NOTICE – This report is authorized by law (20 U.S.C. 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.

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

STUDENT RECORDS QUESTIONNAIRE

SCHOOLS AND STAFFING SURVEY

1993–94 SCHOOL YEAR

Conducted by:

U.S. Department of Commerce
Bureau of the Census

SASS

THIS SURVEY HAS BEEN ENDORSED BY:

American Association of School Administrators
American Counseling Association
American Federation of Teachers
Council of Chief State School Officers
Council of the Great City Schools
National Association of Elementary School Principals
National Association of Secondary School Principals
National Center for Improving Science Education
National Education Association
National Science Foundation
American Indian Higher Education Consortium
Association of Community Tribal Schools
Bureau of Indian Affairs
National Advisory Council on Indian Education
National Indian Education Association
National Indian School Board Association
Navajo Area School Board Association
Office of Indian Education Programs

American Montessori Society
Christian Schools International
Council for American Private Education
Evangelical Lutheran Church in America
Executive Assistant to the Secretary for Private Education
Friends Council on Education
General Conference of the Seventh-Day Adventist Church
Lutheran Church – Missouri Synod
National Association of Episcopal Schools
National Association of Independent Schools
National Association of Private Schools for Exceptional Children
National Catholic Educational Association
National Independent Private School Association
Oral Roberts University Educational Fellowship
Solomon Schechter Day School Association
Torah Umesorah – National Society for Hebrew Day Schools
United States Catholic Conference
Wisconsin Evangelical Lutheran Synod
1. WHO SHOULD COMPLETE THIS SURVEY

This survey should be completed by the school principal or other school staff member who is familiar with the students' school records.

2. DESCRIPTION OF SURVEY PACKET

This survey packet consists of several individual questionnaires bound together. On page 1 of each questionnaire, we have provided the student’s name and name of the teacher and class period from which the student was selected.

3. HOW TO FILL THE INDIVIDUAL STUDENT QUESTIONNAIRES

(a) Complete each questionnaire with information ONLY about the student named at the top of page 1.

(b) Above each student’s name, we have listed the teacher’s name and class period from which the student was selected. If two or more students in this school have the same name, please verify that you are answering for the correct student.

(c) The questions on page 1 ask if the student was taught by each of three selected teachers. Every student may not have been taught by every teacher. Please do NOT cross out the teachers’ names or substitute another teacher.

(d) If a student is no longer at this school, complete items 1–9 and indicate the student’s current status in item 10 on page 2. Please do NOT substitute another student.

(e) Please use the "Notes" space for any explanations or comments.

4. IF YOU HAVE QUESTIONS

If you have any questions, please call the Bureau of the Census at 1–800–221–1204. Someone will be available to take your call Monday through Friday, between 8:00 a.m. and 4:30 p.m. (Eastern Time).

5. TIME REQUIRED

Please keep count of the time required to complete this survey packet. At the end, you are asked to record the amount of time spent.

6. HOW TO RETURN THE SURVEY PACKET

Please return the completed survey packet in the enclosed envelope to:

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

Please return it within two weeks.
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.

1a. Excluding homeroom, study halls, and free periods, was this student taught by

2a. Excluding homeroom, study halls, and free periods, was this student taught by

3a. Excluding homeroom, study halls, and free periods, was this student taught by

PGM 3
100
1. Yes → GO to item 2a
2. No

140
1. Yes → GO to item 3a
2. No

180
1. Yes → GO to item 4
2. No

b. Did he/she teach this student all or most of the day?

105
1. Yes → GO to item 2a
2. No

145
1. Yes → GO to item 3a
2. No

185
1. Yes → GO to item 4
2. No

C. List the classes that he/she taught this student on or about the date shown above. Record the number of times per week that each class met. Do not include homeroom, study halls, and free periods.

<table>
<thead>
<tr>
<th>Class name</th>
<th>Meetings per week</th>
<th>Class name</th>
<th>Meetings per week</th>
<th>Class name</th>
<th>Meetings per week</th>
</tr>
</thead>
<tbody>
<tr>
<td>110</td>
<td>115</td>
<td>150</td>
<td>155</td>
<td>180</td>
<td>185</td>
</tr>
<tr>
<td>120</td>
<td>125</td>
<td>160</td>
<td>165</td>
<td>190</td>
<td>200</td>
</tr>
<tr>
<td>130</td>
<td>135</td>
<td>170</td>
<td>175</td>
<td>210</td>
<td>215</td>
</tr>
</tbody>
</table>
4. Is this student male or female?
   - Male
   - Female

5. What is this student's date of birth?
   - Month
   - Day
   - Year

6. What is this student's country of birth?
   - USA
   - Other

7a. What is this student's race or ethnicity?
   - American Indian or Alaska Native
   - Asian or Pacific Islander
   - Hispanic, regardless of race
   - Black, not of Hispanic origin
   - White, not of Hispanic origin

   [Go to item 8a]

7b. What American Indian tribe or Alaska Native village is this student a member of?
   - Specify

8a. Has this student ever dropped out of or withdrawn from this school?
   Do not include transfers to another school.
   - Yes
   - No [Go to item 9]

8b. For which of the following reasons did this student drop out or withdraw?
   Mark (X) all that apply.
   - Alcohol or drug abuse
   - Alienation or isolation
   - Did not like school, teachers, or other students
   - Discrimination
   - Employment
   - Family problems
   - Friends withdrew or dropped out
   - Parenthood or pregnancy
   - Poor grades
   - Other - Specify

9. Has this student ever been suspended or expelled from this school due to alcohol or drug abuse?
   - Yes
   - No

10. What is this student's CURRENT status at this school?
    - Enrolled
    - Suspended
    - Expelled
    - Transferred to another school
    - Withdrawn/Dropout/Chronic truant (See definition below)
    - Deceased

11. Prior to this school, which of the following types of schools did this student attend?
    Mark (X) all that apply.
    - Public school
    - Private school
    - Bureau of Indian Affairs-funded school
    - No other school attended
    - Don't know

**DEFINITION**

Question 10 – Withdrawn/Dropout/Chronic Truant – An individual who has not been in school for 4 consecutive weeks or more and is not absent due to illness or injury.
<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>12. What is the primary language spoken in this student’s home?</td>
<td>Mark (X) only one box.</td>
</tr>
<tr>
<td></td>
<td>English</td>
</tr>
<tr>
<td></td>
<td>Spanish</td>
</tr>
<tr>
<td></td>
<td>American Indian or Alaska Native language</td>
</tr>
<tr>
<td></td>
<td>Other</td>
</tr>
<tr>
<td>13. Is this student classified as limited English proficient (LEP)?</td>
<td>(See definition below)</td>
</tr>
<tr>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td>14. Does this student receive free or reduced-price lunches through the</td>
<td></td>
</tr>
<tr>
<td>National School Lunch Program?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td>15. Which of the following services does this student receive?</td>
<td>Mark (X) all that apply</td>
</tr>
<tr>
<td></td>
<td>Gifted and talented</td>
</tr>
<tr>
<td></td>
<td>Remedial education</td>
</tr>
<tr>
<td></td>
<td>Chapter 1</td>
</tr>
<tr>
<td></td>
<td>Before-school or after-school care</td>
</tr>
<tr>
<td></td>
<td>Indian Education Act (Title V)</td>
</tr>
<tr>
<td></td>
<td>English as a Second Language (ESL)/English for Speakers of Other Languages (ESOL) (See definition below)</td>
</tr>
<tr>
<td></td>
<td>Bilingual education (See definition below)</td>
</tr>
<tr>
<td></td>
<td>None of the above</td>
</tr>
<tr>
<td>16a. Is this student receiving special education services under the</td>
<td>Mark (X) only that apply</td>
</tr>
<tr>
<td>Individuals with Disabilities Education Act (IDEA)?</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>GO to item 17</td>
</tr>
<tr>
<td>b. Which of the following disabilities does this student have?</td>
<td>Mark (X) all that apply</td>
</tr>
<tr>
<td></td>
<td>Learning disability</td>
</tr>
<tr>
<td></td>
<td>Emotional disturbance</td>
</tr>
<tr>
<td></td>
<td>Mental retardation</td>
</tr>
<tr>
<td></td>
<td>Speech or language impairment</td>
</tr>
<tr>
<td></td>
<td>Hearing impairment</td>
</tr>
<tr>
<td></td>
<td>Visual impairment</td>
</tr>
<tr>
<td></td>
<td>Orthopedic impairment</td>
</tr>
<tr>
<td></td>
<td>Autism</td>
</tr>
<tr>
<td></td>
<td>Traumatic brain injury</td>
</tr>
<tr>
<td></td>
<td>Other health impairment</td>
</tr>
<tr>
<td>17. At this school, which of the following types of counseling services</td>
<td>Mark (X) all that apply</td>
</tr>
<tr>
<td>is this student currently receiving?</td>
<td>School or academic counseling</td>
</tr>
<tr>
<td></td>
<td>Career counseling</td>
</tr>
<tr>
<td></td>
<td>Family counseling</td>
</tr>
<tr>
<td></td>
<td>Alcohol or drug abuse counseling</td>
</tr>
<tr>
<td></td>
<td>Psychological or mental health counseling</td>
</tr>
<tr>
<td></td>
<td>American Indian or Alaska Native counseling</td>
</tr>
<tr>
<td></td>
<td>Other counseling</td>
</tr>
</tbody>
</table>

**Definitions**

Question 13 – Limited English Proficient – 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.

Question 15 – English as a Second Language (ESL)/English for Speakers of Other Languages (ESOL) – Students with limited English proficiency are provided with intensive instruction in English.

Bilingual Education – Native language is used to varying degrees in instructing students with limited English proficiency.
20. What is this student's CURRENT grade level?

- Ungraded
- Kindergarten
- 1st
- 2nd
- 3rd
- 4th
- 5th
- 6th
- 7th
- 8th
- 9th
- 10th
- 11th
- 12th

GO to next student

21. In which math course is this student CURRENTLY enrolled? Mark only one box. If this student is currently enrolled in more than one math course, mark the box for the highest level in which this student is currently enrolled.

- Remedial math
- General or regular math
- Business or consumer math
- Pre-algebra or enriched math
- Algebra I
- Geometry
- Algebra II
- Trigonometry
- Algebra II/Trigonometry
- Pre-calculus
- Calculus
- Advanced Placement (AP) Calculus
- Other
- None

22. In which science course(s) is this student CURRENTLY enrolled? Mark (X) all that apply.

- General science
- Earth science
- Environmental science
- Physical science
- Anatomy/Physiology
- Biology
- Advanced Placement (AP) Biology
- Chemistry
- Advanced Placement (AP) Chemistry
- Physics
- Advanced Placement (AP) Physics
- Other
- None

23. At this school, including this school year, which of the following types of courses has this student EVER been enrolled in? Mark (X) all that apply.

- American Indian or Alaska Native history
- American Indian or Alaska Native language
- American Indian or Alaska Native culture
- American Indian or Alaska Native arts and crafts
- American Indian tribal government or Alaska Native village government
- Multicultural education with an American Indian or Alaska Native emphasis
- Social studies with an American Indian or Alaska Native emphasis
- 2 or more of the above topics are integrated into the entire curriculum
- None of the above

If this student is in grade 9 or above, CONTINUE with item 24. Otherwise, GO to the next student.

24. How many Advanced Placement (AP) courses is this student CURRENTLY enrolled in?

- None or [ ] AP courses

25. How many Advanced Placement (AP) courses has this student COMPLETED?

- None or [ ] AP courses

26a. What is this student's cumulative grade point average (GPA) for the current school year? Report answer to the nearest tenth.

- GPA

b. What grading scale is used to compute this student’s GPA?

- 0.0 to 4.0
- 0.0 to 5.0
- 0 to 100
- A to E or A to F
- Other

27. How many transcripts have been sent to colleges or universities for this student?

- None or [ ] Transcripts
28. YOUR NAME: 

TITLE: 

AREA CODE: TELEPHONE NUMBER: 

29. Not counting interruptions, how long did it take to complete this questionnaire?

Hours
AND
Minutes

30. Please record the date you completed this form.

Month Day Year

Notes