches offered by your school that have been designed to attract students to attend it.

44. What grade levels participated in your school's magnet program(s) during the 1998-1999 school year, and what grade levels are participating this year? *If a year was devoted to planning and no magnet program was in place, please mark "None."*

Grade level	1998-1999	1999-2000
Pre-kindergarten	<input type="checkbox"/>	<input type="checkbox"/>
Kindergarten	<input type="checkbox"/>	<input type="checkbox"/>
1 st	<input type="checkbox"/>	<input type="checkbox"/>
2 nd	<input type="checkbox"/>	<input type="checkbox"/>
3 rd	<input type="checkbox"/>	<input type="checkbox"/>
4 th	<input type="checkbox"/>	<input type="checkbox"/>
5 th	<input type="checkbox"/>	<input type="checkbox"/>
6 th	<input type="checkbox"/>	<input type="checkbox"/>
7 th	<input type="checkbox"/>	<input type="checkbox"/>
8 th	<input type="checkbox"/>	<input type="checkbox"/>
9 th	<input type="checkbox"/>	<input type="checkbox"/>
10 th	<input type="checkbox"/>	<input type="checkbox"/>
11 th	<input type="checkbox"/>	<input type="checkbox"/>
12 th	<input type="checkbox"/>	<input type="checkbox"/>
None (planning year)	<input type="checkbox"/>	<input type="checkbox"/>

45. a. Do **all** students in the grades you checked in Item 44 participate in the magnet program(s), or do only *some* students participate? *Please mark (X) one box.*

All students in the grades checked in Item 44 participate—*Go to Item 46.*

Some students in the checked grades participate—*Continue with Items 45b and c.*

- b. What is the total number of students who were participating in your magnet program(s) as of October 1, 1999?

_____ students

- c. Please indicate in the grid below how many of these students (in the program as of October 1, 1999) were in each of the following categories.

	Number of kindergarten through grade 12 students	Number of prekindergarten students
Primary Race-Ethnic Background		
Hispanic (<i>regardless of race</i>)		
White (<i>not of Hispanic origin</i>)		
Black (<i>not of Hispanic origin</i>)		
American Indian or Alaska Native		
Asian or Pacific Islander		
Sex		
Male		
Female		
Poverty or Special Services		
Received free or reduced price lunch		
Received Title I targeted assistance services		
Had Individualized Education Plans (IEPs)		
Identified as limited English proficient (LEP)		

46. a. Does this magnet school enroll students in any of **grades K-5**?

Yes—Continue with Item 46b, c, and d.

No—Go to Item 47.

b. Does the program require any of the following practices for ALL magnet students? Please mark (X) one box for each line.

	Yes	No
At least one hour of instructional time devoted to reading each day?	<input type="checkbox"/>	<input type="checkbox"/>
At least one hour of instructional time devoted to math each day?	<input type="checkbox"/>	<input type="checkbox"/>
At least three hours of instructional time devoted to science each week?	<input type="checkbox"/>	<input type="checkbox"/>
A required number of books or pages to be read each week (in and out of class)?	<input type="checkbox"/>	<input type="checkbox"/>
A required amount of writing to be completed each week (in and out of class)?	<input type="checkbox"/>	<input type="checkbox"/>
A required oral presentation at regular intervals (i.e., weekly or monthly)?	<input type="checkbox"/>	<input type="checkbox"/>
A required amount of homework to be completed each day?	<input type="checkbox"/>	<input type="checkbox"/>
Completion of a portfolio of work in one or more academic subjects during the year?	<input type="checkbox"/>	<input type="checkbox"/>

c. Does your school use any of the following approaches to grouping children by ability? Please mark (X) all that apply.

Assigning students to self-contained classrooms based on reading, math, or general ability

Regrouping students by ability into different classes for reading instruction

Regrouping students by ability into different classes for mathematics instruction

Forming within-class ability groups for reading instruction

Forming within-class ability groups for mathematics instruction

d. What is distinctive about your school? Please briefly describe the general ways in which your school's instructional program differs from that of other non-magnet schools at this grade level.

47. Does this magnet school enroll students in **middle or high school grades**?

Yes—*Continue with Items 48-53.*

No—*Skip to Item 54.*

48. As part of its magnet program(s), does your school offer special or elective courses not typically offered by other secondary schools in your district?

Yes—*Please attach a list. For each course, indicate whether it is required or optional for students participating in the magnet program.*

No

49. a. Do students who participate in your school's magnet program(s) pick a theme or area of specialization (for example, health technology or dance)?

Yes—*Continue with Items 49b, c, and d.*

No—*Go to Item 50.*

b. How many themes or areas of specialization does your school offer?

_____ themes or areas

c. Please list the themes or areas of specialization that students can select:

d. Are students required to select a theme or area of specialization, or is it optional?

Students are **required** to select a theme or area of specialization.

Students may select a theme, but it is not required.

50. Are students in your school's magnet program(s) required to complete courses in addition to those required by other schools in your district?

Yes

No

51. a. Does this magnet program enroll students in the **8th grade**?
- Yes—*Continue with Items 51b, c, d, and e.*
- No—*Go to Item 52.*
- b. Are 8th grade students in the magnet program assigned to **language arts** (English) classes by ability?
- Yes
- No
- c. Are 8th grade students in the magnet program assigned to **mathematics** classes by ability?
- Yes
- No
- d. About what percent of magnet students in the 8th grade are enrolled in each of the following courses?

Algebra or other first year course in college preparatory math	_____ %
Pre-algebra or transition math	_____ %
General 8 th grade math	_____ %
Other math courses— <i>Please specify:</i>	

_____	_____ %
No math class	_____ %
TOTAL	100 %

- e. Does this magnet program require any of the following for ALL 8th grade magnet students? *Please mark (X) one box for each line.*

	Yes	No
A required year-long or semester-long project?	<input type="checkbox"/>	<input type="checkbox"/>
A required number of books to be read each month or grading period (in and out of class)?	<input type="checkbox"/>	<input type="checkbox"/>
A required amount of writing to be completed each week (in and out of class)?	<input type="checkbox"/>	<input type="checkbox"/>
A required oral presentation at regular intervals (i.e., weekly or monthly)?	<input type="checkbox"/>	<input type="checkbox"/>
<hr/>		
A required minimum amount of homework to be completed each day?	<input type="checkbox"/>	<input type="checkbox"/>
Completion of a portfolio of work in one or more academic subjects during the year?	<input type="checkbox"/>	<input type="checkbox"/>
An individual or small group project to be completed during the year?	<input type="checkbox"/>	<input type="checkbox"/>

52. a. Does this magnet program enroll students in the **10th grade**?
- Yes—*Continue with Item 52b, c, d, and e.*
- No—*Go to Item 53.*
- b. Are 10th grade students in the magnet program assigned to **language arts** (English) classes by ability?
- Yes
- No
- c. Are 10th grade students in the magnet program assigned to **mathematics** classes by ability?
- Yes
- No
- d. About what percent of magnet students in the 10th grade are enrolled in each of the following courses?

Advanced algebra, trigonometry, or above	_____ %
Geometry or other second year course in college preparatory math	_____ %
Algebra or other first year course in of college preparatory math	_____ %
Pre-algebra or transition math	_____ %
Consumer or business math	_____ %
General 10 th grade math	_____ %
Other math courses— <i>Please specify:</i>	

_____	_____ %
No math class	_____ %
TOTAL	100 %

- e. Does this magnet program require any of the following for ALL 10th grade magnet students?
Please mark (X) one box for each line.

	Yes	No
A required year-long or semester-long project?	<input type="checkbox"/>	<input type="checkbox"/>
A required number of books to be read each month or grading period (in and out of class)?	<input type="checkbox"/>	<input type="checkbox"/>
A required amount of writing to be completed each week (in and out of class)?	<input type="checkbox"/>	<input type="checkbox"/>
A required oral presentation at regular intervals (i.e., weekly or monthly)?	<input type="checkbox"/>	<input type="checkbox"/>
A required minimum amount of homework to be completed each day?	<input type="checkbox"/>	<input type="checkbox"/>
Completion of a portfolio of work in one or more academic subjects during the year?	<input type="checkbox"/>	<input type="checkbox"/>
An individual or small group project to be completed during the year?	<input type="checkbox"/>	<input type="checkbox"/>

53. a. Does this magnet program enroll students in the **12th grade**?
 Yes—*Continue with Item 53b.*
 No—*Go to Item 54.*
- b. Does this magnet program require any of the following for ALL 12th grade magnet students?
Please mark (X) one box for each line.

	Yes	No
A required year-long or semester-long project?	<input type="checkbox"/>	<input type="checkbox"/>
A required number of books to be read each month or grading period (in and out of class)?	<input type="checkbox"/>	<input type="checkbox"/>
A required amount of writing to be completed each week (in and out of class)?	<input type="checkbox"/>	<input type="checkbox"/>
A required oral presentation at regular intervals (i.e., weekly or monthly)?	<input type="checkbox"/>	<input type="checkbox"/>
A required minimum amount of homework to be completed each day?	<input type="checkbox"/>	<input type="checkbox"/>
Completion of a portfolio of work in one or more academic subjects during the year?	<input type="checkbox"/>	<input type="checkbox"/>
An individual or small group project to be completed during the year?	<input type="checkbox"/>	<input type="checkbox"/>

54. Does the instruction that students in your school's magnet program(s) currently receive in the following core subject areas differ substantially from the instruction your school provided during the **1997-1998** school year? *Please mark (X) one box for each line. (NOTE: If you mark "Yes" for a subject area, please briefly explain the changes in instruction.*

Subject area	Does current instruction differ substantially from instruction provided during the 1997-98 school year?		If Yes, briefly explain changes:
	Yes	No	
Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	_____
Science	<input type="checkbox"/>	<input type="checkbox"/>	_____
Language arts	<input type="checkbox"/>	<input type="checkbox"/>	_____
Social studies	<input type="checkbox"/>	<input type="checkbox"/>	_____

55. Relative to the instruction provided in your school during the **1997-1998** school year, how much emphasis does your school currently place on each of the following content areas? *Please mark (X) one box for each line.*

Subject area	Less emphasis than the 1997-98 school year	About the same emphasis as the 1997-98 school year	Somewhat more emphasis than the 1997-98 school year	A great deal more emphasis than the 1997-98 school year
Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Language arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arts (including music, dance, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technical fields (e.g., health tech, media, technology, aeronautics)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

56. If you would like to provide additional information or clarify any of your answers, please do so below or on the next page. Also, please feel free to contact the MSAP Evaluation staff (contact information provided on the next page).

Thank you for your help!

IDENTIFICATION	
<i>All responses provided for this study are kept confidential; however, sometimes we need to follow up to clarify a response. To help us make this contact, we request that the principal who completes this survey please fill in the box below. We probably will not need the information but would appreciate having it, just in case. Once the survey data are all entered, we will delete all identifying information from our files.</i>	
District Name: _____	Site ID Code: _____ <i>(leave blank)</i>
School Name: _____	
Respondent Name: _____	Phone: (____) _____ - _____ ext. _____
Best Day and Times to Reach You	
Days: M Tu W Th F <i>between the following times</i> ____ : ____ and ____ : ____ AM or PM <i>(circle)</i>	

Contact information for the directors of the Magnet Schools Assistance Program Evaluation:

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