

NOTICE – This report is authorized by law (20 U.S. Code 1221e). Your answers will be kept strictly confidential. Results from this survey will appear in summary or statistical form only, so that individuals cannot be identified.

FORM **TFS-3**
(1-3-95)

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

TEACHER FOLLOW-UP SURVEY

QUESTIONNAIRE FOR CURRENT TEACHERS

1994 – 1995

Conducted by:

U.S. Department of Commerce
Bureau of the Census



THIS SURVEY HAS BEEN ENDORSED BY:

American Association for Counseling and Development
American Association of School Administrators
American Federation of Teachers
Bureau of Indian Affairs
Council for American Private Education
Council of Chief State School Officers
National Association of Elementary School Principals
National Association of Independent Schools
National Association of Secondary School Principals
National Catholic Educational Association
National Education Association

INSTRUCTIONS

Most of the items on this questionnaire are arranged so that the answer categories or spaces for written answers are under the questions. Please answer the questions by marking the appropriate answer category with an X, or recording your answer in the space provided. We suggest that you use a pencil, rather than a pen or marker.

Notice that at the end of some answer categories and answer spaces, there are instructions to skip to later questions or to continue with the next question on the questionnaire.


If you are unsure about how to answer a question, please give the best answer you can and make a comment in the "Notes" space. Please include the item number.


If you have any questions, call the Bureau of the Census, toll free, at 1-800-221-1204.

Return your completed questionnaire to the Bureau of the Census in the enclosed preaddressed envelope. Please return it within two weeks.

**Please keep count of the time you spend completing this questionnaire.
At the end of the survey, you are asked to record the amount of time spent.**

Are you currently teaching – full-time, part-time, or as a long-term substitute – in grades K through 12?

003 1 Yes  PLEASE CONTINUE with this survey.

2 No  RETURN THIS FORM to the Bureau of the Census in the enclosed envelope. You will be sent another form for teachers who are still teaching.

SECTION I – MAIN ACTIVITY

EDUCATION FIELDS

(Use codes to answer items 1a, 1b, 2, 3a, and 3b)

- | | |
|---|---|
| 01 Teaching in an elementary or secondary school | 04 Attending a college or university |
| 02 Working in an elementary or secondary school with an assignment OTHER THAN teaching | 05 Caring for family members |
| 03 Working in an occupation outside of elementary or secondary education | 06 Retired |
| | 07 Other |

1a. Is your time EQUALLY DIVIDED between two of the above listed activities?

090 1 Yes
2 No

GO to item 2.

b. What are the codes from the list above?

092 and 093 **GO to item 4.**
Code Code

2. What code from the list above best describes the activity you spend most of your time on during the work week; that is, what is your main activity?

094 Main activity
Code

3a. Do you spend time on any other activity from the list above?

095 1 Yes
2 No

GO to item 4.

b. What code from the list above best describes this other activity?

096 Other activity
Code

SECTION I – MAIN ACTIVITY – CONTINUED

4. Which of the following categories describes your position as a school EMPLOYEE?

Mark (X) only one box.

- 107
- 1 Full time employee
 - 2 3/4 time or more, but less than full-time employee
 - 3 1/2 time or more, but less than 3/4 time employee
 - 4 1/4 time or more, but less than 1/2 time employee
 - 5 Less than 1/4 time employee

5a. How much time do you work as a TEACHER at this school?

Mark (X) only one box.

- 108
- 1 Full time teacher
 - 2 3/4 time or more, but less than full-time teacher
 - 3 1/2 time or more, but less than 3/4 time teacher
 - 4 1/4 time or more, but less than 1/2 time teacher
 - 5 Less than 1/4 time teacher

b. Which of the following categories best describes your teaching assignment?

Mark (X) only one box.

- 109
- 1 Regular full-time or part-time teacher
 - 2 Itinerant teacher (i.e., your assignment requires you to provide instruction at more than one school)
 - 3 Long-term substitute (i.e., your assignment requires that you fill the role of a regular teacher on a long-term basis, but you are still considered a substitute)

6. If you are a full-time school or district employee with less than a full-time teaching assignment, which of these best describes your other assignment at this school?

Mark (X) only one box.

- 110
- 1 Administrator (e.g., principal, assistant principal, director, head)
 - 2 Counselor
 - 3 Librarian/media specialist
 - 4 Coach
 - 5 Other professional staff (e.g., department head, curriculum coordinator)
 - 6 Support staff (e.g., secretary, aide)
 - 7 Other – Describe ↴

| |
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| |
| |
| |

- 8 Not applicable

SECTION I – MAIN ACTIVITY – CONTINUED

TEACHING ASSIGNMENT FIELD CODES FOR QUESTIONS 7a and b

- 01 Prekindergarten
- 02 Kindergarten
- 03 General elementary

Special areas

- 86 American Indian/Native American studies
- 10 Art
- 12 Basic skills and remedial education
- 13 Bilingual education
- 17 Computer science
- 18 Dance
- 19 Drama/theater
- 21 English/language arts
- 23 English as a second language
- 26 Gifted
- 28 Home economics
- 16 Journalism
- 33 Mathematics
- 35 Military science
- 37 Music
- 39 Philosophy
- 40 Physical education, health
- 43 Reading
- 44 Religion
- 47 Social studies/social science

Foreign languages

- 51 French
- 52 German
- 53 Latin
- 54 Russian
- 55 Spanish
- 56 Other foreign language

Science

- 57 Biology/life science
- 58 Chemistry
- 59 Geology/Earth science/Space science
- 60 Physics
- 61 General and all other science

Vocational education

- 05 Accounting
- 06 Agriculture
- 14 Business, marketing
- 27 Health occupations
- 30 Industrial arts
- 49 Trade and industry
- 50 Technical
- 83 Other vocational education

Special education

- 67 Special education, general
- 68 Emotionally disturbed
- 69 Mentally retarded
- 70 Speech/language impaired
- 71 Deaf and hard-of-hearing
- 72 Visually handicapped
- 73 Orthopedically impaired
- 74 Mildly handicapped
- 75 Severely handicapped
- 76 Specific learning disabilities
- 77 Other special education

84 All others

7a. What is your MAIN teaching assignment at this school, that is, the field in which you teach the most classes?

Enter your main teaching assignment field and the two-digit code from the list above. If your teaching schedule is divided equally between two fields, record either field as your main assignment for this item, mark box 1, and enter the code for the other field in question 7b.

111

| | | |
|------|--|--|
| Code | | |
|------|--|--|

Code

Main assignment field

112

- 1 Teaching assignment equally divided between two fields

b. Do you teach classes in OTHER fields at this school?

113

- 1 Yes
- 2 No → **GO to item 8a.**

In what field do you teach the second most classes?

Use the assignment field codes listed above.

114

| | | |
|------|--|--|
| Code | | |
|------|--|--|

Code

SECTION I – MAIN ACTIVITY – CONTINUED

8a. Do you have a teaching certificate in this state in your MAIN teaching assignment field?

- 115
- 1 Yes
- 2 No

GO to item 9a.

b. What type of certificate do you hold in this field?

Mark (X) only one box.

- 116
- 1 Advanced professional certificate
- 2 Regular or standard state certificate
- 3 The certificate offered in your state to persons who HAVE COMPLETED what the state calls an "alternative certification program"
- 4 Provisional or other type given to persons who are still participating in what the state calls an "alternative certification program"
- 5 Probationary certificate (the initial certificate issued after satisfying all requirements except the completion of a probationary period)
- 6 Temporary certificate (requires some additional college coursework and/or student teaching before regular certification can be obtained)
- 7 Emergency certificate or waiver (issued to persons with insufficient teacher preparation who must complete a regular certification program in order to continue teaching)

c. In what year were you certified in your main teaching assignment field by this state?

117

| | | | |
|---|---|--|--|
| 1 | 9 | | |
|---|---|--|--|

9a. Do you have a teaching certificate in this state in your OTHER teaching assignment field at this school?

- 118
- 0 Not applicable; I do not have a second teaching assignment field → **GO to item 10.**

- 1 Yes
- 2 No

GO to item 10.

b. What type of certificate do you hold in this field?

Mark (X) only one box.

- 119
- 1 Advanced professional certificate
- 2 Regular or standard state certificate
- 3 The certificate offered in your state to persons who HAVE COMPLETED what the state calls an "alternative certification program"
- 4 Provisional or other type given to persons who are still participating in what the state calls an "alternative certification program"
- 5 Probationary certificate (the initial certificate issued after satisfying all requirements except the completion of a probationary period)
- 6 Temporary certificate (requires some additional college coursework and/or student teaching before regular certification can be obtained)
- 7 Emergency certificate or waiver (issued to persons with insufficient teacher preparation who must complete a regular certification program in order to continue teaching)

c. In what year were you certified in this field by this state?

120

| | | | |
|---|---|--|--|
| 1 | 9 | | |
|---|---|--|--|

SECTION I – MAIN ACTIVITY – CONTINUED

10. In what grade levels are the students in your classes at THIS school?

Mark (X) all that apply.

- 121 1 Ungraded
122 1 Prekindergarten
123 1 Kindergarten
124 1 1st
125 1 2nd
126 1 3rd
127 1 4th
128 1 5th
129 1 6th
130 1 7th
131 1 8th
132 1 9th
133 1 10th
134 1 11th
135 1 12th
136 1 Postsecondary

11. Which of the following best describes the community in which this school is located?

Mark (X) only one box.

- 137 1 A rural or farming community
2 A small city or town of fewer than 50,000 people that is not a suburb of a larger city
3 A medium-sized city (50,000 to 100,000 people)
4 A suburb of a medium-sized city
5 A large city (100,000 to 500,000 people)
6 A suburb of a large city
7 A very large city (over 500,000 people)
8 A suburb of a very large city
9 A military base or station
10 An Indian reservation

12. Are you currently teaching in the SAME school as you were last year when you completed the Schools and Staffing Survey?

138 1 Yes → **GO to item 17.**

2 No



13. Are you currently teaching in the SAME state as you were last year when you completed the Schools and Staffing Survey?

139 1 Yes

2 No – In what state or country are you teaching now? ↘

140

Office use only

State or Country

SECTION I – MAIN ACTIVITY – CONTINUED

14. Which of the following best describes your move from last year's school to this year's school?

Mark (X) only one box.

- 141
- 1 Moved from one public school to another public school in the SAME school district
 - 2 Moved from one public school district to another public school district
 - 3 Moved from a private school to a public school
 - 4 Moved from one private school to another private school
 - 5 Moved from a public school to a private school
- GO to item 16.

15. Is the private school in which you currently teach affiliated with the Roman Catholic Church or another religious organization, or is it non-religious?

Mark (X) only one box.

- 142
- 1 Religious – Roman Catholic
 - 2 Religious – Non-Roman Catholic
 - 3 Non-Religious

POSSIBLE REASONS FOR LEAVING PREVIOUS SCHOOL

(Use codes to answer items 16a, b, and c.)

- 01** Family or personal move
- 02** For better salary or benefits
- 03** For a better teaching assignment (subject area or grade level)
- 04** School staffing action (e.g., reduction-in-force, lay-off, school closing, school reorganization, reassignment)
- 05** Dissatisfied with the previous school

16a. What was your main reason for leaving the school in which you taught last year?

Enter code from above.

143

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| | | |
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Code Main reason

b. Did you have a second reason for leaving?

- 144
- 1 Yes
 - 2 No → GO to item 16d.

What was your second reason? Enter code, then continue with item 16c.

145

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Code

c. Did you have a third reason for leaving?

- 146
- 1 Yes
 - 2 No

What was your third reason? Enter code.

147

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| | |
|--|--|

Code

SECTION I – MAIN ACTIVITY – CONTINUED

16d. Did you enter code 05 for one of your reasons in question 16a, b, or c?

148

1 Yes

2 No

GO to item 17.

POSSIBLE AREAS OF DISSATISFACTION

(Use codes to answer items 16e, f, and g.)

- 01 Poor opportunity for professional advancement
- 02 Lack of recognition and support from administration
- 03 Lack of resources and materials/equipment for your classroom
- 04 Inadequate support from administration
- 05 Lack of influence over school policies and practices
- 06 Lack of control over own classroom
- 07 Intrusions on teaching time (i.e., not enough time working directly with teaching students)
- 08 Inadequate time to prepare lesson/teaching plans
- 09 Poor student motivation to learn
- 10 Class sizes too large
- 11 Student discipline problems
- 12 Poor salary

16e. What was your main area of dissatisfaction with teaching in your previous school?

Enter code from above.

149

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Code

Main dissatisfaction

f. Did you have a second area of dissatisfaction?

150

1 Yes

2 No

GO to item 17.

151

What was your second area? Enter code, then continue with item 16g.

| | |
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Code

g. Did you have a third area of dissatisfaction?

152

1 Yes

2 No

What was your third area? Enter code.

| | |
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| | |
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Code

153

SECTION II – EDUCATION ACTIVITIES AND FUTURE PLANS

17. Have you earned any new degrees in the past 12 months?

154

1 Yes

2 No

GO to item 22.

18. When did you earn this degree?

155

| | |
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| | |
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Month

156

| | | | |
|---|---|--|--|
| 1 | 9 | | |
|---|---|--|--|

Year

19. What type of degree is it?

Mark (X) only one box.

157

1 Associate degree

2 Bachelor's

3 Master's

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

5 Doctorate (e.g., Ph.D., Ed.D.)

6 Professional (e.g., M.D., D.D.S., J.D., L.L.B.)

NOTES

SECTION II – EDUCATION ACTIVITIES AND FUTURE PLANS – CONTINUED

MAJOR FIELD OF STUDY CODES FOR QUESTIONS 20 and 24

EDUCATION

General education

- 01 Pre-elementary/early childhood education
- 03 Elementary education
- 04 Secondary education

Subject area education

- 07 Agricultural education
- 11 Art education
- 13 Bilingual education
- 15 Business, commerce, and distributive education
- 89 Crosscultural education
- 22 English education
- 23 English as a second language
- 24 Foreign languages education
- 29 Home economics education
- 88 American Indian/Native American education
- 30 Industrial arts, vocational and technical, trade and industry education
- 34 Mathematics education
- 38 Music education
- 40 Physical education/health education
- 43 Reading education
- 45 Religious education
- 46 Science education
- 48 Social studies/social sciences education

Special education

- 67 Special education, general
- 68 Emotionally disturbed
- 69 Mentally retarded
- 70 Speech/language impaired
- 71 Deaf and hard-of-hearing
- 72 Visually handicapped
- 73 Orthopedically impaired
- 74 Mildly handicapped
- 75 Severely handicapped
- 76 Specific learning disabilities
- 77 Other special education

Other education

- 78 Curriculum and instruction
- 79 Educational administration
- 80 Educational psychology
- 81 Counseling and guidance
- 82 Other education

GENERAL

- 06 Agriculture and natural resources
- 86 American Indian/Native American studies
- 87 Other area and ethnic studies
- 08 Architecture and environmental design
- 10 Art, fine and applied
- 14 Business and management
- 16 Communications and journalism
- 17 Computer and information sciences
- 19 Drama, theater
- 20 Engineering
- 21 English (literature, letters, speech, classics)
- 25 General studies
- 27 Health professions and occupations
- 28 Home economics
- 85 Humanities
- 31 Law
- 32 Library science
- 33 Mathematics
- 35 Military science
- 36 Multi/interdisciplinary studies
- 37 Music
- 39 Philosophy
- 41 Psychology
- 42 Public affairs and services
- 44 Religion, theology

Foreign languages

- 51 French
- 52 German
- 53 Latin
- 54 Russian
- 55 Spanish
- 56 Other foreign languages

Natural sciences

- 57 Biology/life science
- 58 Chemistry
- 59 Geology/earth science
- 60 Physics
- 61 Other natural sciences

Social sciences

- 62 Economics
- 63 History
- 64 Political science and government
- 65 Sociology
- 66 Other social sciences

84 All others

20. What is the major field of study for your NEW degree?

Enter the field and two-digit code from the list above.

| | | |
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| | | |
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158

Code

Major field

21. For what purpose did you earn this degree? Mark (X) only one box.

159

- 1 To increase salary
- 2 For professional development in current field
- 3 To teach in a different field than the one taught last year
- 4 For a nonteaching position in elementary or secondary education
- 5 For an occupation outside elementary or secondary education other than current job
- 6 Other – Specify ↴

| |
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| |
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SECTION II – EDUCATION ACTIVITIES AND FUTURE PLANS – CONTINUED

22. Are you currently enrolled in a degree program?

Mark (X) only one box.

- 160
- 1 No → **GO to item 26.**
- 2 Yes, as a full-time student
- 3 Yes, as a part-time student

23. What type of degree are you pursuing?

Mark (X) only one box.

- 161
- 1 Associate degree
- 2 Bachelor's
- 3 Master's
- 4 Education specialist or professional diploma (at least one year beyond Master's level)
- 5 Doctorate (e.g., Ph.D., Ed.D.)
- 6 Professional (e.g., M.D., D.D.S., J.D., L.L.B.)

24. What is the major field of study for the degree you are pursuing?

Enter the field and two-digit code from the list on page 10.

162

| | | |
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|--|--|--|

Code Major field

25. For what purpose are you pursuing this degree?

Mark (X) only one box.

- 163
- 1 To increase teacher salary
- 2 For professional development in current teaching field
- 3 To teach in another field
- 4 For a nonteaching position in elementary or secondary education
- 5 For an occupation outside elementary or secondary education
- 6 Other – Specify ↘

26. How long do you plan to remain in teaching?

Mark (X) only one box.

- 164
- 1 As long as I am able
- 2 Until I am eligible for retirement
- 3 Will probably continue unless something better comes along
- 4 Definitely plan to leave teaching as soon as I can
- 5 Undecided at this time

GO to item 28.

27. In how many years do you plan to retire from teaching?

165

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| |
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Years

SECTION II – EDUCATION ACTIVITIES AND FUTURE PLANS – CONTINUED

28. What do you expect your MAIN activity will be during the NEXT SCHOOL YEAR (1995–96)?

Mark (X) only one box.

- 166
- 1 Teaching in this school
 - 2 Teaching in another school in this school system
 - 3 Teaching in another public school system
 - 4 Teaching in a private school
 - 5 Teaching in a preschool
 - 6 Teaching at the postsecondary level
 - 7 Working as a substitute teacher
 - 8 Student at a college or university
 - 9 Working in a nonteaching occupation in the field of education
 - 10 Working in an occupation outside the field of education
 - 11 Caring for family members
 - 12 Unemployed and seeking work
 - 13 Military service
 - 14 Retired

SECTION III – YOUR OPINIONS

POSSIBLE STEPS SCHOOLS MIGHT TAKE TO ENCOURAGE TEACHERS TO REMAIN IN TEACHING

(Use codes to answer items 29a, b, and c.)

- 01 Providing higher salaries and/or better fringe benefits
- 02 Improving opportunities for professional advancement
- 03 Dealing more effectively with student discipline and making schools safer
- 04 Giving teachers more authority in the school and in their own classrooms
- 05 Increasing standards for students' academic performance
- 06 Providing better resources and materials for classroom use
- 07 Decreasing class size
- 08 Giving special recognition and/or special assignments to excellent or outstanding teachers
- 09 Reducing the paperwork burden on teachers
- 10 Providing more support for new teachers (e.g., mentor teacher programs)
- 11 Increasing parent involvement in the schools
- 12 Reducing teacher workload
- 13 Providing merit pay or other pay incentives to teachers
- 14 Improving opportunities for professional development
- 15 Providing tuition reimbursement for coursework required for certification or career advancement
- 16 Revising health insurance program to include stress reduction seminars, counseling, and physical fitness options

29a. What would be the most effective step that schools might take to encourage teachers to remain in teaching?

Enter code from above.

- 167
- | | |
|--|--|
| | |
|--|--|
- Code Most effective step

b. What would be the second most effective step?

Enter code from above.

- 168
- | | |
|--|--|
| | |
|--|--|
- Code Second step

c. What would be the third most effective step?

Enter code from above.

- 169
- | | |
|--|--|
| | |
|--|--|
- Code Third step

SECTION III – YOUR OPINIONS – CONTINUED

| 30. How satisfied are you with EACH of the following aspects of teaching? Are you (a) Very satisfied, (b) Somewhat satisfied, (c) Somewhat dissatisfied, or (d) Very dissatisfied with – | Very satisfied | Somewhat satisfied | Somewhat dissatisfied | Very dissatisfied |
|---|--------------------------------|----------------------------|----------------------------|----------------------------|
| | (a) | (b) | (c) | (d) |
| a. Salary | 170 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| b. Opportunities for professional advancement | 171 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| c. Opportunities for professional development | 172 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| d. Recognition and support from administrators | 173 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| e. Safety of school environment | 174 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| f. Your influence over school policies and practices | 175 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| g. Autonomy or control over your own classroom | 176 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| h. Professional prestige | 177 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| i. Benefits | 178 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| j. Procedures for performance evaluation | 179 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| k. Teaching load | 180 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| l. Availability of resources and materials/equipment for your classroom | 181 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| m. General work conditions | 182 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| n. Job security | 183 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| o. Professional caliber of colleagues | 184 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| p. Intellectual challenge | 185 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| q. Student motivation to learn | 186 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| r. School learning environment | 187 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| s. Student discipline and behavior | 188 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| t. Class size | 189 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| u. Support from parents | 190 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| v. The esteem of society for the teaching profession | 191 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| w. Overall job satisfaction | 192 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |

SECTION IV – TEACHING METHODS

This section asks about the teaching strategies, instructional practices, and organizational techniques you use in teaching. The information you provide is intended to describe students' educational experiences and inform future national surveys of school processes.

Think of the class for which you had primary responsibility **last semester or grading period** when answering the following questions. If you were responsible for a single group of students all day (such as an elementary teacher might have been), think of them as the designated class. If you were responsible for multiple classes or groups of students (such as a content area or special education teacher might have been), select your first instructional class or group of the day (not homeroom). Think of this as the **"DESIGNATED" class**.

TEACHING ASSIGNMENT FIELD CODES FOR QUESTION 31

General

- 01 Prekindergarten
- 02 Kindergarten
- 03 General elementary

Special areas

- 86 American Indian/Native American studies
- 10 Art
- 12 Basic skills and remedial education
- 13 Bilingual education
- 17 Computer science
- 18 Dance
- 19 Drama/Theater
- 21 English/Language arts
- 23 English as a second language
- 26 Gifted
- 28 Home economics
- 16 Journalism
- 33 Mathematics
- 35 Military science
- 37 Music
- 39 Philosophy
- 40 Physical education, health
- 43 Reading
- 44 Religion
- 47 Social studies/social science (including history)

Foreign language

- 51 French
- 52 German
- 53 Latin
- 54 Russian
- 55 Spanish
- 56 Other foreign language

Science

- 57 Biology/Life science
- 58 Chemistry
- 59 Geology/Earth science/Space science
- 09 Physical science
- 60 Physics
- 61 General and all other science

Vocational-technical education

- 05 Accounting
- 06 Agriculture
- 14 Business, marketing
- 27 Health occupations
- 30 Industrial arts
- 49 Trade and industry
- 50 Technical
- 83 Other vocational-technical education

Special education

- 67 Special education, general
- 68 Emotionally disturbed
- 69 Mentally retarded
- 70 Speech/Language impaired
- 71 Deaf and hard-of-hearing
- 72 Visually handicapped
- 73 Orthopedically impaired
- 74 Mildly handicapped
- 75 Severely handicapped
- 76 Specific learning disabilities
- 77 Other special education

84 All others

31. What was the subject matter of your DESIGNATED CLASS last semester or grading period?

Record the two digit code from the list above and the field name.

| | | |
|--|--|--|
| | | |
|--|--|--|

Code

Main assignment field

SECTION IV – TEACHING METHODS – CONTINUED

32. In what grade levels are the students in your DESIGNATED CLASS?

Mark (X) all that apply.

- | | | | |
|-----|--|-----|--|
| 194 | 1 <input type="checkbox"/> Ungraded | 202 | 1 <input type="checkbox"/> 6th |
| 195 | 1 <input type="checkbox"/> Prekindergarten | 203 | 1 <input type="checkbox"/> 7th |
| 196 | 1 <input type="checkbox"/> Kindergarten | 204 | 1 <input type="checkbox"/> 8th |
| 197 | 1 <input type="checkbox"/> 1st | 205 | 1 <input type="checkbox"/> 9th |
| 198 | 1 <input type="checkbox"/> 2nd | 206 | 1 <input type="checkbox"/> 10th |
| 199 | 1 <input type="checkbox"/> 3rd | 207 | 1 <input type="checkbox"/> 11th |
| 200 | 1 <input type="checkbox"/> 4th | 208 | 1 <input type="checkbox"/> 12th |
| 201 | 1 <input type="checkbox"/> 5th | 209 | 1 <input type="checkbox"/> Postsecondary |

33. Which of the following describe your DESIGNATED CLASS?

Mark (X) all that apply.

- | | | | |
|-----|---|-----|--|
| 210 | 1 <input type="checkbox"/> Heterogeneous | 216 | 7 <input type="checkbox"/> Advanced placement/college credit |
| 211 | 2 <input type="checkbox"/> Homogeneous | 217 | 8 <input type="checkbox"/> Honors course |
| 212 | 3 <input type="checkbox"/> Remedial | 218 | 9 <input type="checkbox"/> Vocational |
| 213 | 4 <input type="checkbox"/> Special education | 219 | 10 <input type="checkbox"/> Bilingual |
| 214 | 5 <input type="checkbox"/> Gifted | 220 | 11 <input type="checkbox"/> None of the above |
| 215 | 6 <input type="checkbox"/> Academic/college preparatory | | |

34. Write in your estimate of the percentage of students in your DESIGNATED CLASS who were at each level of academic ability for their age and grade. (Numbers should total 100.)

- | | | | |
|-----|--|----------------------|---|
| 221 | Much above the NATIONAL average | <input type="text"/> | % |
| 222 | Somewhat above the NATIONAL average | <input type="text"/> | % |
| 223 | At the NATIONAL average | <input type="text"/> | % |
| 224 | Somewhat below the NATIONAL average | <input type="text"/> | % |
| 225 | Much below the NATIONAL average | <input type="text"/> | % |
| 226 | 1 <input type="checkbox"/> Not applicable | | |

35. Write in your estimate of the percentage of students in your DESIGNATED CLASS who were at each level of academic ability for their age and grade. (Numbers should total 100.)

- | | | | |
|-----|---|----------------------|---|
| 227 | Much above the SCHOOL average | <input type="text"/> | % |
| 228 | Somewhat above the SCHOOL average | <input type="text"/> | % |
| 229 | At the SCHOOL average | <input type="text"/> | % |
| 230 | Somewhat below the SCHOOL average | <input type="text"/> | % |
| 231 | Much below the SCHOOL average | <input type="text"/> | % |
| 232 | 1 <input type="checkbox"/> Not applicable | | |

SECTION IV – TEACHING METHODS – CONTINUED

| 36. Over the past semester, how often did YOU use each of the following instructional strategies with your DESIGNATED CLASS? The strategy need not have taken the entire class period. <i>Mark (X) one response on each line.</i> | Almost every day (a) | Once or twice a week (b) | Once or twice a month (c) | Once or twice a semester (d) | Never (e) |
|---|--------------------------------|-----------------------------|------------------------------|---------------------------------|----------------------------|
| a. Provide instruction to the class as a whole | 233 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| b. Facilitate a discussion | 234 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| c. Demonstrate a concept using the board or overhead projector | 235 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| d. Work with individual students | 236 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| e. Demonstrate a concept using a computer, videotape, or other electronic medium | 237 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| f. Lecture | 238 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| g. Work with small groups of students | 239 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| h. Lead question-and-answer session | 240 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| i. Demonstrate a concept using manipulatives, models, other tools or objects | 241 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| j. Administer a test or quiz for less than a full period | 242 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| k. Administer a test or quiz for a full period | 243 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| 37. In your DESIGNATED CLASS over the last semester, how often did planned in-class activities require that STUDENTS: <i>Mark (X) one response on each line.</i> | | | | | |
| a. Respond orally to questions testing recall | 244 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| b. Use school- or student-owned calculators | 245 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| c. Lead whole group discussions | 246 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| d. Listen to or observe teacher presentations | 247 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| e. Use hands-on materials or objects | 248 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| f. Complete a worksheet or workbook emphasizing routine practice | 249 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| g. Use a textbook | 250 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| h. Engage in discussion primarily with the teacher | 251 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| i. Use school computers for writing | 252 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| j. Use supplementary printed materials other than textbooks | 253 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| k. Engage in discussion primarily with other students | 254 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| l. Respond orally to open-ended questions | 255 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| m. Work on a performing arts project | 256 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

SECTION IV – TEACHING METHODS – CONTINUED

| 38. Indicate the frequency with which STUDENTS did the following in your DESIGNATED CLASS during the last semester. <i>Mark (X) one response on each line.</i> | Almost every day (a) | Once or twice a week (b) | Once or twice a month (c) | Once or twice a semester (d) | Never (e) |
|--|--------------------------------|-----------------------------|------------------------------|---------------------------------|----------------------------|
| a. Explained how what they learned in class related to the real world | 257 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| b. Worked individually on projects or presentations | 258 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| c. Worked on projects that required at least one week to complete | 259 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| d. Evaluated and improved their own work | 260 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| e. Worked on problems for which there were several appropriate answers | 261 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| f. Worked on problems for which there were several appropriate methods of solution | 262 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| g. Worked as part of a group on projects or presentations to earn individual grades | 263 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| h. Evaluated the work of other students | 264 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| i. Worked as part of a group on projects or presentations to earn a group grade | 265 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| j. Put events or things in order and explained why they were organized that way | 266 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| k. Discussed with the whole class solutions developed in small groups | 267 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| l. Conferred with other students about their work | 268 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| 39. Over the last semester, how often did you emphasize the following with these students? <i>Mark (X) one response on each line.</i> | | | | | |
| a. Generalizing from patterns or examples | 269 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| b. Analyzing and interpreting information | 270 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| c. Organizing, summarizing, or displaying information | 271 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| 40. During a class discussion in your DESIGNATED CLASS if a student gave an incorrect response how frequently did you do each of the following? <i>Mark (X) one response on each line.</i> | | | | | |
| a. Call on other students to get their responses and then discuss what is correct | 272 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| b. Ask the student another question to help him or her get the correct response | 273 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| c. Call on another student likely to give the correct response | 274 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| d. Provide the correct response yourself | 275 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

SECTION IV – TEACHING METHODS – CONTINUED

| 41. This following is a list of ACTIVITIES TO COMPLETE AT HOME or homework you might have assigned your students. Although the list is not exhaustive, most activities could be considered variations of those listed below. For each activity described below, indicate the frequency with which you assigned each over the last semester in your DESIGNATED CLASS. <i>Mark "never" for activities you did not assign during the last semester.</i> <i>Mark (X) one response on each line.</i> | Almost every day (a) | Once or twice a week (b) | Once or twice a month (c) | Once or twice a semester (d) | Never (e) |
|--|--------------------------------|-----------------------------|------------------------------|---------------------------------|----------------------------|
| a. Write a journal entry | 276 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| b. Prepare a written report | 277 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| c. Work on problems for which there is no obvious method of solution | 278 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| d. Read the textbook or other assigned reading | 279 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| e. Apply concepts or principles to different or unfamiliar situation | 280 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| f. Read supplementary material | 281 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| g. Complete routine exercises or problems from worksheet, workbook, or text | 282 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| h. Work on a project, gather data, conduct an experiment | 283 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| i. Prepare an oral report | 284 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| j. Complete a short writing assignment | 285 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| 42. When students in your DESIGNATED CLASS were assigned written homework or activities to complete at home, how often did YOU do each of the following? <i>Mark "never" for activities you did not assign during the last semester.</i> <i>Mark (X) one response on each line.</i> | Always (a) | Often (b) | Some- times (c) | Rarely (d) | Never (e) |
| a. Record only whether assignment was completed | 286 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| b. Collect, correct, and keep assignments | 287 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| c. Keep items in a student portfolio | 288 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| d. Collect, correct, and return assignment to students | 289 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| e. Have students exchange assignments and correct them in class | 290 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| f. Have students correct their own assignments in class | 291 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| g. Use assignment as a basis for class discussion | 292 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| h. Use assignment as a basis for grading students | 293 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| i. Use assignment as a basis for lesson planning | 294 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

SECTION IV – TEACHING METHODS – CONTINUED

43. Estimate the amount of time, in minutes, an average student in your class spent doing homework or activities you assigned students in your DESIGNATED CLASS to complete at home during an average WEEK.

Mark (X) only one box.

- 295
- 1 0 minutes
 - 2 1–30 minutes
 - 3 31–60 minutes
 - 4 61–90 minutes
 - 5 91–120 minutes
 - 6 121–150 minutes
 - 7 151–180 minutes
 - 8 181–210 minutes
 - 9 211–240 minutes

44. How often do you use assessment information for the following purposes in your DESIGNATED CLASS?

Mark (X) one response on each line.

| | Always (a) | Often (b) | Some- times (c) | Rarely (d) | Never (e) |
|---|--------------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| a. Determining student grades or other formal progress reports | 296 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| b. Providing feedback to students | 297 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| c. Diagnosing student learning problems | 298 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| d. Reporting to parents | 299 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| e. Assigning students to different programs or tracks | 300 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| f. Planning for future lessons | 301 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

NOTES

SECTION IV – TEACHING METHODS – CONTINUED

45. In determining student grades or other formal progress reports for students in your DESIGNATED CLASS, indicate the importance you gave to each of the following.

| | Extremely important (a) | Very important (b) | Somewhat important (c) | Not important (d) |
|--|--------------------------------|----------------------------|----------------------------|----------------------------|
| <i>Mark (X) one response on each line.</i> | | | | |
| a. Effort | 302 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| b. Individual improvement or progress over past performance | 303 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| c. Absolute level of achievement | 304 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| d. Achievement relative to the rest of the class | 305 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| e. Class participation | 306 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| f. Regular completion of homework assignments | 307 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| g. Consistent attendance | 308 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| h. Results of standardized tests produced outside the school | 309 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| i. Results of tests with open-ended items | 310 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| j. Results of tests with multiple choice or true-false items made by you or other teachers | 311 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| k. Performance on projects or practical exercises | 312 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| l. Your own observations of students | 313 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| m. Items collected in student portfolios | 314 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |

The following questions ask about your classroom use of student **PORTFOLIOS**. Portfolios are a collection of student-generated artifacts that provide evidence over the semester or year about the range and extent of individual student performance and growth. Please answer the following questions about portfolio use last semester or grading period with your **DESIGNATED CLASS**.

46. In what content areas were PORTFOLIOS used with your DESIGNATED CLASS?

If portfolios were not used with your designated class, mark "None".

Mark (X) all that apply.

- 315 1 English/language arts
- 316 2 Math
- 317 3 Reading
- 318 4 Social studies
- 319 5 Science
- 320 6 Art
- 321 7 Music
- 322 8 Home economics
- 323 9 Foreign language
- 324 10 Other
- 325 0 None – **GO to item 51**

SECTION IV – TEACHING METHODS – CONTINUED

47. What types of student work were included in portfolios?

Mark (X) all that apply.

- 326 1 Worksheets
- 327 2 Open-ended problems
- 328 3 Exploratory investigations
- 329 4 Long-term projects
- 330 5 Inter-disciplinary problems
- 331 6 Journal entries
- 332 7 Regularly assigned homework
- 333 8 Self-reflective writing
- 334 9 Narrative writing
- 335 10 Audio or video examples
- 336 11 Group work
- 337 12 Independent work
- 338 13 Tests and assessments

48. How were decisions made about the types of items that went into a student's portfolio? Selecting from those options listed below, indicate the source of directives and suggestions that guided the selection process for portfolios in your DESIGNATED CLASS. Directives are mandated and suggestions are not.

Mark (X) all that apply.

Mark as "NA" those that do not apply.

| | Directive | Suggestion | N/A |
|-------------------------------------|--------------------------------|----------------------------|----------------------------|
| a. School administration | 339 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| b. School committee or task force | 340 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| c. District staff | 341 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| d. District committee or task force | 342 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| e. State administration | 343 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| f. State committee or task force | 344 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| g. Classroom teacher | 345 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| h. Students | 346 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |
| i. Other | 347 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> |

NOTES

SECTION IV – TEACHING METHODS – CONTINUED

49. How often did you use student portfolios in your DESIGNATED CLASS last semester or grading period for the following purposes?

Mark (X) one response on each line.

| | Almost every day (a) | Once or twice a week (b) | Once or twice a month (c) | Once or twice a semester (d) | Never (e) |
|---|--------------------------------|-----------------------------|------------------------------|---------------------------------|----------------------------|
| a. Training students to reflect upon and/or assess each piece of work | 348 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| b. Training students to reflect upon and/or assess their overall progress | 349 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| c. Communicating student progress to parents | 350 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| d. Determining student grades or other formal progress reports | 351 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| e. Planning for future lessons | 352 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| f. Diagnosing student learning problems | 353 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| g. Making informed decisions about student placement | 354 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| h. Making informed decisions about student graduation | 355 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| i. Providing information for program or school accountability | 356 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> | 5 <input type="checkbox"/> |

50. Listed below are statements about portfolio use in the classroom. For your DESIGNATED CLASS last semester or grading period, please indicate whether you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with each statement.

Mark (X) one response on each line.

| | Strongly agree (a) | Somewhat agree (b) | Somewhat disagree (c) | Strongly disagree (d) |
|--|--------------------------------|----------------------------|----------------------------|----------------------------|
| a. Criteria about types of work to be included or excluded in the portfolio were explicitly defined and were known by students | 357 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| b. Criteria and process for evaluating work in the portfolio were explicitly defined and were known by students | 358 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| c. Process to encourage students to reflect upon and revise work included in portfolio was explicitly defined and was known by students | 359 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| d. Process to encourage student and teacher to work collaboratively on portfolios was explicitly defined and was known by students | 360 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| e. Process to identify the amount and type of support student receives in completing each piece was explicitly defined and was known by students | 361 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |

SECTION V – INCENTIVES AND COMPENSATION

51. The following questions refer to your before-tax earnings from teaching and other employment from the summer of 1994 through the end of the 1994-95 school year.

Record earnings in whole dollars.

a. DURING THE SUMMER OF 1994, did you have any earnings from –

(1) Teaching summer school in this or any other school?

362 1 Yes – How much? → 363 \$.00
2 No

(2) Working in a nonteaching job in this or any other school?

364 1 Yes – How much? → 365 \$.00
2 No

(3) Working in any NONSCHOOL job?

366 1 Yes – How much? → 367 \$.00
2 No

b. DURING THE CURRENT SCHOOL YEAR –

(1) What is your academic year base salary for teaching in this school?

368 \$.00 per year

(2) Do you, or will you, earn any additional compensation from your school for extracurricular or additional activities such as coaching, student activity sponsorship, or evening classes?

369 1 Yes – How much? → 370 \$.00
2 No

(3) Do you, or will you, earn additional compensation from working in any job outside this school system?

371 1 Yes – How much? → 372 \$.00
2 No

GO to item 51b(4).

Which of these best describes this job outside the school system? Mark (X) only one box.

373 1 Teaching or tutoring
2 Nonteaching, but education related
3 Not related to education

(4) Have you EARNED income from any other sources this year, e.g., a bonus, state supplement, etc.?

374 1 Yes – How much? → 375 \$.00
2 No

c. What will be your total EARNED income from all sources from the summer of 1994 through the end of this school year? Your answer should equal the sum of your answers to questions 51a(1)–b(4).

376 \$.00

SECTION VI – BACKGROUND INFORMATION

52. Do you receive any income-in-kind in addition to or in lieu of your school salary?

Mark (X) all that apply.

- 377 1 Housing or housing expenses
378 2 Meals
379 3 Tuition for your children
380 4 Child care
381 5 College tuition for yourself
382 6 Car/transportation expenses
383 0 None of the above

53. Which category represents the total combined income (include your own income) of ALL FAMILY MEMBERS age 14 and older in your household during 1994? Include money from jobs, net business or farm income, pensions, dividends, interest, rent, Social Security payments, and any other income received by family members in your household.

Mark (X) only one box.

- 384 1 Less than \$10,000 5 \$25,000 - \$29,999 9 \$50,000 - \$59,999
2 \$10,000 - \$14,999 6 \$30,000 - \$34,999 10 \$60,000 - \$74,999
3 \$15,000 - \$19,999 7 \$35,000 - \$39,999 11 \$75,000 - \$99,999
4 \$20,000 - \$24,999 8 \$40,000 - \$49,999 12 \$100,000 or more

54. What is your current marital status?

- 385 1 Married
2 Widowed, divorced, or separated
3 Never married

55. How many children do you have who are dependent on you (and your spouse) for more than half of their financial support?

- 0 None → **GO to item 57a.**

386

OR

Children supported

56. What was the age of your youngest child on his/her last birthday? (If child is less than one year, please enter "0.")

387 Age of youngest child

57a. Do you have persons other than your spouse or children who are dependent on you for more than half of their financial support?

- 388 1 Yes
2 No

GO to item 58.

b. How many persons other than your spouse or children are dependent on you for more than half of their financial support?

389 Number of persons supported

SECTION VII – RESPONDENT INFORMATION

The survey you have completed may involve a brief follow-up at a later time in order to gain information on current teachers' movements in the labor force. The following information would assist us in contacting you if you move or change jobs.

58. Please PRINT your name, your spouse's name (if applicable), your home address, telephone number, and the most convenient time to reach you.

390 Same as address label

| | | | | | |
|-------------------------|--|--|--|--|--|
| 391 Your name | | | Telephone number – <i>Include area code</i> () | | |
| Spouse's full name | | | Days/times convenient to reach you | | |
| Street address _____ | | | In whose name is the telephone number listed? <i>Mark (X) only one.</i> | | |
| City | | | 1 <input type="checkbox"/> No phone | | |
| State | | | 2 <input type="checkbox"/> My name | | |
| ZIP Code | | | 3 <input type="checkbox"/> Other – <i>Specify</i> ↴ | | |
| | | | _____ | | |

59. What are the names and addresses of two other people who will know where to get in touch with you during the coming years? List no more than one person who now lives with you. Remember to record the relationship of these persons to you (for example, parent, friend, sister, cousin, etc.).

| | | | | | |
|-------------------------|--|--|--|--|--|
| 392 Name | | | Telephone number – <i>Include area code</i> () | | |
| Relationship to you | | | | | |
| Street address _____ | | | In whose name is the telephone number listed? <i>Mark (X) only one.</i> | | |
| City | | | 1 <input type="checkbox"/> No phone | | |
| State | | | 2 <input type="checkbox"/> Name entered above | | |
| ZIP Code | | | 3 <input type="checkbox"/> Other – <i>Specify</i> ↴ | | |
| | | | _____ | | |

| | | | | | |
|-------------------------|--|--|--|--|--|
| 393 Name | | | Telephone number – <i>Include area code</i> () | | |
| Relationship to you | | | | | |
| Street address _____ | | | In whose name is the telephone number listed? <i>Mark (X) only one.</i> | | |
| City | | | 1 <input type="checkbox"/> No phone | | |
| State | | | 2 <input type="checkbox"/> Name entered above | | |
| ZIP Code | | | 3 <input type="checkbox"/> Other – <i>Specify</i> ↴ | | |
| | | | _____ | | |

60. Not counting interruptions, how long did it take to complete this survey?

394 _____ Minutes

**THIS COMPLETES THE QUESTIONNAIRE.
THANK YOU FOR ASSISTING US IN THIS IMPORTANT RESEARCH.
YOUR TIME AND EFFORT ARE APPRECIATED.**

**THANK YOU FOR ASSISTING US IN THIS IMPORTANT SURVEY.
YOUR TIME AND EFFORT ARE APPRECIATED.**

PLEASE RETURN THE QUESTIONNAIRE IN THE ENCLOSED ENVELOPE TO:

**Bureau of the Census
Current Projects Branch
1201 East 10th Street
Jeffersonville, IN 47132-0001**

NOTES

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

