

Spring 2012 Teacher Questionnaire Child Level

Prepared for the U.S. Department of Education
National Center for Education Statistics by:

Westat
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Rockville, Maryland 20850

Use a black or blue ball point pen or #2 pencil to complete this questionnaire.

S_ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	T_ID	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	T	<input type="text"/>	<input type="text"/>
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According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1850-0750. Approval expires 12/31/2014. The time required to complete this information collection is estimated to average 20 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information requested. If you have any comments concerning the accuracy of the time estimate or suggestions for improving the survey instrument, please write to: U.S. Department of Education, Washington, D.C. 20202-4537. If you have comments or concerns regarding the status of your individual response to this survey, write directly to: National Center for Education Statistics, 1990 K Street, N.W., Room 9086, Washington, D.C. 20006-5574.

The collection of information in this survey is authorized by 20 U.S. Code, Section 9541. Participation is voluntary. You may skip questions you do not wish to answer; however, we hope that you will answer as many questions as you can. Your responses are protected from disclosure by federal statute (20 U.S. Code, Section 9573). All responses that relate to or describe identifiable characteristics of individuals may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law. Data will be combined to produce statistical reports. No individual data that links your name, address, telephone number, or identification number with your responses will be included in the statistical reports.



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Dear Teacher,

This questionnaire is a vital part of a major longitudinal study of children's early educational experiences beginning with kindergarten and continuing through grade 5. You have received this questionnaire because one or more of the children in your class(es) are participants in this study. The child who is the subject of this questionnaire is identified on the cover. THIS QUESTIONNAIRE SHOULD BE COMPLETED BY TEACHERS OF CHILDREN IN FIRST GRADE OR HIGHER. IF THE CHILD IDENTIFIED ON THE COVER IS IN KINDERGARTEN, PLEASE REQUEST A KINDERGARTEN QUESTIONNAIRE AND COMPLETE THAT ONE.

The Early Childhood Longitudinal Study, Kindergarten Class of 2010-11 (ECLS-K:2011) is collecting information from teachers of children who are in the study to investigate the relationship between children's academic progress and various school, classroom, teacher, and home characteristics. Taking part in the study is voluntary. You may stop at any time or choose not to answer a question you do not want to answer. Although we realize you are very busy, we urge you to complete this questionnaire as completely and accurately as possible. The information you provide is being collected for research purposes only and will be protected from disclosure to the fullest extent allowable by law (Education Sciences Reform Act of 2002, 20 U.S.C. § 9573). Information from multiple individuals will be combined to produce statistical reports; no information that identifies you will be included in any reports or provided to students, their parents, or other school staff.

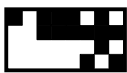
DEFINITIONS

For this study, the following definitions apply:

- English language learner (ELL): A student whose native language is one other than English and whose skills in listening, speaking, reading, or writing English are such that he or she has difficulty understanding school instruction in English.
- English as a Second Language (ESL): An instructional program designed to teach listening, speaking, reading, and writing English language skills to students with limited proficiency in English. The program may focus on a student's level of proficiency in general English. As a language instruction educational program, the ESL program should be connected to academic achievement with the goal of meeting the academic standards that all children must meet.
- Bilingual education program: A program in which native language is used to varying degrees, in conjunction with English, to teach English and academic content to students with limited proficiency in English.
- Dual-language program: Also known as two-way immersion, the goal of these programs is for students to develop language proficiency in two languages by receiving content instruction in English and another language in a classroom that usually consists of both native English speakers and native speakers of the other language.
- Title I: "Improving the Academic Achievement of the Disadvantaged": Title I is a program of the Elementary and Secondary Education Act (ESEA) of 1965, as reauthorized under the No Child Left Behind Act of 2001. The purpose of this program is to ensure that all children have a fair, equal, and significant opportunity to obtain a high-quality education and reach, at a minimum, proficiency on state academic achievement standards and state academic assessments.
- Title III: "Language Instruction for Limited English Proficient and Immigrant Students": Title III is a program of the Elementary and Secondary Education Act (ESEA) of 1965, as reauthorized under the No Child Left Behind Act of 2001. One of the main purposes of this program is to help ensure that children who are limited English proficient, including immigrant children and youth, attain English proficiency, develop high levels of academic attainment in English, and meet the same state academic content and student academic achievement standards as all children are expected to meet.
- Individualized Education Program (IEP): A written statement of the educational program designed to meet the individual needs of a school-aged child with a disability that is judged to affect the child's educational performance. Children who receive special education services under the Individuals with Disabilities Education Act (IDEA) are expected to have an IEP or an IFSP.

- Individualized Family Service Plan (IFSP): A written statement of the educational program and other services designed to enhance the family's capacity to meet the developmental needs of an infant or toddler (preschool-aged) with a disability. The plan includes a description of the appropriate services needed to assist transition into elementary school.
- Section 504 plan: A written plan to provide appropriate services to a child with a disability, whether or not the disability is judged to affect the child's educational performance. Speech therapy services may often be specified as part of a Section 504 plan.

THANK YOU VERY MUCH FOR YOUR HELP.



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MARKING DIRECTIONS

PLEASE READ CAREFULLY AND USE A BLACK OR BLUE BALL POINT PEN OR A SOFT LEAD (#2) PENCIL TO COMPLETE THIS QUESTIONNAIRE. DO NOT USE A FELT-TIP PEN.

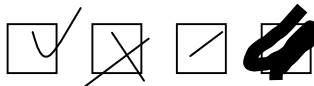
MARKING BOXES

It is important that you mark an "X" in the box next to your answers and print clearly.

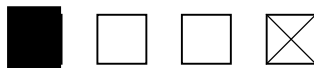
Shown below is the correct way to mark your answers, along with examples of incorrect ways.

Correct Mark:**Incorrect Marks:**

Light and thin, outside the box, thick or scrawled.

**How to Change an Answer:**

Completely black out the box of the incorrect answer and mark an "X" in the box next to the correct answer.

**PRINTING ANSWERS IN BOXES**

Answers should be printed clearly and should not touch or cross any of the box lines. Do not cross zeroes or sevens. That is, do not write a zero with a line through it like this – 0, and do not write a seven with a line through it like this – 7.

Write one number per box like this:

1	2	3	4	5	6	7	8	9	0
---	---	---	---	---	---	---	---	---	---

Write words like this:

John Smith

Academic Rating Scale

The Academic Rating Scale is separated into three areas: (1) Language and Literacy, (2) Science, and (3) Mathematical Thinking. Please rate the child's skills, knowledge, and behaviors within each of these three areas based on your experience with the child identified on the cover of this questionnaire. This is NOT a test and should not be administered directly to the child. Each question includes examples that are meant to help you think of the range of situations in which the child may demonstrate the identified skills and behaviors. **The examples do not exhaust all the ways that a child may demonstrate what he/she knows or can do.** The examples do, however, indicate a level of proficiency a child should have reached in order to receive the highest ratings. Some of these examples describe a very high level of performance (beyond typical students) in order to evaluate achievement levels of the highest performing students.

The following **five-point scale** is used for each of the questions. It reflects the degree to which a child has acquired and demonstrated the targeted skills, knowledge, and behaviors. In addition to the five-point scale, there is a sixth response option, Not Applicable/Skill Not Yet Taught.

Not yet	=	Child <u>has not yet</u> demonstrated skill, knowledge, or behavior.
Beginning	=	Child is <u>just beginning</u> to demonstrate skill, knowledge, or behavior but does so very inconsistently.
In progress	=	Child demonstrates skill, knowledge, or behavior <u>with some regularity</u> but varies in level of competence.
Intermediate	=	Child demonstrates skill, knowledge, or behavior <u>with increasing regularity and average competence</u> but is not completely proficient.
Proficient	=	Child demonstrates skill, knowledge, or behavior <u>competently and consistently</u> .
Not Applicable or Skill Not Yet Taught	=	Skill, knowledge, or behavior has <u>not been introduced</u> in classroom setting.

Rate only the child's **current** skills, knowledge, and behaviors. Rate each child compared to other children of the same age level. Please consider the full range of ratings when answering. If the skill, knowledge, or behavior has been introduced in the classroom, please rate the child by placing an "X" in the appropriate box for your rating. Place an "X" in the box for "*Not Applicable or Skill Not Yet Taught*" only if the skill, knowledge, or behavior has not been introduced in your classroom setting.

Child with Limited English Proficiency/English language learner: Please answer the questions based on your knowledge of this child's skills. If the child does not yet demonstrate skills in English but does demonstrate them in his/her native language, please answer the questions with the child's native language in mind.

Child with Special Needs: It may be necessary to consider adaptations for some questions to make them more inclusive for this child's skills and/or use of adaptive equipment. Some children may utilize alternative forms of verbal communication (for example, sign language, communication boards) or written communication (for example, word processors, Braille, dictation). Please answer the questions with these adaptations in mind.

SECTION I: LANGUAGE AND LITERACY

If you are not the child's primary teacher in this area, you may want to consult with the person most familiar with the child's progress in this area when completing these scales.

THIS CHILD ...	MARK ONE RESPONSE FOR EACH ITEM.					
	Not yet	Beginning	In progress	Intermediate	Proficient	Not applicable or skill not yet taught
1. Contributes relevant information to classroom discussions - for example, during a class discussion, can express an idea or a personal opinion on a topic and the reasons behind the opinion.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Understands and interprets a story or other text read to him/her - for example, by writing a sequel to a story, or dramatizing part of a story, or posing a question about why a particular story event occurred as it did.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Reads words with regular vowel sounds - for example, reads "coat," "junk," "lent," "chimp," "halt," or "bite."	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Reads words with irregular vowel sounds - for example, reads "through," "point," "enough," or "shower."	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Reads first grade books independently with comprehension - for example, reads most words correctly and answers questions about what was read, makes predictions while reading, and retells a story after reading it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Reads first grade books fluently - for example, easily reads words in meaningful phrases rather than reading word by word.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Composes a story with a clear beginning, middle, and end.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Demonstrates an understanding of some of the conventions of print - for example, by appropriately using question marks, exclamation points, and quotation marks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Demonstrates beginning writing skills - for example writes sentences to express ideas while correctly spelling many short words like "hop" or "bed," and, if necessary, attempts approximate phonetic spelling for more difficult words (for example, "vakashun" for "vacation").	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION II: SCIENCE

If you are not the child's primary teacher in this area, you may want to consult with the person most familiar with the child's progress in this area when completing these scales.

THIS CHILD ...	MARK ONE RESPONSE FOR EACH ITEM.					
	Not yet	Beginning	In progress	Intermediate	Proficient	Not applicable or skill not yet taught
10. Uses his/her senses to explore and observe - for example, observes how a push or pull can change the way an object is moving, or observes and describes properties of rocks, soil, and water, or uses tools (such as hand lenses, thermometers, rulers) to gather information about objects.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Forms explanations based on observations and explorations - for example, explains the best growing conditions for a plant after investigating with light and water.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Classifies and compares living and non-living things in different ways - for example, classifies vegetables that grow above or below the ground, or measures objects and classifies them by size or weight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Makes logical predictions when pursuing scientific investigations - for example, predicts whether or not objects are magnetic based on the materials they are made of.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Communicates scientific information - for example, records data from measurement tools (for example, clocks, thermometers, etc.), or constructs bar graphs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Demonstrates understanding of physical science concepts - for example, identifies the three states of matter, identifies that heat causes change, or compares objects according to temperature.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Demonstrates understanding of life science concepts - for example, understands that living organisms inhabit various environments and have various external features to help them satisfy their needs, or recognizes that all plants and animals have basic life needs (for example, air, water, food, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. Demonstrates understanding of earth and space science concepts - for example, describes how weather affects people's daily activities, or explains that shadows are caused when sunlight is blocked by objects, or identifies natural resources.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION III: MATHEMATICAL THINKING

If you are not the child's primary teacher in this area, you may want to consult with the person most familiar with the child's progress in this area when completing these scales.

THIS CHILD ...	MARK ONE RESPONSE FOR EACH ITEM.					
	Not yet	Beginning	In progress	Intermediate	Proficient	Not applicable or skill not yet taught
18. Demonstrates an understanding of place value - for example, by explaining that fourteen is ten plus four, or using two stacks of ten and five single cubes to represent the number 25.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Models, reads, writes, and compares whole numbers - for example, recognizes that 30 is the same quantity if it is 30 rabbits or 30 tallies or 15 + 15 red dots, or understands that the number 25 is smaller than 41.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Counts change with two different types of coins - for example, two quarters and a nickel, or three dimes and two pennies.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Surveys, collects, and organizes data into simple graphs - for example, by making tally marks to represent the number of children who want to play jump rope at recess, or making a picture, bar, line, or circle graph to show the different kinds of fruit children bring to school and the quantity of each type.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Makes reasonable estimates of quantities - for example, looking at a group of objects and deciding if it is more than 10, about 50, or less than 100.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Measures to the nearest whole number using common instruments - for example, rulers, tape measures, thermometers, or scales.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Uses a variety of strategies to solve math problems - for example, by using manipulative materials, using trial and error, making an organized list or table, drawing a diagram, looking for a pattern, acting out a problem, or talking with others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Models, reads, writes, and compares fractions - for example, shows that $\frac{1}{2}$ of the candy bar is $\frac{1}{4} + \frac{1}{4}$, or shows that $\frac{1}{4}$ of a set of 12 is 3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Social Skills

Teachers rated children in their classroom on social skills (including their ability to exercise self-control, interact with others, resolve conflict, and participate in group activities); externalizing and internalizing problem behaviors (e.g., fighting, arguing, anger, depression, low self-esteem, impulsiveness); and learning dispositions or “approaches to learning” (e.g., curiosity, self-direction, organization, and persistence). The social skills and problem behavior items were adapted from the Social Skills Rating Scale (SSRS) by Gresham and Elliot 1990 and are published by NCS Pearson. These items are copyright protected and are not listed. The approaches to learning items were created for the Early Childhood Longitudinal Study, Kindergarten Class of 1998-99 (ECLS-K) by Atkins-Burnett. They are not copyright protected and, therefore, are listed below.

For the set of items below, please think about this child's behavior during the past month or two. Decide how often the child demonstrates the behavior described. We realize that some items apply more to older children, but please answer as accurately as you can. For each item, mark one of the following responses:

- | | | |
|----------------|---|--|
| Never | → | Child never exhibits this behavior. |
| Sometimes | → | Child exhibits this behavior occasionally or sometimes. |
| Often | → | Child exhibits this behavior regularly but not all the time. |
| Very often | → | Child exhibits this behavior most of the time. |
| No opportunity | → | No opportunity to observe this behavior. |

	How Often?				No opportunity to observe
	Never	Some-times	Often	Very often	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Keeps belongings organized.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Shows eagerness to learn new things.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Works independently.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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Social Skills (continued)

	How Often?				No opportunity to observe
	Never	Some- times	Often	Very often	
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Easily adapts to changes in routine.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. Persists in completing tasks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Pays attention well.					
25. Follows classroom rules.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Source: *Social Skills Rating System (SSRS)*. Copyright © 1990, NCS Pearson. Adapted with permission. All rights reserved.

Classroom Behaviors

Please read each statement and decide whether it is a "true" or "untrue" description of this child's reaction to a number of situations within the past six months. If you cannot answer one of the items because you have never seen the child in that situation, then mark "not applicable."

The child:	Extremely untrue	Quite untrue	Slightly untrue	Neither true nor untrue	Slightly true	Quite true	Extremely true	Not applicable
1. When practicing an activity, has a hard time keeping her/his mind on it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Will move from one task to another without completing any of them.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. When drawing or coloring in a book, shows strong concentration.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. When building or putting something together, becomes very involved in what s/he is doing, and works for long periods.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Is easily distracted when listening to a story.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Sometimes becomes absorbed in a picture book and looks at it for a long time.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Can wait before entering into new activities if s/he is asked to.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Plans for new activities or changes in routine to make sure s/he has what will be needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Has trouble sitting still when s/he is told to (story time, etc.).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Is good at following instructions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Approaches places that s/he thinks might be "risky" slowly and cautiously.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Can easily stop an activity when s/he is told "no."	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Source: Putnam, S. P., & Rothbart, M. K. (2006). Development of Short and Very Short forms of the Children's Behavior Questionnaire. *Journal of Personality Assessment*, 87 (1), 103-113. Used with permission.



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Student-Teacher Relationship

Teachers rated 15 items from the Student-Teacher Relationship Scale (STRS) to measure the teacher's perception of the closeness and conflict in his/her relationship with the student. The items from the STRS are not listed because the scale is copyright protected.

Source: Pianta, R.C. & Steinberg, M. (Eds.) (1992). Teacher-child relationships and the process of adjusting to school. San Francisco, CA, US: Jossey-Bass. Used with permission.



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Student Information

1. In which grade is this child enrolled? *MARK ONE RESPONSE.*

- ☐ Kindergarten
- ☐ First grade
- ☐ Second grade
- ☐ Third grade
- ☐ This is an ungraded classroom

2. How long has this child been in your classroom this school year? *MARK ONE RESPONSE.*

- ☐ Entire school year
- ☐ More than one semester but less than the entire school year
- ☐ More than one quarter but less than one semester
- ☐ Less than one quarter of the school year

3. Please indicate the total number of absences for this child for the current school year. *MARK ONE RESPONSE.*

- ☐ No absences
- ☐ 1 to 4 absences
- ☐ 5 to 7 absences
- ☐ 8 to 10 absences
- ☐ 11 to 19 absences
- ☐ 20 or more absences

4. Has this child ever fallen 2 or more weeks behind in school work this year? *MARK ONE RESPONSE.*

- ☐ Yes
- ☐ No (**SKIP TO Q 6**)
- ☐ Not applicable (child has been enrolled in your class less than 2 weeks) (**SKIP TO Q 6**)

**5. Why has this child fallen behind in school work? MARK ALL THAT APPLY.**

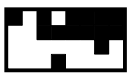
a. A health problem	<input type="checkbox"/>
b. A disciplinary problem	<input type="checkbox"/>
c. Lack of effort	<input type="checkbox"/>
d. Disorganized	<input type="checkbox"/>
e. Lacks pre-requisite skills	<input type="checkbox"/>
f. Frequent absences	<input type="checkbox"/>
g. Emotional/family problems	<input type="checkbox"/>
h. Some other reason (PLEASE SPECIFY)	<input type="checkbox"/>
<div></div>	

6. Does this child receive (or has he/she received during this school year) instruction in any of the following types of programs in your school? MARK YES OR NO ON EACH ROW.

	<u>Yes</u>	<u>No</u>
a. Individual tutoring remedial program in reading/language arts	<input type="checkbox"/>	<input type="checkbox"/>
b. Individual tutoring remedial program in mathematics	<input type="checkbox"/>	<input type="checkbox"/>
c. Pull-out (that is, out of classroom) small group remedial program in reading/language arts	<input type="checkbox"/>	<input type="checkbox"/>
d. Pull-out (that is, out of classroom) small group remedial program in mathematics	<input type="checkbox"/>	<input type="checkbox"/>
e. Gifted and talented program in reading/language arts	<input type="checkbox"/>	<input type="checkbox"/>
f. Gifted and talented program in mathematics	<input type="checkbox"/>	<input type="checkbox"/>

7. Does this child receive (or has he/she received during this school year) instruction and/or related services in your school at any of the following times outside of the regular school day? MARK ONE RESPONSE ON EACH ROW.

	<u>Yes</u>	<u>No</u>	<u>Not offered</u>	<u>Don't know</u>
a. Instruction or services before school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Instruction or services after school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Instruction or services on weekends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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8. **Is English this child's native language?** *MARK ONE RESPONSE.*

☐ Yes **(SKIP TO Q 13)**

☐ No

☐ Don't know

9. **Does this child participate in an instructional program designed to teach English language skills to children with limited English proficiency?** *MARK ONE RESPONSE.*

☐ Yes

☐ No **(SKIP TO Q 13)**

10. **Would you say the instruction this child receives is primarily...** *MARK ONE RESPONSE.*

☐ English as a Second Language (ESL)?

☐ Bilingual education?

☐ Dual-language education?

☐ English-only instruction?

☐ Some other type of instruction? (PLEASE SPECIFY)

11. **How often AND how much time does this child usually receive specialized language instruction (ESL, bilingual education, dual-language program), whether as part of a whole class, in a small group, or in an individualized arrangement?**

11a. **How many days?** *MARK ONE RESPONSE.*

☐ Never

☐ Less than 1 day a week

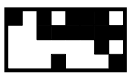
☐ 1 day a week

☐ 2 days a week

☐ 3 days a week

☐ 4 days a week

☐ 5 days a week



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11b. How much time per day (on the days instruction is received)? MARK ONE RESPONSE.

- ☐ Less than ½ hour a day
- ☐ ½ hour to less than 1 hour a day
- ☐ 1 to less than 1½ hours a day
- ☐ 1½ to less than 2 hours a day
- ☐ 2 to less than 2½ hours a day
- ☐ 2½ to less than 3 hours a day
- ☐ 3 hours or more a day

12. During this school year, how often is this child's academic instruction provided in his/her native language? MARK ONE RESPONSE.

- ☐ None of the time
- ☐ Less than half of the time
- ☐ Half of the time
- ☐ More than half of the time
- ☐ Almost all the time

13. Does this child have an IEP/IFSP on record with the school? MARK ONE RESPONSE.

- ☐ Yes
- ☐ No

14. Does this child receive instruction in any of the following types of programs in your school? MARK YES OR NO ON EACH ROW.

	<u>Yes</u>	<u>No</u>
a. Speech-language therapy for children with speech or language disorders/impairments	<input type="checkbox"/>	<input type="checkbox"/>
b. Special education services, not including speech therapy, whether provided in the classroom or in a pull-out setting	<input type="checkbox"/>	<input type="checkbox"/>



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15. Does this child receive special accommodations (for example, for a disability or limited English proficiency) to participate in the school's testing or assessment program? *MARK ONE RESPONSE.*

- ☐ Yes
- ☐ No
- ☐ Don't know
- ☐ Child does not participate in the school's testing or assessment program
- ☐ There is no testing or assessment program at this grade level

16. During *structured* play time, how does this child compare with other children in the class in terms of physical activity? *MARK ONE RESPONSE.*

- ☐ A lot less active than most
- ☐ A little less active than most
- ☐ About the same as most
- ☐ A little more active than most
- ☐ A lot more active than most

17. During *unstructured* play time, how does this child compare with other children in the class in terms of physical activity? *MARK ONE RESPONSE.*

- ☐ A lot less active than most
- ☐ A little less active than most
- ☐ About the same as most
- ☐ A little more active than most
- ☐ A lot more active than most



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18. Overall, how would you rate this child's academic skills in each of the following areas, compared to other children of the same grade level? *MARK ONE RESPONSE ON EACH ROW.*

	Far below average	Below average	Average	Above average	Far above average
a. Language and literacy skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mathematical skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Social Studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19. How many achievement groups in **READING** do you currently have in this child's class? *MARK ONE RESPONSE.*

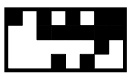
- ☐ I do not use achievement groups for reading **(SKIP TO Q 21)**
- ☐ Two
- ☐ Three
- ☐ Four
- ☐ Five or more

20. In which reading group is this child currently placed? *USE "1" FOR THE HIGHEST ACHIEVEMENT GROUP. WRITE THE NUMBER OF THE ACHIEVEMENT GROUP BELOW.*

Achievement Group

21. How many achievement groups in **MATHEMATICS** do you currently have in this child's class? *MARK ONE RESPONSE.*

- ☐ I do not use achievement groups for mathematics **(SKIP TO Q 23)**
- ☐ Two
- ☐ Three
- ☐ Four
- ☐ Five or more



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22. In which mathematics group is this child currently placed? *USE "1" FOR THE HIGHEST ACHIEVEMENT GROUP. WRITE THE NUMBER OF THE ACHIEVEMENT GROUP BELOW.*

Achievement Group

23. During this school year, have this child's parents/guardians participated in the following activities? *MARK ONE RESPONSE ON EACH ROW.*

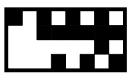
	<u>Yes</u>	<u>No</u>	<u>Not applicable/ not offered</u>
a. Attended regularly-scheduled conferences at your school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Attended parent/teacher informal meetings that you initiated to talk about the child's progress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Returned your telephone calls or e-mails	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Initiated contact with you	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Volunteered to help in your classroom or school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

24. How involved at the school would you say this child's parents/guardians are? *MARK ONE RESPONSE.*

- ☐ Not involved at all
- ☐ Somewhat involved
- ☐ Very involved
- ☐ Don't know

25. During this school year, besides regular teacher conferences, have you communicated with this child's parents/guardians? *MARK ONE RESPONSE.*

- ☐ Yes
- ☐ No (**SKIP TO Q 27**)



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26. **Was the purpose of the communication with this child's parents/guardians to discuss ...**
MARK YES OR NO ON EACH ROW.

	<u>Yes</u>	<u>No</u>
a. Behavior problems the child is having in school?	<input type="checkbox"/>	<input type="checkbox"/>
b. Any problems the child is having with school work?	<input type="checkbox"/>	<input type="checkbox"/>
c. Anything the child is doing particularly well in or better in at school?	<input type="checkbox"/>	<input type="checkbox"/>

27. **Are you this child's primary teacher in the following subject areas? MARK YES OR NO ON EACH ROW.**

	<u>Yes</u>	<u>No</u>
a. Reading/Language Arts	<input type="checkbox"/>	<input type="checkbox"/>
b. Mathematics	<input type="checkbox"/>	<input type="checkbox"/>
c. Science	<input type="checkbox"/>	<input type="checkbox"/>
d. Social Studies	<input type="checkbox"/>	<input type="checkbox"/>

28. **How far in school do you think this child will go? Do you think this child will... MARK ONE RESPONSE.**

- ☐ Receive less than a high school diploma?
- ☐ Graduate from high school?
- ☐ Finish a four- or five-year college degree?
- ☐ Earn an advanced degree?

29. **DATE QUESTIONNAIRE COMPLETED:**

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MONTH		DAY		YEAR	

THANK YOU FOR YOUR COOPERATION



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