

## In-School Core Survey

### Elementary School Questionnaire

2020-2021

This survey asks about your experiences related to your school and health. It also asks about your experiences learning and doing schoolwork from home if you are not going to your school building every weekday in-person.

This survey is voluntary. **You do not have to complete this survey**, but we hope that you will. We need your help!

Your answers will help improve your school.

**Do not write your name on this form or the answer sheet. No one but you will know how you answer these questions.**

Please mark only one answer for each question on the answer sheet. Fill in the bubbles neatly with a **#2 pencil**. Please do not write on the survey questionnaire.

Please read every question carefully. Mark one choice on your answer sheet for each question.

**Thank you for taking this survey!**

## In-School Core Survey

### Your School Schedule

**This year, some students have returned to their school buildings to attend school. Some students are working from home and not going to the school buildings at all. And some students are doing a combination of both.**

1. Which of the following **best describes** your school schedule **during the past 30 days**?
  - A) I went to school in person at my school building for the entire day, Monday through Friday. [**In-School Model**]
  - B) I participated in school from home for the entire day on most or all weekdays and did not go to school in person. [**Remote Learning Model**]
  - C) I went to school in person at my school building for the entire day on some weekdays and participated in school from home on other weekdays. [**Hybrid Model**]
  - D) I went to school in person at my school building for half of the day and participated in classes from home during the other half of the day on most or all weekdays. [**Hybrid Model**]
  
2. Are you female or male?
  - A) Female
  - B) Male
  
3. What grade are you in?
  - A) 3rd grade
  - B) 4th grade
  - C) 5th grade
  - D) 6th grade
  
4. Did you eat breakfast this morning?
  - A) No
  - B) Yes
  
5. How many days a week do you usually go to your school's afterschool program?
  - A) 0 days
  - B) 1 day
  - C) 2 days
  - D) 3 days
  - E) 4 days
  - F) 5 days

## In-School Core Survey

6. On how many of the past 7 days did you exercise, dance, or play sports for 20 minutes or more?

- A) 0 days
- B) 1 day
- C) 2 days
- D) 3 days
- E) 4 days
- F) 5 days
- G) 6 days
- H) 7 days

7. On how many of the past 7 days did you talk to your friends by phone, computer, or tablet (iPad)?

- A) 0 days
- B) 1 day
- C) 2 days
- D) 3 days
- E) 4 days
- F) 5 days
- G) 6 days
- H) 7 days

8. What time did you go to bed last night?

- A) Before 7:00 pm
- B) 7:00–7:59 pm
- C) 8:00–8:59 pm
- D) 9:00–9:59 pm
- E) 10:00–10:59 pm
- F) 11:00–11:59 pm
- G) After 12:00 am

## In-School Core Survey

9. What time did you wake up this morning?

- A) Before 5:00 am
- B) 5:00–5:59 am
- C) 6:00–6:59 am
- D) 7:00–7:59 am
- E) 8:00–8:59 am
- F) 9:00–9:59 am
- G) 10:00–10:59 am
- H) After 11:00 am

10. In the past 30 days, how often did you miss an entire day of school for any reason?

- A) I did not miss any days of school in the past 30 days
- B) 1 day
- C) 2 days
- D) 3 or more days

## In-School Core Survey

**The next questions ask about your relationships with people at school and your learning experiences.**

- 11. Do you feel close to people at school?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
- 12. Are you happy to be at this school?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
- 13. Do you feel like you are part of this school?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
- 14. Do you feel proud to belong to your school?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
- 15. Are the students at your school motivated to learn?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
- 16. Do teachers treat students fairly at school?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time

## In-School Core Survey

17. **Is your school building neat and clean?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

18. **Do the teachers and other grown-ups from your school check on how you are doing?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

19. **Are you given a chance to help decide school activities or rules?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

20. **Do the teachers and other grown-ups at school care about you?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

21. **Do the teachers and other grown-ups at school tell you when you do a good job?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

22. **Do the teachers and other grown-ups at school ask you about your ideas?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

## In-School Core Survey

23. Do the teachers and other grown-ups give you a chance to solve school problems?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
24. Do you get to do interesting activities at school?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
25. Are you given a chance to help decide class activities or rules?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
26. Do your teachers ask you what you want to learn about?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
27. How well do you do in your schoolwork?
- A) I'm one of the best students
  - B) I do better than most students
  - C) I do about the same as others
  - D) I don't do as well as most others
28. Do the teachers and other grown-ups at school listen when you have something to say?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time

## In-School Core Survey

**29. Do the teachers and other grown-ups at school believe that you can do a good job?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

**30. Do you do things to be helpful at school?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

**31. Do the teachers and other grown-ups at school make an effort to get to know you?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

**32. Do the teachers and other grown-ups at school want you to do your best?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

**33. Are the school rules fair?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

**34. Do teachers and other grown-ups at school treat students with respect?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time



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35. Are students treated fairly when they break school rules?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
36. Are students at this school well behaved?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
37. Do students know what the rules are?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
38. Does your school help students resolve conflicts with one another?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
39. Does your school teach students to understand how other students think and feel?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
40. Does your school teach students to feel responsible for how they act?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time

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41. Does your school teach students to care about each other and treat each other with respect?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
42. Do the teachers and other grown-ups make it clear that bullying is not allowed?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
43. If you tell a teacher that you've been bullied, will the teacher do something to help?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
44. Do students at your school try to stop bullying when they see it happening?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
45. Are you interested in the schoolwork you do at school?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
46. Do you finish all your school assignments?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time

## In-School Core Survey

47. **When you get a bad grade, do you try even harder the next time?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
48. **Do you keep working and working on your schoolwork until you get it right?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
49. **Do you keep doing your schoolwork even when it's really hard for you?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
50. **Do you follow the classroom rules?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
51. **Do you follow the playground rules at recess and lunch times?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
52. **Do you listen when your teacher is talking?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time

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53. Are you nice to other students?
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
54. **During the past 30 days, did kids spread mean rumors or lies, or hurtful pictures, about you online, on social media, or on a cell phone?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
55. **Do other kids hit or push you at school when they are not just playing around?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
56. **Do other kids at school spread mean rumors or lies about you?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
57. **During the past year, did you ever bring a gun or knife to school?**
- A) No
  - B) Yes
58. **Do other kids at school call you bad names or make mean jokes about you?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
59. **During the past year, have you ever seen another kid with a gun or knife at school?**
- A) No
  - B) Yes

## In-School Core Survey

**60. Do you feel safe at school?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

**61. Do you feel safe on your way to and from school?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

**62. Have other kids at school ever teased you about what your body looks like?**

- A) No
- B) Yes

## In-School Core Survey

**These next questions are about how you felt over the past 30 days.  
Please choose the answer that best describes you.**

**63. Can you do most things if you try?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

**64. Do you feel good and happy?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

**65. Do you try to work out your problems?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

**66. Are there many things you do well?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

**67. Do you feel sad?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

**68. Do you know where to go for help with a problem?**

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

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69. Do you try to work out your problems by talking or writing about them?

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

70. When you need help, do you find someone to talk with about it?

- A) No, never
- B) Yes, some of the time
- C) Yes, most of the time
- D) Yes, all of the time

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## In-School Core Survey

**The next questions are about cigarettes, vaping, alcohol, and other drugs.**

### Keep the following definitions in mind

- **One drink of alcohol** means drinking one regular size can/bottle of beer or wine cooler, one glass of wine, one mixed drink, or one shot glass of liquor. Questions about alcohol do not include drinking a few sips of wine for religious purposes.
- **Drug** means any substance you use to get “high” or for reasons other than medical (as ordered by a doctor).

71. **Have you ever smoked a cigarette?**
- A) No
  - B) Yes, I smoked a part of a cigarette, like one or two puffs
  - C) Yes, I smoked a whole cigarette
72. **Have you ever vaped (used JUUL, Suorin, SMOK)?**
- A) No
  - B) Yes
73. **Have you ever drunk beer, wine, or other alcohol?**
- A) No
  - B) Yes, I drank one or two sips
  - C) Yes, I drank a full glass
74. **Have you ever sniffed something through your nose to get “high”?**
- A) No
  - B) Yes
75. **Have you ever used any marijuana (smoke, vape, eat, or drink)?**
- A) No
  - B) Yes
  - C) I don't know what marijuana is
76. **Do you think smoking cigarettes is bad for a person's health?**
- A) No, not bad
  - B) Yes, a little bad
  - C) Yes, very bad



## In-School Core Survey

77. Do you think vaping is bad for a person's health?

- A) No, not bad
- B) Yes, a little bad
- C) Yes, very bad

78. Do you think drinking alcohol (beer, wine, liquor) is bad for a person's health?

- A) No, not bad
- B) Yes, a little bad
- C) Yes, very bad

79. Do you think using marijuana (smoke, vape, eat, or drink) is bad for a person's health?

- A) No, not bad
- B) Yes, a little bad
- C) Yes, very bad
- D) I don't know what marijuana is

## In-School Core Survey

**Here are questions about your home.**

- 80. Does a parent or some other grown-up at home care about your schoolwork?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
- 81. Does a parent or some other grown-up at home believe that you can do a good job?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
- 82. Does a parent or some other grown-up at home want you to do your best?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
- 83. Does a parent or some other grown-up at home ask if you did your homework?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
- 84. Does a parent or some other grown-up at home check your homework?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
- 85. Does a parent or some other grown-up at home ask you about school?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time
- 86. Does a parent or some other grown-up at home ask you about your grades?**
- A) No, never
  - B) Yes, some of the time
  - C) Yes, most of the time
  - D) Yes, all of the time

## In-School Core Survey

Please tell us how true each statement is for you over the past 30 days.

87. I have a friend my age who really cares about me.
- A) Not at all true
  - B) A little true
  - C) Pretty much true
  - D) Very much true
88. I have a friend my age who helps me when I am having a hard time.
- A) Not at all true
  - B) A little true
  - C) Pretty much true
  - D) Very much true
89. I have a friend my age who talks with me about my problems.
- A) Not at all true
  - B) A little true
  - C) Pretty much true
  - D) Very much true