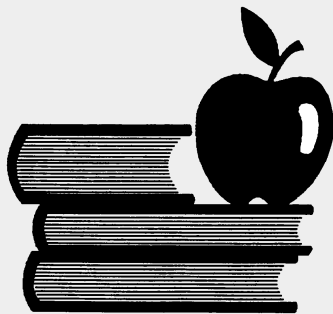


INDIAN SCHOOL PRINCIPAL QUESTIONNAIRE

SCHOOLS AND STAFFING SURVEY

1999-2000



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

THIS SURVEY HAS BEEN ENDORSED BY:

American Association of School Administrators
American Counseling Association
Association of Community Tribal Schools
American Federation of Teachers
Bureau of Indian Affairs,
Office of Indian Education Programs
Council of Chief State School Officers
Council of Great City Schools
Department of Middle Level Services,
National Association of Secondary School Principals

National Association of Elementary School Principals
National Association of Secondary School Principals
National Center for Improving Science Education
National Council of Teachers of Mathematics
National Education Association
National Indian Education Association
National Middle School Association

NOTICE

This report is authorized by law (20 U.S. Code 1221e). Results of this survey will appear in summary or statistical form only.

DEAR PRINCIPAL:

WHO IS CONDUCTING THIS SURVEY?

The National Center for Education Statistics (NCES) of the U.S. Department of Education requests your participation in this survey. The U.S. Census Bureau is conducting this survey by the authority of Section 406(b) of the General Education Provisions Act, as amended (20 USC 1221e).

WHAT IS THE PURPOSE OF THIS SURVEY?

The purpose of this survey is to obtain information about the training, experience, professional background and characteristics of school principals. We will report the data only in statistical summaries.

WHY SHOULD YOU PARTICIPATE IN THIS SURVEY?

We are conducting this survey with only a sample of school principals. Therefore, the value of your individual contribution is greatly increased because it represents many other school principals. We encourage you to participate in this voluntary survey.

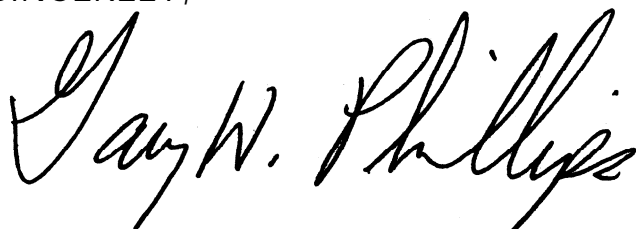
WHERE SHOULD YOU MAIL YOUR COMPLETED QUESTIONNAIRE?

Please return your completed questionnaire in the enclosed envelope. If you do not have the return envelope, call 1-800-221-1204, or mail your questionnaire to:

U.S. Census Bureau
Current Projects Branch
1201 E. 10th Street
Jeffersonville, IN 47132-0001

THANK YOU FOR YOUR COOPERATION IN THIS IMPORTANT EFFORT.

SINCERELY,



GARY W. PHILLIPS
ACTING COMMISSIONER OF EDUCATION STATISTICS

Paperwork Burden Statement

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 1850-0598. 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, D.C. 20202-4651. If you have comments or concerns about the contents of this questionnaire, write directly to: Schools and Staffing Survey, National Center for Education Statistics, 555 New Jersey Avenue, N.W., Washington, D.C. 20208.

INSTRUCTIONS

- 1a. It is important that this questionnaire be completed by the school PRINCIPAL, not by anyone else.
- b. We suggest using a pencil or ball point pen to answer this questionnaire.
- c. If you have any questions, please call the Census Bureau at 1-800-221-1204. Someone will be available to take your call Monday through Friday, between 8:30 a.m. and 5:00 p.m. (Eastern Time).
- d.

2a.

0050 1 Yes
2 No → *Please enter the year when the school closed, and then GO TO item 3.*

0051

b. Does this school have a principal?

0052 1 Yes
2 No

-
3. If you marked "No" for either item 2a or 2b above, do not complete this questionnaire. Return it in the enclosed envelope. If you do not have the return envelope, call 1-800-221-1204, or mail the questionnaire to:

U.S. Census Bureau
Current Projects Branch
1201 E. 10th Street
Jeffersonville, IN 47132-0001

If you did NOT mark "No" for either item 2a or 2b above, continue with item 4.

-
4. At the end of this questionnaire, you are asked to record the amount of time required to complete this form, not counting interruptions. Please record the time you begin.

:

YOUR COMMENTS

I

EXPERIENCE AND TRAINING: Items 5-7

This section asks about your work experience as a principal, previous positions you have held, and training you have had for your principalship.

5. 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, mark (X) the box.*

a. As the principal of THIS school

0053 Year(s)

0 None

b. As the principal of other schools

0054 Year(s)

0 None

6a. PRIOR to becoming a principal, how many years of elementary or secondary teaching experience did you have?

🕒 *Count part of a year as 1 year. If none, mark (X) the box.*

0055 Year(s) of teaching

0 None

b. SINCE becoming a principal, how many years of elementary or secondary teaching experience have you had?

🕒 *Count part of a year as 1 year. If none, mark (X) the box.*

0056 Year(s) of teaching

0 None → **GO TO item 6d on page 5.**

c. Are you currently teaching in this school in which you are now serving as principal?

0057 1 Yes

2 No

6d. BEFORE you became a principal, did you hold the following school positions?

(1) Department head

0058 1 Yes

2 No

(2) Curriculum specialist or coordinator

0059 1 Yes

2 No

(3) Assistant principal or program director

0060 1 Yes

2 No

(4) Guidance counselor

0061 1 Yes

2 No

(5) Library media specialist/Librarian

0062 1 Yes

2 No

(6) Athletic coach/Athletic director

0063 1 Yes

2 No

(7) Sponsor for student clubs, debate teams

0064 1 Yes

2 No

7a. Prior to becoming a principal, did you participate in any training or development program for ASPIRING school principals?

0065 1 Yes

2 No

b. Have you ever participated in a training program for Indian education administration?

0066 1 Yes

2 No



ATTITUDES AND OPINIONS ABOUT EDUCATION AND YOUR SCHOOL: Items 8-11
 This section asks for your views about educational goals and school problems, and for information about school governance.

8. We are interested in the importance you place on various educational goals. From the following eight goals, which do you consider the most important, the second most important, and the third most important?

- 1 - Building basic literacy skills (reading, math, writing, speaking)
- 2 - Encouraging academic excellence
- 3 - Promoting occupational or vocational skills
- 4 - Promoting good work habits and self-discipline
- 5 - Promoting personal growth (self-esteem, self-knowledge, etc.)
- 6 - Promoting human relations skills
- 7 - Promoting specific moral values
- 8 - Promoting multi-cultural awareness or understanding

0067 Most important

0068 Second most important

0069 Third most important

9. Please indicate how far along you think your school is in -	<i>Mark (X) one box on each line.</i>				
	Just beginning	Long way to go	Almost there	We've reached our goal	Not applicable
a. Implementing educational goals. 0070	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b. Implementing organizational/governance goals. 0071	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
c. Establishing a secure financial base. 0072	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
d. Attracting and retaining students. 0073	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
e. Developing a student assessment system. 0074	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
f. Involving parents in the school. 0075	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

10. Using the scale 1-5, where 1 is "No influence" and 5 is "A great deal of influence," how much ACTUAL influence do you think each group or person has on decisions concerning the following activities?

		<i>Mark (X) one box on each line.</i>					
		No influence	←————→			A great deal of influence	
		1	2	3	4	5	
a. SETTING PERFORMANCE STANDARDS FOR STUDENTS OF THIS SCHOOL							
(1)	Local school board	0077	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(2)	Principal	0079	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(3)	Curriculum specialists	0080	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(4)	Teachers	0081	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(5)	School site council	0082	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(6)	Parent association	0083	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b. ESTABLISHING CURRICULUM AT THIS SCHOOL							
(1)	Local school board	0085	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(2)	Principal	0087	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(3)	Curriculum specialists	0088	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(4)	Teachers	0089	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(5)	School site council	0090	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(6)	Parent association	0091	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

10. Continued -

Using the scale 1-5, where 1 is "No influence" and 5 is "A great deal of influence," how much ACTUAL influence do you think each group or person has on decisions concerning the following activities?

		<i>Mark (X) one box on each line.</i>					
		No influence				A great deal of influence	
		1	2	3	4	5	
C.	DETERMINING THE CONTENT OF IN-SERVICE PROFESSIONAL DEVELOPMENT PROGRAMS FOR TEACHERS IN THIS SCHOOL						
(1)	Local school board	0093	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(2)	Principal	0095	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(3)	Curriculum specialists	0096	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(4)	Teachers	0097	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(5)	College and university partners	0098	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(6)	School site council	0099	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(7)	Parent association	0100	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
d.	EVALUATING TEACHERS IN THIS SCHOOL						
(1)	Local school board	0102	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(2)	Principal	0104	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(3)	Teachers	0105	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(4)	School site council	0106	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
(5)	Parent association	0107	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

10. Continued -

Using the scale 1-5, where 1 is "No influence" and 5 is "A great deal of influence," how much ACTUAL influence do you think each group or person has on decisions concerning the following activities?

Mark (X) one box on each line.

No influence					A great deal of influence	
1	2	3	4	5		

e. HIRING NEW FULL-TIME TEACHERS AT THIS SCHOOL

(1) Local school board	0109	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(2) Principal	0111	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(3) Teachers	0112	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(4) School site council	0113	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(5) Parent association	0114	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>

f. SETTING DISCIPLINE POLICY AT THIS SCHOOL

(1) Local school board	0116	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(2) Principal	0118	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(3) Teachers	0119	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(4) School site council	0120	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(5) Parent association	0121	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>

g. DECIDING HOW YOUR SCHOOL BUDGET WILL BE SPENT

(1) Local school board	0123	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(2) Principal	0125	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(3) Curriculum specialists	0126	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(4) Teachers	0127	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(5) School site council	0128	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>
(6) Parent association	0129	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3	<input type="checkbox"/>	4	<input type="checkbox"/>	5	<input type="checkbox"/>

11. To what extent is each of the following matters a problem in this school? Indicate whether each is a SERIOUS problem, a MODERATE problem, a MINOR problem, or NOT a problem in this school.

		<i>Mark (X) one box on each line.</i>				
		SERIOUS problem in this school	MODERATE problem in this school	MINOR problem in this school	NOT a problem in this school	
a.	Student tardiness	0130	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b.	Student absenteeism	0131	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c.	Teacher absenteeism	0132	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d.	Students cutting class	0133	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e.	Physical conflicts among students	0134	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f.	Robbery or theft	0135	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g.	Vandalism of school property	0136	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h.	Student pregnancy	0137	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
i.	Student use of alcohol	0138	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
j.	Student drug abuse	0139	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
k.	Student possession of weapons	0140	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
l.	Student disrespect for teachers	0141	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
m.	Students dropping out	0142	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
n.	Student apathy	0143	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
o.	Lack of parent involvement	0144	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
p.	Poverty	0145	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
q.	Students coming to school unprepared to learn	0146	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
r.	Poor student health	0147	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>



TEACHER PROFESSIONAL DEVELOPMENT: Items 12-16
 This section asks about professional development opportunities and activities for teachers.

		<i>Mark (X) one box on each line.</i>					
		Not important at all ←————→ Very important 1 2 3 4 5					
12.	Using the scale 1-5, where 1 is "Not important at all" and 5 is "Very important," how important is each of the following in determining the in-service professional development activities of teachers in this school?						
a.	School improvement plan	0150	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b.	Implementation of ACADEMIC standards	0151	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
c.	Implementation of SKILLS standards	0152	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
d.	Teacher preferences	0153	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
		<i>Mark (X) one box on each line.</i>					
		Never	Rarely	Sometimes	Frequently	Always	
13.	How often is professional development for teachers at this school -						
a.	Designed or chosen to support the school's improvement goals?	0154	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b.	Designed or chosen to support the implementation of local standards?	0156	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
c.	Evaluated for evidence of improvement in teacher classroom practice?	0157	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
d.	Evaluated for evidence of effects on student achievement?	0158	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
e.	Considered part of teachers' regular work?	0159	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
f.	Planned by teachers in this school?	0160	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
g.	Presented by teachers in this school?	0161	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
h.	Accompanied by the resources that teachers need (e.g., time and materials) to make changes in the classroom?	0162	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

14. In the last 12 months, how often have you participated in professional development activities with teachers from YOUR school?

• Mark (X) only one box.

- 0163 1 Never
2 Once or twice
3 3-5 times
4 6 or more times

15a. Does this school provide teachers with time for professional development during regular contract hours?

- 0164 1 Yes
2 No → **GO TO item 16 below.**

b. Are the following used to provide teachers in this school with time for professional development during regular contract hours?

(1) Substitute teachers to cover teachers' classes

- 0165 1 Yes
2 No

(2) Early dismissal or late start for students

- 0166 1 Yes
2 No

(3) Professional days built in before the beginning of the school year

- 0167 1 Yes
2 No

(4) Professional days built in during the school year

- 0168 1 Yes
2 No

(5) Professional days built in after the school year

- 0169 1 Yes
2 No

(6) Common planning time for teachers

- 0170 1 Yes
2 No

(7) Reduced teacher work loads (less time in the classroom with students or less time on assigned non-instructional duties)

- 0171 1 Yes
2 No

16. Does your school have its own budget for professional development, that is, an amount of money that YOU control?

- 0172 1 Yes
2 No

IV

TEACHER AND SCHOOL PERFORMANCE; PRINCIPAL'S ACTIVITIES: Items 17-22
This section asks about teacher performance, your own professional development and school activities, and your school's performance goals.

17. In your opinion, what percentage of your faculty are presently teaching to high academic standards?

0173 Percent

18. Are the following considerations barriers to the dismissal of poor or incompetent teachers in this school?

a. Personnel policies

0174 1 Yes

2 No

b. Termination decisions not upheld by third party adjudicators

0175 1 Yes

2 No

c. Inadequate teacher assessment documentation

0176 1 Yes

2 No

d. Tenure

0177 1 Yes

2 No

e. Teacher associations and organizations

0178 1 Yes

2 No

f. Dismissal is too stressful and uncomfortable for those involved

0179 1 Yes

2 No

19. In the last 12 months, have YOU participated in the following kinds of professional development?

a. University course(s) related to your role as principal

- 0180 1 Yes
2 No
-

b. Visits to other schools designed to improve your own work as principal

- 0181 1 Yes
2 No
-

c. Individual or collaborative research on a topic of interest to you professionally

- 0182 1 Yes
2 No
-

d. Mentoring and/or peer observation and coaching of principals, as part of a formal arrangement that is recognized or supported by the school

- 0183 1 Yes
2 No
-

e. Participating in a principal network (e.g., organized by an outside agency or through the Internet)

- 0184 1 Yes
2 No
-

f. Workshops or conferences related to your role as principal

- 0185 1 Yes
2 No
-

g. Workshops or training in which you were the presenter

- 0186 1 Yes
2 No
-

h. Attending professional association meetings

- 0187 1 Yes
2 No

20a. Does this school have a DECISION-MAKING BODY such as a school site council?

(A school site council is a school-based committee with the authority to assist in the development of, or to approve, school improvement, budget and other educational plans. Such councils are generally composed of teachers, school administrators and parents.)

- 0188
- 1 Yes
- 2 No → **GO TO item 21 on page 16.**
-

b. Are the following persons part of this decision-making body?

☛ *If this school has more than one such body, respond for the one that has the most influence in decision-making.*

(1) School principal

- 0189
- 1 Yes
- 2 No
-

(2) School vice principal or assistant principal

- 0190
- 1 Yes
- 2 No
-

(3) Teachers

- 0191
- 1 Yes
- 2 No
-

(4) Department heads

- 0192
- 1 Yes
- 2 No
-

(5) Students

- 0193
- 1 Yes
- 2 No
-

(6) Parents

- 0194
- 1 Yes
- 2 No
-

(7) Community representatives

- 0195
- 1 Yes
- 2 No

21. IN THE LAST MONTH, approximately how often did you engage in the following activities in your role as principal of this school?

		<i>Mark (X) one box on each line.</i>			
		Never	Once or twice a month	Once or twice a week	Every day
a. Facilitate achievement of the school's mission through such activities as consensus building, planning, obtaining resources, monitoring progress, etc.	0197	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. Supervise and evaluate faculty and other staff	0198	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
c. Guide the development and evaluation of curriculum and instruction	0199	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
d. Facilitate student learning (e.g., eliminate barriers to student learning, establish high expectations for students)	0200	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
e. Provide and engage staff in professional development activities	0201	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
f. Build professional community among faculty and other staff	0202	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
g. Develop public relations (e.g., relationships with parents, community leaders, and the larger community)	0203	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
h. Maintain the physical security of students, faculty, and other staff	0204	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
i. Manage school facilities, resources, procedures (e.g., maintenance, budget, schedule)	0205	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

YOUR COMMENTS

22a. Does your school have a formal school improvement plan?

- 0221 1 Yes
2 No → *GO TO Section V on page 18.*

b. Do you use any of the following to assess your school's progress on this plan?

(1) State or national tests

- 0222 1 Yes
2 No

(2) Parent or student surveys

- 0223 1 Yes
2 No

(3) Portfolio products

- 0224 1 Yes
2 No

YOUR COMMENTS

V**DEMOGRAPHIC INFORMATION: Items 23-30**
This section asks about your highest degree and other demographic information.

23. What is the highest degree you have earned?

● *Mark (X) only one box.*

- 0225 1 Associate degree
2 Bachelor's degree (B.A., B.S., B.E., etc.)
3 Master's degree (M.A., M.A.T., M.B.A., M.Ed., M.S., etc.)
4 Education specialist or professional diploma (at least one year beyond master's level)
5 Doctorate or first professional degree (Ph.D., Ed.D., M.D., L.L.B., J.D., D.D.S.)
6 Do not have a degree

24. What is your current ANNUAL salary for your position in this school before taxes and deductions?

0226 \$

												.00
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 Per year

25. Are you male or female?

- 0227 1 Male
2 Female

26a. What is your race?

● *Mark (X) only one box.*

- 0228 1 American Indian or Alaska Native (Aleut, Alaska Indian, Yupik, Inupiat)
2 Asian or Pacific Islander (Japanese, Chinese, Filipino, Korean, Asian Indian, Vietnamese, Hawaiian, Guamanian, Samoan, other Asian)
3 Black
4 White

} **GO TO item 27.**

b. Are you enrolled in a state or federally recognized tribe?

- 0229 1 Yes
2 No

27. Are you of Hispanic origin?

- 0230 1 Yes
2 No

28. What is your year of birth?

0231

1	9			
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 Year of birth

29. How much time did it take you to complete this form, not counting interruptions?

0232

--	--

 Minutes

30. Please enter the date you completed this questionnaire.

Month

Day

Year

0233

***Thank you very much for your participation
in this survey.***

Please return this survey in the enclosed envelope. If you do not have the return envelope, call 1-800-221-1204, or mail your questionnaire to:

U.S. Census Bureau
Current Projects Branch
1201 E. 10th Street
Jeffersonville, IN 47132-0001

Find out more about the Schools and Staffing Survey (SASS) and information about Bureau of Indian Affairs (BIA) schools that was collected in the last survey. See SASS on the World Wide Web at:

<http://nces.ed.gov/surveys/sass>

Look for the report "Characteristics of American Indian and Alaska Native Education" under Publications (NCES 98-451).

Additional data collected by the National Center for Education Statistics (NCES) on a variety of topics in elementary, secondary, postsecondary, and international education are available from NCES's Web site at:

<http://nces.ed.gov>

For additional data collected by various Federal agencies, including the Department of Education, visit the FedStats site at:

<http://www.fedstats.gov>