

**The National Teacher and Principal Survey (NTPS)
Teacher Focus Groups**

**Appendix C
2015/16 NTPS Teacher Questionnaire**

OMB #1850-0803 v.237
(unchanged from v.235)

National Center for Education Statistics
Institute of Education Sciences
U.S. Department of Education
Washington, D.C.

July 2018
revised September 2018

Conducted by:
U.S. DEPARTMENT OF EDUCATION
NATIONAL CENTER FOR EDUCATION STATISTICS

OMB No. xxxx-xxxx: Approval Expires xx/xx/xxxx
Collected by:
U.S. DEPARTMENT OF COMMERCE
Economics and Statistics Administration
U.S. CENSUS BUREAU

TEACHER QUESTIONNAIRE

NATIONAL TEACHER AND PRINCIPAL SURVEY

2015-16 SCHOOL YEAR



THIS SURVEY HAS BEEN ENDORSED BY:

American Association of School Administrators
American Association of School Librarians
American Federation of Teachers
American Montessori Society
Association for Middle Level Education (formerly National Middle School Association)
Association for Supervision and Curriculum Development
Association of American Educators
Council of the Great City Schools
National Association of Elementary School Principals
National Association of Secondary School Principals
National Parent Teacher Association

Please return your completed questionnaire in the pre-addressed, postage-paid envelope or mail it to:

**U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**

NOTICE:

This survey is authorized by the Education Sciences Reform Act of 2002, 20 U.S. Code §9541(b) and §9543(a). The results will only be produced as statistical summaries.



INSTRUCTIONS AND DEFINITIONS

The data you enter on this form will be captured through the use of imaging technology. Please print all information clearly in ordinary characters, using a **blue or black ballpoint pen**.

CORRECT marking example –
(Use care to keep characters
in their designated spaces.)

3 5

☒ Yes

☐ No

INCORRECT marking example –

35

☐ Yes

☒ No

3 5

☒ Yes

☐ No

OR

- a. If you are the teacher named on the cover page label, please complete the questionnaire.
- b. Please do not write any comments near the answer boxes.
- c. If you are unsure about how to answer a question, please give the best answer you can rather than leaving it blank.
- d. If you have any questions, call the U.S. Census Bureau at 1-888-595-1338. Someone will be available to take your call Monday through Friday, between 8:00 a.m. and 8:00 p.m. (Eastern Time). The U.S. Census Bureau is also available to answer your questions via e-mail at: addp.education.surveys@census.gov.

Teachers who teach in multiple schools: Please respond to questions as they apply to the school where you received this questionnaire.

Grades K-12 and comparable ungraded levels. This survey focuses on schools offering any of grades K-12 or comparable ungraded levels at the elementary, middle, or secondary level. The term "ungraded levels" refers to schools that classify students by an alternative means other than particular grade levels (e.g., Kindergarten, 1st grade, 2nd grade, etc.).

Paperwork Burden Statement

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 voluntary information collection is XXXX-XXXX. The time required to complete this information collection is estimated to average 40 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, suggestions for improving this collection, or comments or concerns about the contents or the status of your individual submission of this questionnaire, please e-mail: addp.education.surveys@census.gov, or write directly to: National Teacher and Principal Survey, National Center for Education Statistics, 1990 K Street, N.W., #9046, Washington, DC 20006.



1. GENERAL INFORMATION

1-1. How do you classify your position at THIS school, that is, the activity at which you spend most of your time during this school year?

🍏 Mark (X) only one box.

- 0100
- 1 ☐ Regular full-time teacher (in any of grades K-12 or comparable ungraded levels)
 - 2 ☐ Regular part-time teacher (in any of grades K-12 or comparable ungraded levels)
 - 3 ☐ Itinerant teacher (i.e., your assignment requires you to provide instruction at more than one school)
 - 4 ☐ Long-term substitute (i.e., your assignment requires that you fill the role of a regular teacher on a long-term basis, but you are still considered a substitute)
 - 5 ☐ Short-term substitute
 - 6 ☐ Student teacher
 - 7 ☐ Teacher aide
 - 8 ☐ Administrator (e.g., principal, assistant principal, director, school head)
 - 9 ☐ Library media specialist or Librarian
 - 10 ☐ Other professional staff (e.g., counselor, curriculum coordinator, social worker)
 - 11 ☐ Support staff (e.g., secretary)

1-2. Which box did you mark in item 1-1 above?

- 0101
- 1 ☐ Box 1 → **GO TO item 1-5 on page 4.**
 - 2 ☐ Box 2, 3, or 4 → **GO TO item 1-4 on page 4.**
 - 3 ☐ Box 5, 6, or 7 → **Please STOP now and return this questionnaire to the U.S. Census Bureau. Thank you for your time.**
 - 4 ☐ Box 8, 9, 10, or 11

1-3. Do you TEACH one or more classes at THIS school, at least once per week, in any of grades K-12 or comparable ungraded levels?

🍏 If you work as a library media specialist or librarian at this school, do not include classes in which you teach students how to use the library (e.g., library skills or library research).

🍏 If you teach a particular specialty either within or outside of a regular classroom (e.g., reading specialist, special education teacher, English as a Second Language teacher), include that time as a regularly scheduled class.

- 0102
- 1 ☐ Yes → **GO TO item 1-4 on page 4.**
 - 2 ☐ No → **Please STOP now and return this questionnaire to the U.S. Census Bureau. Thank you for your time.**



1-4. How much time do you work as a TEACHER in any of grades K-12 or comparable ungraded levels at THIS school?

🍎 Mark (X) only one box.

- 0103 1 ☐ Full time
- 2 ☐ 3/4 time or more, but less than full-time
- 3 ☐ 1/2 time or more, but less than 3/4 time
- 4 ☐ 1/4 time or more, but less than 1/2 time
- 5 ☐ Less than 1/4 time
- 6 ☐ I do not teach any of grades K-12 or comparable ungraded levels →

Please STOP now and return this questionnaire to the U.S. Census Bureau. Thank you for your time.

1-5. When did you begin teaching, either full-time or part-time, at THIS school?

🍎 Do NOT include time spent as a student teacher.

🍎 Enter the month AND year. Report month as a number, that is, 01 for January, 02 for February, etc.

Month

Year

0104

0105

1-6. LAST school year (2014-15), what was your MAIN activity?

🍎 Mark (X) only ONE box which best applies to how you spent the MOST time LAST school year.

🍎 If you were a substitute or itinerant teacher, please mark (X) the box which best applies to your MAIN activity LAST school year.

- 0106 1 ☐ Teaching in this school
- 2 ☐ Teaching in another public elementary, middle, or secondary school IN THIS SCHOOL SYSTEM
- 3 ☐ Teaching in a public elementary, middle, or secondary school IN A DIFFERENT SCHOOL SYSTEM IN THIS STATE
- 4 ☐ Teaching in a public elementary, middle, or secondary school IN ANOTHER STATE
- 5 ☐ Teaching in a PRIVATE elementary, middle, or secondary school
- 6 ☐ Teaching in a preschool
- 7 ☐ Teaching at a college or university
- 8 ☐ Student at a college or university
- 9 ☐ Working in a position in the field of education, but not as a teacher
- 10 ☐ Working in a position outside the field of education
- 11 ☐ On leave (e.g., maternity or paternity leave, disability leave, sabbatical)
- 12 ☐ Caring for family members, but not on leave (e.g., homemaking, childrearing)
- 13 ☐ Military service
- 14 ☐ Unemployed and seeking work
- 15 ☐ Retired from another job 5106
- 16 ☐ Other – please specify →



1-7. When did you FIRST begin teaching, either full-time or part-time, at the K-12 or comparable ungraded level?

🍏 Do NOT include time spent as a student teacher.

🍏 Enter the month AND year. Report month as a number, that is, 01 for January, 02 for February, etc.

Month

Year

0107

0108

1-8. In how many schools have you taught, either full-time or part-time, at the K-12 or comparable ungraded level?

🍏 Do NOT include time spent as a student teacher.

0109

Schools

1-9. Excluding time spent on maternity/paternity leave or sabbatical, how many school years have you worked, either full-time or part-time, as a K-12 or comparable ungraded level teacher in public, public charter, or private schools?

🍏 Include the current school year.

🍏 Do NOT include time spent as a student teacher.

🍏 Report years to the nearest whole year, not fractions or months.

0110

School years



2. CLASS ORGANIZATION

2-1. Do you currently teach students in any of these grades at THIS school?

🍏 Please mark (X) Yes or No for each grade level.

| | | | | | |
|------|-----------------|----------------------------|-----|----------------------------|----|
| 0200 | Prekindergarten | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0201 | Kindergarten | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0202 | 1st | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0203 | 2nd | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0204 | 3rd | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0205 | 4th | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0206 | 5th | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0207 | 6th | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0208 | 7th | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0209 | 8th | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0210 | 9th | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0211 | 10th | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0212 | 11th | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0213 | 12th | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |
| 0214 | Ungraded | 1 <input type="checkbox"/> | Yes | 2 <input type="checkbox"/> | No |

2-2. Of all the students you teach at THIS school, how many have an Individualized Education Program (IEP) because they have disabilities or are special education students?

🍏 Do NOT include students who have only a 504 plan.

🍏 If none, please mark (X) the box.

0215 0 ☐ None or Students



2-3. Of all the students you teach at THIS school, how many are of limited-English proficiency (LEP) or are English-language learners (ELLs)?

(Students of limited-English proficiency [LEP] or English-language learners [ELLs] are those 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.)

🍏 If none, please mark (X) the box.

0216 0 ☐ None or Students

2-4. Using Table 1 on page 10, this school year, in what subject is your MAIN teaching assignment at THIS school, that is, the subject matter in which you teach the most classes?

🍏 Record one of the main teaching assignment codes and labels from Table 1 on page 10.

0217 Main Teaching Assignment Code 5217 Main Teaching Assignment Label

2-5. Are you intentionally assigned to instruct the same group of students for more than one year (e.g., looping)?

0218 1 ☐ Yes

2 ☐ No

2-6a. During any of your classes, do you have students use instructional software to learn some or all of their lessons?

0219 1 ☐ Yes

2 ☐ No → GO TO item 2-7 on page 8.

b. Does any of the instructional software the students use AUTOMATICALLY ADJUST the level of instruction to an individual student's performance?

0220 1 ☐ Yes

2 ☐ No



2-7. Which statement best describes the way YOUR classes at THIS school are organized?

🍏 *Mark (X) only one box.*

0221

- 1 ☐ You instruct several classes of different students most or all of the day in one or more subjects (sometimes called Departmentalized Instruction).
- 2 ☐ You are an elementary school teacher who teaches only one subject to different classes of students (sometimes called an Elementary Subject Specialist).
- 3 ☐ You instruct the same group of students all or most of the day in multiple subjects (sometimes called a Self-Contained Class).
- 4 ☐ You are one of two or more teachers, in the same class, at the same time, and are jointly responsible for teaching the same group of students all or most of the day (sometimes called Team Teaching).
- 5 ☐ You instruct a small number of selected students released from or in their regular classes in specific skills or to address specific needs (sometimes called a "Pull-Out" Class or "Push-In" Instruction).

2-8. Which box did you mark in item 2-7 above?

0222

1 ☐ Box 1 or 2 → *GO TO item 2-12 on page 11.*

2 ☐ Box 3 or 4

3 ☐ Box 5 → *GO TO item 2-10 below.*

2-9. During your most recent FULL WEEK of teaching at THIS school, what is the total number of students enrolled in the class you taught?

🍏 *If you teach more than one self-contained class, report the number from your class with the most students.*

0223

Students → *GO TO item 2-11 on page 9.*

2-10. During your most recent FULL WEEK of teaching at THIS school, what is the average number of students you taught at any one time?

0224

Students



2-11. During your most recent FULL WEEK of teaching, approximately how many hours did YOU spend teaching each of the following subjects at THIS school?

🍏 If you taught two or more subjects at the same time, apportion the time to each subject the best you can.

🍏 Report hours to the nearest whole hour; do not record fractions of an hour or minutes.

🍏 If you did not teach a particular subject during the week, mark (X) the "None" box.

a. English, reading, or language arts (including reading and writing)

0225 0 ☐ None or Hours per week

(1) Of these hours, how many were designated for reading instruction?

0226 0 ☐ None or Hours per week

GO TO item 2-11b below.

b. Arithmetic or mathematics

0227 0 ☐ None or Hours per week

c. Social studies or history

0228 0 ☐ None or Hours per week

d. Science

0229 0 ☐ None or Hours per week

GO TO Section 3 on page 12.



**Table 1. Main Teaching Assignment and Subject-matter Codes and Labels
For Questions 2-4 and 2-13**

General Education Codes and Labels

Elementary Education

- 101 Early childhood or pre-K, general
- 102 Elementary grades, general
- 103 Middle grades, general

Special Education

- 110 Special education, any

Subject-matter Specific Codes and Labels

Arts and Music

- 141 Art or arts and crafts
- 142 Art history
- 143 Dance
- 144 Drama or theater
- 145 Music

English and Language Arts

- 151 Communications
- 152 Composition
- 153 English
- 154 Journalism
- 155 Language arts
- 157 Literature or literary criticism
- 158 Reading
- 159 Speech

English as a Second Language (ESL)

- 160 ESL or bilingual education: General
- 161 ESL or bilingual education: Spanish
- 162 ESL or bilingual education: Other languages

Foreign Languages

- 171 French
- 172 German
- 173 Latin
- 174 Spanish
- 175 Other foreign language

Health Education

- 181 Health education
- 182 Physical education

Mathematics and Computer Science

- 191 Algebra I
- 192 Algebra II
- 193 Algebra III
- 194 Basic and general mathematics
- 195 Business and applied math
- 196 Calculus and pre-calculus
- 197 Computer science
- 198 Geometry
- 199 Pre-algebra
- 200 Statistics and probability
- 201 Trigonometry

Natural Sciences

- 210 Science, general
- 211 Biology or life sciences
- 212 Chemistry
- 213 Earth sciences
- 214 Engineering
- 215 Integrated science
- 216 Physical sciences
- 217 Physics
- 218 Other natural sciences

Social Sciences

- 220 Social studies, general
- 221 Anthropology
- 222 Area or ethnic studies (excluding Native American studies)
- 225 Economics
- 226 Geography
- 227 Government or civics
- 228 History
- 231 Native American studies
- 232 Political Science
- 233 Psychology
- 234 Sociology
- 235 Other social sciences

Career or Technical Education

- 241 Agriculture and natural resources
- 242 Business management
- 243 Business support
- 244 Marketing and distribution
- 245 Healthcare occupations
- 246 Construction trades, engineering, or science technologies (including CADD and drafting)
- 247 Mechanics and repair
- 249 Manufacturing or precision production (electronics, metalwork, textiles, etc.)
- 250 Communications and related technologies (including design, graphics, or printing; not including computer science)
- 253 Personal and public services (including culinary arts, cosmetology, child care, social work, protective services, custodial services, and interior design)
- 254 Family and consumer sciences education
- 255 Industrial arts or technology education
- 256 Other career or technical education

Miscellaneous

- 262 Driver education
- 264 Library or information science
- 265 Military science or ROTC
- 266 Philosophy
- 267 Religious studies, theology, or divinity

Other

- 268 Other



NOTE: Items 2-12 and 2-13 are for teachers who marked box 1 or 2 for item 2-7 on page 8.

If you marked box 3, 4, or 5 for item 2-7 → **GO TO Section 3 on page 12.**

2-12. How many separate class periods or sections do you currently teach at THIS school?

🍏 Do NOT include homeroom periods or study halls.

(Example: If you teach 2 classes or sections of chemistry I, a class or section of physics I, and a class or section of physics II, you would report 04 classes or sections.)

0230

Number of classes or sections

2-13. Using Table 1 on page 10, for EACH class period or section that you reported in item 2-12, record the subject-matter code, subject-matter label, grade level code, and number of students.

🍏 If you teach a class or section with more than one grade level, list the grade level with the most students in column C and record the total number of students in column D.

🍏 If you reported more than 10 periods or sections in item 2-12, report on only 10 of those periods or sections.

| | A. Subject-Matter Code from Table 1 | B. Subject-Matter Label from Table 1 | C. Grade Level Code from list below | D. Number of Students |
|---------|---|--|---|--------------------------|
| Example | 1 9 2 | Algebra II | 1 1 | 3 3 |
| (1) | 0240 | 5240 | 0250 | 0260 |
| (2) | 0241 | 5241 | 0251 | 0261 |
| (3) | 0242 | 5242 | 0252 | 0262 |
| (4) | 0243 | 5243 | 0253 | 0263 |
| (5) | 0244 | 5244 | 0254 | 0264 |
| (6) | 0245 | 5245 | 0255 | 0265 |
| (7) | 0246 | 5246 | 0256 | 0266 |
| (8) | 0247 | 5247 | 0257 | 0267 |
| (9) | 0248 | 5248 | 0258 | 0268 |
| (10) | 0249 | 5249 | 0259 | 0269 |

Grade Level Codes

If your class period or section has students from more than one grade level (i.e., MIXED GRADES), please list the grade with the most students.

| | | | |
|----|-----------------|----|------------|
| PK | Prekindergarten | 07 | 7th grade |
| KG | Kindergarten | 08 | 8th grade |
| 01 | 1st grade | 09 | 9th grade |
| 02 | 2nd grade | 10 | 10th grade |
| 03 | 3rd grade | 11 | 11th grade |
| 04 | 4th grade | 12 | 12th grade |
| 05 | 5th grade | UG | Ungraded |
| 06 | 6th grade | | |



3. EDUCATION AND TRAINING

3-1a. Do you have a bachelor's degree?

🍏 If you have more than one bachelor's degree, information about additional degrees will be asked in item 3-3 on page 15.

0300

1 ☐ Yes2 ☐ No → GO TO item 3-3 on page 15.

b. What is the name of the college or university where you earned this degree?

Name of college or university

5301

In what city and state is it located?

City

State

5302

5303

0304 1 ☐ Located outside the United States

c. In what year did you receive your bachelor's degree?

0305

Year

d. Which of the following best describes your bachelor's degree?

🍏 Mark (X) only one box.

0306

1 ☐ It was awarded by your school's College of Education, School of Education, or Department of Education2 ☐ It was awarded by another college, school, or department, not in education

e. Using Table 2 on page 13, what was your major field of study?

0307

Major Field
of Study Code

5307

Major Field
of Study Label

f. Did you have a second major field of study?

🍏 Do NOT report academic minors or concentrations.

0308

1 ☐ Yes2 ☐ No → GO TO item 3-1h on page 14.

g. Using Table 2 on page 13, what was your second major field of study?

🍏 Do NOT report academic minors or concentrations.

0309

Major Field
of Study Code

5309

Major Field
of Study Label

**Table 2. Major and Minor Fields of Study Codes and Labels
For Questions 3-1e, 3-1g, 3-1i, 3-2e, and 3-3b**

General Education Codes and Labels

Elementary Education

- 101 Early childhood or pre-K, general
- 102 Elementary grades, general

Secondary Education

- 103 Middle grades, general
- 104 Secondary grades, general

Special Education

- 110 Special education, any

Other Education

- 131 Administration
- 132 Counseling and guidance
- 133 Educational psychology
- 134 Policy studies
- 135 School psychology
- 136 Other non-subject-matter-specific education

Subject-matter Specific Codes and Labels

Arts and Music

- 141 Art or arts and crafts
- 142 Art history
- 143 Dance
- 144 Drama or theater
- 145 Music

English and Language Arts

- 151 Communications
- 152 Composition
- 153 English
- 154 Journalism
- 155 Language arts
- 156 Linguistics
- 157 Literature or literary criticism
- 158 Reading
- 159 Speech

English as a Second Language (ESL)

- 160 ESL or bilingual education: General
- 161 ESL or bilingual education: Spanish
- 162 ESL or bilingual education: Other languages

Foreign Languages

- 171 French
- 172 German
- 173 Latin
- 174 Spanish
- 175 Other foreign language

Health Education

- 181 Health education
- 182 Physical education

Mathematics and Computer Science

- 190 Mathematics
- 197 Computer science
- 200 Statistics and probability

Natural Sciences

- 211 Biology or life sciences
- 212 Chemistry
- 213 Earth sciences
- 214 Engineering
- 217 Physics
- 218 Other natural sciences

Social Sciences

- 220 Social studies, general
- 221 Anthropology

- 222 Area or ethnic studies (excluding Native American studies)

- 223 Criminal justice
- 224 Cultural studies
- 225 Economics
- 226 Geography
- 227 Government or civics
- 228 History
- 229 International studies
- 230 Law
- 231 Native American studies
- 232 Political science
- 233 Psychology
- 234 Sociology
- 235 Other social sciences

Career or Technical Education

- 241 Agriculture and natural resources
- 242 Business management
- 243 Business support
- 244 Marketing and distribution
- 245 Healthcare occupations
- 246 Construction trades, engineering, or science technologies (including CADD and drafting)
- 247 Mechanics and repair
- 249 Manufacturing or precision production (electronics, metalwork, textiles, etc.)
- 250 Communications and related technologies (including design, graphics, or printing; not including computer science)
- 253 Personal and public services (including culinary arts, cosmetology, child care, social work, protective services, custodial services, and interior design)
- 254 Family and consumer sciences education
- 255 Industrial arts or technology education
- 256 Other career or technical education

Miscellaneous

- 261 Architecture
- 263 Humanities or liberal studies
- 264 Library or information science
- 265 Military science or ROTC
- 266 Philosophy
- 267 Religious studies, theology, or divinity

Other

- 268 Other



3-1h. Did you have a minor field of study?

- 0310
- 1 ☐ Yes
- 2 ☐ No → **GO TO item 3-2a below.**

i. Using Table 2 on page 13, what was your minor field of study?

0311 Minor Field of Study Code 5311 Minor Field of Study Label

3-2a. Do you have a master's degree?

🍏 *If you have more than one master's degree, information about additional degrees will be asked in item 3-3 on page 15.*

- 0312
- 1 ☐ Yes
- 2 ☐ No → **GO TO item 3-3 on page 15.**

b. Was at least a portion of the cost of your master's degree paid for by a STATE, SCHOOL, or SCHOOL DISTRICT in which you taught?

- 0313
- 1 ☐ Yes
- 2 ☐ No

c. In what year did you receive your master's degree?

0314 Year

d. Which of the following best describes your master's degree?

🍏 *Mark (X) only one box.*

- 0315
- 1 ☐ It was awarded by your school's College of Education, School of Education, or Department of Education
- 2 ☐ It was awarded by another college, school, or department, not in education

e. Using Table 2 on page 13, what was your major field of study for your master's degree?

0316 Major Field of Study Code 5316 Major Field of Study Label



3-3. Have you earned any of the degrees or certificates listed below?

☐ Yes

☐ No → GO TO item 3-4 on page 16.

| a. Degree or certificate | b. Using Table 2 on page 13, what was your major field of study for each degree or certificate? | c. Which of the following best describes each degree or certificate? | d. In what year? |
|--|---|---|-----------------------------------|
| (1) Vocational certificate 0318 5318 | Major Field of Study Code <input type="text"/> Major Field of Study Label <input type="text"/> | | 0319 Year <input type="text"/> |
| (2) Associate's degree 0320 5320 | Major Field of Study Code <input type="text"/> Major Field of Study Label <input type="text"/> | | 0321 Year <input type="text"/> |
| (3) SECOND Bachelor's degree 0322 5322 | Major Field of Study Code <input type="text"/> Major Field of Study Label <input type="text"/> | 1 <input type="checkbox"/> It was awarded by your school's College of Education, School of Education, or Department of Education 0323 2 <input type="checkbox"/> It was awarded by another college, school, or department, not in education | 0324 Year <input type="text"/> |
| (4) SECOND Master's degree 0325 5325 | Major Field of Study Code <input type="text"/> Major Field of Study Label <input type="text"/> | 1 <input type="checkbox"/> It was awarded by your school's College of Education, School of Education, or Department of Education 0326 2 <input type="checkbox"/> It was awarded by another college, school, or department, not in education | 0327 Year <input type="text"/> |
| (5) Educational specialist or professional diploma (at least one year beyond a master's level) 0328 5328 | Major Field of Study Code <input type="text"/> Major Field of Study Label <input type="text"/> | 1 <input type="checkbox"/> It was awarded by your school's College of Education, School of Education, or Department of Education 0329 2 <input type="checkbox"/> It was awarded by another college, school, or department, not in education | 0330 Year <input type="text"/> |
| (6) Certificate of Advanced Graduate Studies 0331 5331 | Major Field of Study Code <input type="text"/> Major Field of Study Label <input type="text"/> | 1 <input type="checkbox"/> It was awarded by your school's College of Education, School of Education, or Department of Education 0332 2 <input type="checkbox"/> It was awarded by another college, school, or department, not in education | 0333 Year <input type="text"/> |
| (7) Doctorate or first professional degree (Ph.D., Ed.D., M.D., J.D., D.D.S.) 0334 5334 | Major Field of Study Code <input type="text"/> Major Field of Study Label <input type="text"/> | 1 <input type="checkbox"/> It was awarded by your school's College of Education, School of Education, or Department of Education 0335 2 <input type="checkbox"/> It was awarded by another college, school, or department, not in education | 0336 Year <input type="text"/> |



3-4. Have you ever taken any graduate or undergraduate courses that focused SOLELY on teaching methods?

🍎 Do NOT include student teaching (sometimes called practice teaching).

🍎 Do NOT include professional development courses, workshops, or seminars.

- 0337 1 ☐ Yes 
- 2 ☐ No → **GO TO item 3-6 below.**

0338 **How many courses?**
🍎 Mark (X) only one box.

1 ☐ 1 or 2 courses

2 ☐ 3 or 4 courses

3 ☐ 5 to 9 courses

4 ☐ 10 or more courses

3-5. Did you take any of the courses you marked in 3-4 before your first year of teaching?

- 0339 1 ☐ Yes
- 2 ☐ No

3-6. BEFORE your first year of teaching, did you take any graduate or undergraduate courses which taught you —

a. Classroom management techniques?

- 0340 1 ☐ Yes
- 2 ☐ No

b. Lesson planning?

- 0341 1 ☐ Yes
- 2 ☐ No

c. How to assess learning?

- 0342 1 ☐ Yes
- 2 ☐ No

d. How to use student performance data to inform instruction?

- 0343 1 ☐ Yes
- 2 ☐ No

e. How to serve students from diverse economic backgrounds?

- 0344 1 ☐ Yes
- 2 ☐ No



3-6. Continued – BEFORE your first year of teaching, did you take any graduate or undergraduate courses which taught you —

f. How to serve students with special needs?

0345 1 ☐ Yes

2 ☐ No

g. How to teach students who are limited-English proficient (LEP) or English-language learners (ELLs)?

0346 1 ☐ Yes

2 ☐ No

3-7a. Did you have any student teaching (sometimes called practice teaching)?

0347 1 ☐ Yes

2 ☐ No → GO TO Section 4 on page 18.

b. In how many different classrooms did you student teach?

🍏 Mark (X) only one box.

0348 1 ☐ 1

2 ☐ 2

3 ☐ 3 or more

c. How long did your student teaching last?

🍏 If you student taught in more than one classroom, report the total amount of time spent student teaching across all assignments.

🍏 Mark (X) only one box.

0349 1 ☐ 4 weeks or less

2 ☐ 5-7 weeks

3 ☐ 8-11 weeks

4 ☐ 12 weeks or more



4. CERTIFICATION

4-1. Did you enter teaching through an alternative route to certification program?

(An alternative route to certification program is a program that was designed to expedite the transition of nonteachers to a teaching career, for example, a state, district, or university alternative route to certification program.)

- 0400 1 ☐ Yes
- 2 ☐ No

The next series of questions is about state certification. Please read the questions carefully. This section allows teachers to report UP TO TWO current teaching certificates in the state where they are teaching, plus several content areas per certificate, if applicable. Those who have only one certificate that applies to only one content area DO NOT have to fill out the entire section and should follow the GO TO instructions.

4-2a. Which of the following describes the teaching certificate you currently hold that certifies you to teach in THIS state?

🍏 Mark (X) only one box.

🍏 If you currently hold more than one of the following, a second certification may be listed in item 4-3.

- 0401 1 ☐ Regular or standard state certificate or advanced professional certificate
- 2 ☐ Certificate issued after satisfying all requirements except the completion of a probationary period (in some states this is called a probationary certificate)
- 3 ☐ Certificate that requires some additional coursework, student teaching, or passage of a test before regular certification can be obtained (in some states this is called a temporary or provisional certificate)
- 4 ☐ Certificate issued to persons who must complete a certification program in order to continue teaching (in some states this is called a waiver or emergency certificate)
- 5 ☐ I do not hold any of the above certifications in THIS state → GO TO Section 5 on page 22.

b. Using Table 3 on page 19, in what content area(s) and grade range(s) does the teaching certificate marked above certify you to teach in THIS state?

(For some teachers, the content area may be special education or the grade level.)

🍏 If this certificate certifies you to teach in more than one content area, you may report additional content areas in later items.

🍏 If your certificate does not restrict you to a specific grade range(s), mark (X) all three grade ranges.

| (1) Content Area | (2) Grade Range of Certificate (mark (X) all that apply) |
|---------------------------|--|
| Content Area Code | 0403 |
| 0402 <input type="text"/> | 1 <input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 |
| Content Area Label | 0404 |
| | 1 <input type="checkbox"/> At least one of grades 6-8 |
| 5402 <input type="text"/> | 0405 |
| | 1 <input type="checkbox"/> At least one of grades 9-12 |

c. Does this certificate marked in item 4-2a certify you to teach in additional content areas?

- 0406 1 ☐ Yes → GO TO item 4-2d on page 20.
- 2 ☐ No → GO TO item 4-3a on page 20.



Table 3. Certification Content Area Codes and Labels For Questions 4-2b, 4-2d, 4-3c, and 4-3e**General Education Codes and Labels****Elementary Education**

- 101 Early childhood or Pre-K, general
- 102 Elementary grades, general
- 103 Middle grades, general

Secondary Education

- 103 Middle grades, general
- 104 Secondary grades, general

Special Education

- 111 Special education, general
- 112 Autism
- 113 Deaf and hard-of-hearing
- 114 Developmentally delayed
- 115 Early childhood special education
- 116 Emotionally disturbed or behavior disorders

Special Education – Continued

- 117 Learning disabilities
- 118 Intellectual disabilities
- 119 Mildly or moderately disabled
- 120 Orthopedically impaired
- 121 Severely or profoundly disabled
- 122 Speech or language impaired
- 123 Traumatologically brain-injured
- 124 Visually impaired
- 125 Other special education

General Administration

- 131 Administration
- 132 Counseling and guidance

Subject-matter Specific Codes and Labels**Arts and Music**

- 141 Art or arts and crafts
- 142 Art History
- 143 Dance
- 144 Drama or theater
- 145 Music

English and Language Arts

- 151 Communications
- 152 Composition
- 153 English
- 154 Journalism
- 155 Language arts
- 157 Literature or Literary Criticism
- 158 Reading
- 159 Speech

English as a Second Language

- 160 ESL or bilingual education: General
- 161 ESL or bilingual education: Spanish
- 162 ESL or bilingual education: Other languages

Foreign Languages

- 171 French
- 172 German
- 173 Latin
- 174 Spanish
- 175 Other foreign language

Health Education

- 181 Health education
- 182 Physical education

Mathematics and Computer Science

- 190 Mathematics
- 197 Computer science
- 200 Statistics and probability

Natural Sciences

- 210 Science, general
- 211 Biology or life sciences
- 212 Chemistry
- 213 Earth sciences
- 216 Physical sciences
- 217 Physics
- 218 Other natural sciences

Social Sciences

- 220 Social studies, general
- 221 Anthropology
- 222 Area or ethnic studies (excluding Native American studies)
- 225 Economics
- 226 Geography
- 227 Government or civics
- 228 History
- 231 Native American studies
- 232 Political Science
- 233 Psychology
- 234 Sociology
- 235 Other social sciences

Career or Technical Education

- 241 Agriculture and natural resources
- 242 Business management
- 243 Business support
- 244 Marketing and distribution
- 245 Healthcare occupations
- 246 Construction trades, engineering, or science technologies (including CADD and drafting)
- 247 Mechanics and repair
- 249 Manufacturing or precision production (electronics, metalwork, textiles, etc.)
- 250 Communications and related technologies (including design, graphics or printing; not including computer science)
- 253 Personal and public services (including culinary arts, cosmetology, child care, social work, protective services, custodial services, and interior design)
- 254 Family and consumer sciences education
- 255 Industrial arts or technology education
- 256 Other career or technical education

Miscellaneous

- 262 Driver education
- 263 Humanities or Liberal studies
- 264 Library or Information science
- 265 Military science or ROTC
- 266 Philosophy
- 267 Religious studies, theology or divinity

Other

- 268 Other



4-2. Continued –

d. Using Table 3 on page 19, please record all ADDITIONAL content areas and grade ranges in which this certificate certifies you to teach:

🍏 If your certificate does not restrict you to a specific range(s), mark (X) all three ranges.

| Additional Content Area | | Grade Range of Certificate (mark (X) all that apply) | |
|-------------------------|---|--|---|
| (1) | Content Area Code 0407 <input type="text"/> Content Area Label 5407 <input type="text"/> | 1 <input type="checkbox"/> 0408 Early childhood, preschool, or at least one of grades K-5 | 1 <input type="checkbox"/> 0409 At least one of grades 6-8 |
| | | 1 <input type="checkbox"/> 0410 At least one of grades 9-12 | |
| (2) | Content Area Code 0411 <input type="text"/> Content Area Label 5411 <input type="text"/> | 1 <input type="checkbox"/> 0412 Early childhood, preschool, or at least one of grades K-5 | 1 <input type="checkbox"/> 0413 At least one of grades 6-8 |
| | | 1 <input type="checkbox"/> 0414 At least one of grades 9-12 | |
| (3) | Content Area Code 0415 <input type="text"/> Content Area Label 5415 <input type="text"/> | 1 <input type="checkbox"/> 0416 Early childhood, preschool, or at least one of grades K-5 | 1 <input type="checkbox"/> 0417 At least one of grades 6-8 |
| | | 1 <input type="checkbox"/> 0418 At least one of grades 9-12 | |
| (4) | Content Area Code 0419 <input type="text"/> Content Area Label 5419 <input type="text"/> | 1 <input type="checkbox"/> 0420 Early childhood, preschool, or at least one of grades K-5 | 1 <input type="checkbox"/> 0421 At least one of grades 6-8 |
| | | 1 <input type="checkbox"/> 0422 At least one of grades 9-12 | |

4-3a. Do you have another current teaching certificate that certifies you to teach in THIS state?

- 0423 1 ☐ Yes
- 2 ☐ No → **GO TO Section 5 on page 22.**

b. Which of the following describes this current teaching certificate you hold in THIS state?

🍏 Mark (X) only one box.

- 0424 1 ☐ Regular or standard state certificate or advanced professional certificate
- 2 ☐ Certificate issued after satisfying all requirements except the completion of a probationary period (in some states this is called a probationary certificate)
- 3 ☐ Certificate that requires some additional coursework, student teaching, or passage of a test before regular certification can be obtained (in some states this is called a temporary or provisional certificate)
- 4 ☐ Certificate issued to persons who must complete a certification program in order to continue teaching (in some states this is called a waiver or emergency certificate)



4-3. Continued –**c. Using Table 3 on page 19, in what content area(s) and grade range(s) does the teaching certificate marked in question 4-3b on page 20 certify you to teach in THIS state?**

(For some teachers, the content area may be the grade level.)

🍏 If this certificate certifies you to teach in more than one content area, you may report additional content areas in later items.

🍏 If your certificate does not restrict you to a specific grade range(s), mark (X) all three grade ranges.

| (1) Content Area | (2) Grade Range of Certificate (mark (X) all that apply) |
|---|---|
| Content Area Code 0425 <input type="text"/> | <input type="checkbox"/> 0426 1 <input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 |
| Content Area Label 5425 <input type="text"/> | <input type="checkbox"/> 0427 1 <input type="checkbox"/> At least one of grades 6-8 |
| | <input type="checkbox"/> 0428 1 <input type="checkbox"/> At least one of grades 9-12 |

d. Does this certificate marked in item 4-3b certify you to teach in additional content areas?

0429 1 ☐ Yes

2 ☐ No → GO TO Section 5 on page 22.

e. Using Table 3 on page 19, please record all ADDITIONAL content areas and grade ranges in which this certificate certifies you to teach:

🍏 If your certificate does not restrict you to a specific grade range(s), mark (X) all three grade ranges.

| Additional Content Area | Grade Range of Certificate (mark (X) all that apply) |
|---|---|
| (1) Content Area Code 0430 <input type="text"/> | <input type="checkbox"/> 0431 1 <input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 |
| Content Area Label 5430 <input type="text"/> | <input type="checkbox"/> 0432 1 <input type="checkbox"/> At least one of grades 6-8 |
| | <input type="checkbox"/> 0433 1 <input type="checkbox"/> At least one of grades 9-12 |
| (2) Content Area Code 0434 <input type="text"/> | <input type="checkbox"/> 0435 1 <input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 |
| Content Area Label 5434 <input type="text"/> | <input type="checkbox"/> 0436 1 <input type="checkbox"/> At least one of grades 6-8 |
| | <input type="checkbox"/> 0437 1 <input type="checkbox"/> At least one of grades 9-12 |
| (3) Content Area Code 0438 <input type="text"/> | <input type="checkbox"/> 0439 1 <input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 |
| Content Area Label 5438 <input type="text"/> | <input type="checkbox"/> 0440 1 <input type="checkbox"/> At least one of grades 6-8 |
| | <input type="checkbox"/> 0441 1 <input type="checkbox"/> At least one of grades 9-12 |
| (4) Content Area Code 0442 <input type="text"/> | <input type="checkbox"/> 0443 1 <input type="checkbox"/> Early childhood, preschool, or at least one of grades K-5 |
| Content Area Label 5442 <input type="text"/> | <input type="checkbox"/> 0444 1 <input type="checkbox"/> At least one of grades 6-8 |
| | <input type="checkbox"/> 0445 1 <input type="checkbox"/> At least one of grades 9-12 |



5. EARLY CAREER EXPERIENCES

5-1. Was your FIRST year of teaching before the 2011-2012 school year?

1500 1 ☐ Yes → GO TO Section 6 on page 26.

2 ☐ No

5-2. What was your MAIN activity the year before you began teaching at the K-12 or comparable ungraded level?

🍏 Mark (X) only one box.

1501 1 ☐ Student at a college or university

2 ☐ Working as a substitute teacher

3 ☐ Teaching in a preschool

4 ☐ Teaching at a college or university

→ GO TO item 5-4 on page 23.

5 ☐ Working in a position in the field of education, but not as a teacher

6 ☐ Working in an occupation outside the field of education

7 ☐ Caring for family members

8 ☐ Military service

9 ☐ Unemployed and seeking work

10 ☐ Retired from another job

→ GO TO item 5-4 on page 23.

5-3a. What kind of work did you do, that is, what was your occupation?

🍏 Please record your job title; for example, electrical engineer, cashier, typist, farmer, loan officer.

5502

b. What were your most important activities or duties on that job?

🍏 For example, typing, selling cars, driving delivery truck, caring for livestock.

5503

c. How would you classify yourself on that job?

🍏 Mark (X) only one box.

1504 1 ☐ An employee of a PRIVATE company, business, or individual for wages, salary, or commission

2 ☐ A FEDERAL government employee

3 ☐ A STATE government employee

4 ☐ A LOCAL government employee

5 ☐ SELF-EMPLOYED in your own business, professional practice, or farm

6 ☐ Working WITHOUT PAY in a family business or farm

7 ☐ Working WITHOUT PAY in a volunteer job



- 5-4. In your FIRST year of teaching, how well prepared were you to —**
 🍏 *If you are in your first year of teaching, please answer for THIS school year.*

| | | 🍏 Mark (X) one box on each line. | | | |
|----|---|----------------------------------|----------------------------|----------------------------|----------------------------|
| | | Not at all prepared | Somewhat prepared | Well prepared | Very well prepared |
| a. | Handle a range of classroom management or discipline situations? 1505 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| b. | Use a variety of instructional methods? 1506 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| c. | Teach your subject matter? 1507 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| d. | Use computers in classroom instruction? 1508 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| e. | Assess students? 1509 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| f. | Differentiate instruction in the classroom? 1510 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| g. | Use data from student assessments to inform instruction? 1511 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| h. | Teach to state content standards? 1512 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| i. | Teach students who are limited-English proficient [LEP] or English-language learners [ELLs]? 1513 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| j. | Teach students with special needs? 1514 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |

- 5-5. In your FIRST year of teaching, did you participate in a formal schoolwide or districtwide program for beginning teachers aimed to enhance teachers' effectiveness by providing systematic support (sometimes called a teacher induction program)?**

🍏 *If you are in your first year of teaching, please answer for THIS school year.*

1515 1 ☐ Yes

2 ☐ No



5-6. Did you receive the following kinds of support during your FIRST year of teaching?

🍏 *If you are in your first year of teaching, please answer for THIS school year.*

a. Reduced teaching schedule or number of preparations1516 1 ☐ Yes2 ☐ No**b. Common planning time with teachers in your subject**1517 1 ☐ Yes2 ☐ No**c. Seminars or classes for beginning teachers**1518 1 ☐ Yes2 ☐ No**d. Extra classroom assistance (e.g., teacher aides)**1519 1 ☐ Yes2 ☐ No**e. Regular supportive communication with your principal, other administrators, or department chair**1520 1 ☐ Yes2 ☐ No**f. Observation and feedback on your teaching aimed at helping you develop and refine your teaching practice BEYOND any formal administrative observation and feedback you may have received**1521 1 ☐ Yes2 ☐ No**g. Release time to participate in support activities for new or beginning teachers**1522 1 ☐ Yes2 ☐ No

5-7a. In your FIRST year of teaching, were you assigned a master or mentor teacher by your school or district?

🍏 If you are in your first year of teaching, please answer for THIS school year.

1523

1 ☐ Yes2 ☐ No → GO TO Section 6 on page 26.

b. How frequently did you work with your assigned master or mentor teacher during your first year of teaching?

1524

1 ☐ At least once a week2 ☐ Once or twice a month3 ☐ A few times a year4 ☐ Never

c. Had your assigned master or mentor teacher ever instructed students in the same subject area(s) as yours?

1525

1 ☐ Yes2 ☐ No

5-8. Did your assigned master or mentor teacher provide the following types of support during your FIRST year of teaching?

🍏 If you are in your first year of teaching, please answer for THIS school year.

a. Helped with paperwork or record keeping

1526

1 ☐ Yes2 ☐ No

b. Demonstrated lessons

1527

1 ☐ Yes2 ☐ No

c. Helped you prepare lessons that address learning standards

1528

1 ☐ Yes2 ☐ No

d. Helped you develop student assessment tools

1529

1 ☐ Yes2 ☐ No

5-9. Overall, to what extent did your assigned master or mentor teacher improve your teaching in your first year of teaching?

🍏 Mark (X) only one box.

1530

1 ☐ Not at all2 ☐ To a small extent3 ☐ To a moderate extent4 ☐ To a great extent

6. TEACHER WORKING CONDITIONS

For questions 6-1 to 6-3 please report to the nearest whole hour; do not record fractions of an hour or minutes.

6-1. How many hours does your contract require you to work during a typical FULL WEEK at THIS school?

🍏 This would be base contract hours, or the equivalent, NOT including stipends or extra pay for extra duty.

1600

Total WEEKLY hours required to work

6-2. Of the hours you are CONTRACTED to work, how many hours during a typical full week do you DELIVER INSTRUCTION to students in THIS school?

🍏 This number should be less than the reported number of hours in 6-1.

🍏 "PULL-OUT" or "PUSH-IN" TEACHERS: Please include the number of hours you instruct individual students or small groups of students.

🍏 Exclude time spent planning and monitoring students outside of class.

1601

Total WEEKLY hours delivering instruction

6-3. Including hours spent during the school day, before and after school, and on the weekends, how many hours do you spend on ALL teaching and other school-related activities during a typical FULL WEEK at THIS school?

1602

Total WEEKLY hours spent on all teaching and school-related activities



6-4. During this school year, do you or will you do the following for this school or district —**a. Coach a sport?**1603 1 ☐ Yes2 ☐ No**b. Sponsor any student groups, clubs, or organizations?**1604 1 ☐ Yes2 ☐ No**c. Serve as a department lead or chair?**1605 1 ☐ Yes2 ☐ No**d. Serve as a lead curriculum specialist?**1606 1 ☐ Yes2 ☐ No**e. Serve on a schoolwide or districtwide committee or task force?**1607 1 ☐ Yes2 ☐ No**f. Serve as an assigned mentor or mentor coordinator for teachers?**1608 1 ☐ Yes2 ☐ No**6-5. In the LAST SCHOOL YEAR (2014-15), how much of your own money did you spend on classroom supplies, without reimbursement?**

🍏 Please use your best estimate for costs incurred, in whole dollars.

🍏 If none, please mark (X) the box.

0 ☐ None

or

1609 \$, .00

7. SCHOOL CLIMATE AND TEACHER ATTITUDES

7-1. How much actual influence do you think teachers have over school policy AT THIS SCHOOL in each of the following areas?

| | | 🍏 Mark (X) one box on each line. | | | |
|--|------|----------------------------------|----------------------------|----------------------------|----------------------------|
| | | No influence | Minor influence | Moderate influence | A great deal of influence |
| a. Setting performance standards for students at this school | 1700 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| b. Establishing curriculum | 1701 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| c. Determining the content of in-service professional development programs | 1702 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| d. Evaluating teachers | 1703 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| e. Hiring new full-time teachers | 1704 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| f. Setting discipline policy | 1705 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| g. Deciding how the school budget will be spent | 1706 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |

7-2. How much actual control do you have IN YOUR CLASSROOM at this school over the following areas of your planning and teaching?

| | | 🍏 Mark (X) one box on each line. | | | |
|--|------|----------------------------------|----------------------------|----------------------------|----------------------------|
| | | No control | Minor control | Moderate control | A great deal of control |
| a. Selecting textbooks and other instructional materials | 1707 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| b. Selecting content, topics, and skills to be taught | 1708 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| c. Selecting teaching techniques | 1709 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| d. Evaluating and grading students | 1710 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| e. Disciplining students | 1711 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| f. Determining the amount of homework to be assigned | 1712 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |



7-3. To what extent do you agree or disagree with each of the following statements?

| | | 🍏 Mark (X) one box on each line. | | | | |
|----|--|----------------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| | | Strongly agree | Somewhat agree | Somewhat disagree | Strongly disagree | |
| a. | The school administration's behavior toward the staff is supportive and encouraging. | 1713 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| b. | I am satisfied with my teaching salary. | 1714 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| c. | The level of student misbehavior in this school (such as noise, horseplay or fighting in the halls, cafeteria, or student lounge) interferes with my teaching. | 1715 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| d. | I receive a great deal of support from parents for the work I do. | 1716 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| e. | Necessary materials such as textbooks, supplies, and copy machines are available as needed by the staff. | 1717 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| f. | Routine duties and paperwork interfere with my job of teaching. | 1718 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| g. | My principal enforces school rules for student conduct and backs me up when I need it. | 1719 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| h. | Rules for student behavior are consistently enforced by teachers in this school, even for students who are not in their classes. | 1720 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| i. | Most of my colleagues share my beliefs and values about what the central mission of the school should be. | 1721 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| j. | The principal knows what kind of school he or she wants and has communicated it to the staff. | 1722 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| k. | There is a great deal of cooperative effort among the staff members. | 1723 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| l. | In this school, staff members are recognized for a job well done. | 1724 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| m. | I worry about the security of my job because of the performance of my students or my school on state and/or local tests. | 1725 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| n. | State or district content standards have had a positive influence on my satisfaction with teaching. | 1726 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| o. | I am given the support I need to teach students with special needs. | 1727 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| p. | The amount of student tardiness and class cutting in this school interferes with my teaching. | 1728 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| q. | I am generally satisfied with being a teacher at this school. | 1729 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| r. | I make a conscious effort to coordinate the content of my courses with that of other teachers. | 1730 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |



7-4. To what extent is each of the following a problem in this school?

| | | 🍏 Mark (X) one box on each line. | | | |
|--|------|----------------------------------|----------------------------|----------------------------|----------------------------|
| | | Serious problem | Moderate problem | Minor problem | Not a problem |
| a. Student tardiness | 1731 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| b. Student absenteeism | 1732 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| c. Student class cutting | 1733 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| d. Teacher absenteeism | 1734 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| e. Students dropping out | 1735 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| f. Student apathy | 1736 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| g. Lack of parental involvement | 1737 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| h. Poverty | 1738 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| i. Students come to school unprepared to learn | 1739 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| j. Poor student health | 1740 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |

7-5. To what extent do you agree or disagree with each of the following statements?

| | | 🍏 Mark (X) one box on each line. | | | |
|---|------|----------------------------------|----------------------------|----------------------------|----------------------------|
| | | Strongly agree | Somewhat agree | Somewhat disagree | Strongly disagree |
| a. The stress and disappointments involved in teaching at this school aren't really worth it. | 1741 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| b. The teachers at this school like being here; I would describe us as a satisfied group. | 1742 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| c. I like the way things are run at this school. | 1743 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| d. If I could get a higher paying job I'd leave teaching as soon as possible. | 1744 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| e. I think about transferring to another school. | 1745 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| f. I don't seem to have as much enthusiasm now as I did when I began teaching. | 1746 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| g. I think about staying home from school because I'm just too tired to go. | 1747 | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |



7-6. How long do you plan to remain in teaching?

🍏 Mark (X) only one box.

- 1748
- 1 ☐ As long as I am able
 - 2 ☐ Until I am eligible for retirement benefits from this job
 - 3 ☐ Until I am eligible for retirement benefits from a previous job
 - 4 ☐ Until I am eligible for Social Security benefits
 - 5 ☐ Until a specific life event occurs (e.g., parenthood, marriage, retirement of spouse or partner)
 - 6 ☐ Until a more desirable job opportunity comes along
 - 7 ☐ Definitely plan to leave as soon as I can
 - 8 ☐ Undecided at this time

7-7a. Has a student FROM THIS SCHOOL ever threatened to injure you?

- 1749
- 1 ☐ Yes
 - 2 ☐ No → *GO TO item 7-8a below.*

b. Has a student FROM THIS SCHOOL threatened to injure you IN THE PAST 12 MONTHS?

- 1750
- 1 ☐ Yes
 - 2 ☐ No → *GO TO item 7-8a below.*

c. In the past 12 months, how many times has a student FROM THIS SCHOOL threatened to injure you?

1751 Times

7-8a. Has a student FROM THIS SCHOOL ever physically attacked you?

- 1752
- 1 ☐ Yes
 - 2 ☐ No → *GO TO Section 8 on page 32.*

b. Has a student FROM THIS SCHOOL physically attacked you IN THE PAST 12 MONTHS?

- 1753
- 1 ☐ Yes
 - 2 ☐ No → *GO TO Section 8 on page 32.*

c. In the past 12 months, how many times has a student FROM THIS SCHOOL physically attacked you?

1754 Times



8. GENERAL EMPLOYMENT AND BACKGROUND INFORMATION

The following questions refer to your BEFORE-TAX earnings from teaching and other employment.

8-1. DURING THE SUMMER OF 2015, did you have any earnings from —

🍏 Report amounts in whole dollars.

a. Teaching summer school in this school or any other school?

0900

1 ☐ Yes →

2 ☐ No

How much?

0901

\$

(1) Did all of these earnings come from your current school?

0902

1 ☐ Yes

2 ☐ No

GO TO item 8-1b below.

b. Working in a non-teaching job in this school or any other school?

0903 1 ☐ Yes →

2 ☐ No

How much?

0904 \$.00

(1) Did all of these earnings come from your current school?

0905 1 ☐ Yes

2 ☐ No

GO TO item 8-1c below.

c. Working in any NONSCHOOL job?

0906 1 ☐ Yes →

2 ☐ No

How much?

0907 \$.00

GO TO item 8-2 below.

8-2. How many days are covered by your contract, per contract year?

🍏 Include professional development, student contact days, and any other days covered by your contract.

0908 Days per contract year

8-3. DURING THE CURRENT SCHOOL YEAR, what is your base teaching salary for the entire school year?

🍏 Report amounts in whole dollars.

0909 \$.00 For the entire school year



- 8-4. DURING THE CURRENT SCHOOL YEAR, do you, or will you, earn any additional compensation from this school system for extracurricular or additional activities such as coaching, student activity sponsorship, mentoring teachers, or teaching evening classes?**
 🍏 Report amounts in whole dollars.

0910 1 ☐ Yes →

How much? 0911 \$, .00

2 ☐ No

GO TO item 8-5 below.

- 8-5. DURING THE CURRENT SCHOOL YEAR, do you, or will you, earn any additional compensation from this school system based on your students' performance (e.g., through a merit pay or pay-for-performance agreement)?**
 🍏 Report amounts in whole dollars.

0912 1 ☐ Yes →

How much? 0913 \$, .00

2 ☐ No

GO TO item 8-6 below.

- 8-6. DURING THE CURRENT SCHOOL YEAR, have you earned income from any OTHER sources from this school system, such as a state supplement, etc.?**
 🍏 Do NOT report any earnings already reported.
 🍏 Report amounts in whole dollars.

0914 1 ☐ Yes →

How much? 0915 \$, .00

2 ☐ No

GO TO item 8-7a below.

- 8-7a. DURING THE CURRENT SCHOOL YEAR, do you, or will you, earn additional compensation from working in any job OUTSIDE this school system?**
 🍏 Report amounts in whole dollars.

0916 1 ☐ Yes →

How much? 0917 \$, .00

GO TO item 8-7b below.

2 ☐ No → GO TO item 8-8 on page 34.

- b. Which of these best describes this job OUTSIDE this school system?**

🍏 Mark (X) only one box.

0918 1 ☐ Teaching or tutoring

2 ☐ Non-teaching, but related to teaching field

3 ☐ Other



8-8. During the CURRENT SCHOOL YEAR do you, or will you, receive a retirement pension check paid from a teacher retirement system?
 🍏 *Report amounts in whole dollars.*

0919 1 ☐ Yes →

How much? ⁰⁹²⁰ \$.00

GO TO item 8-9 below.

☐ No

8-9. Are you a member of a teachers' union or an employee association similar to a union?

0921 1 ☐ Yes

2 ☐ No

8-10a. Does your school, district, or school system offer tenure?

0922 ☐ Yes

2 ☐ No → GO TO item 8-11 below.

b. Are you tenured at your current school?

| | | | |
|------|---|--------------------------|-----|
| 0923 | 1 | <input type="checkbox"/> | Yes |
|------|---|--------------------------|-----|

2 ☐ No

8-11. Are you male or female?

| | | | |
|------|---|--------------------------|------|
| 0924 | 1 | <input type="checkbox"/> | Male |
|------|---|--------------------------|------|

2 ☐ Female

8-12a. What is your current marital status?

🍏 *Mark (X) only one box.*

0925 1 ☐ Now married → **GO TO item 8-13 on page 35.**

2 ☐ Widowed

3 ☐ Separated

4 ☐ Divorced

5 ☐ Never married

b. Are you currently living with a boyfriend/girlfriend or partner?

0926 ☒ Yes

2 ☐ No → *GO TO item 8-13 on page 35.*

c. Are you currently living in a registered domestic partnership or civil union?

| | | | |
|------|---|--------------------------|-----|
| 0927 | 1 | <input type="checkbox"/> | Yes |
|------|---|--------------------------|-----|

2 ☐ No



8-13. Are you of Hispanic or Latino origin?0928 1 ☐ Yes2 ☐ No**8-14. What is your race?** *Mark (X) one or more races to indicate what you consider yourself to be.*0929 1 ☐ White0930 1 ☐ Black or African-American0931 1 ☐ Asian0932 1 ☐ Native Hawaiian or Other Pacific Islander0933 1 ☐ American Indian or Alaska Native**8-15. What is your year of birth?**0934

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



9. CONTACT INFORMATION

- 9-1.** The survey you have completed may involve a brief follow-up next school year in order to gain information on teachers' movements in the labor force. The following information would assist us in contacting you if you have moved or changed jobs. Please keep in mind that all information provided here is strictly confidential and will only be used in the event that we need to contact you for follow-up. Your responses are protected from disclosure by federal statute (20 U.S.C., §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, unless otherwise compelled by law.

Please **PRINT** your name, your spouse's name (if applicable), your home address, your home and cell phone numbers, the most convenient time to reach you, and your work and home e-mail addresses.

a. First name

9000

Middle name

9001

Last name

9002

Suffix

9003

b. Spouse's First Name

9004

Spouse's Middle Name

9005

Spouse's Last Name

9006

c. Street Address

9007

d. City

9008

e. State

9009

f. ZIP Code + 4

9010



g. Cell phone number

AREA CODE TELEPHONE NUMBER

[illegible]

h. Home phone number

AREA CODE TELEPHONE NUMBER

[illegible]

i. Best day(s) to reach you
 🍏 Mark (X) all that apply.

- | | | | |
|------|---|--------------------------|-----------|
| 0013 | 1 | <input type="checkbox"/> | Monday |
| 0014 | 1 | <input type="checkbox"/> | Tuesday |
| 0015 | 1 | <input type="checkbox"/> | Wednesday |
| 0016 | 1 | <input type="checkbox"/> | Thursday |
| 0017 | 1 | <input type="checkbox"/> | Friday |
| 0018 | 1 | <input type="checkbox"/> | Saturday |
| 0019 | 1 | <input type="checkbox"/> | Sunday |

j. Best time of the day to reach you
 🍏 *Mark (X) only one box.*

- 0020 1 ☐ a.m.
2 ☐ p.m.

k. Work e-mail address

[illegible]

I. Home e-mail address

| | |
|------|--|
| 9022 | |
|------|--|



- 9-2. What are the names and addresses of two other people who would know where to get in touch with you during the coming years? Please do not list more than one person who now lives with you. Please inform these individuals that you have provided their names and someone from the U.S. Census Bureau may contact them in the coming years if we are unable to locate you.**

Please **PRINT** contact's name, contact's relationship to you, and contact's cell and home phone numbers.

(1) First Contact Person

- a. First name**

9023

Last name

9024

- b. Relationship to you**

9025

- c. Cell phone number**

AREA CODE TELEPHONE NUMBER

9026

 - -

- d. Home phone number**

AREA CODE TELEPHONE NUMBER

9027

 - -

What is the name and address of another person who would know where to get in touch with you during the coming years?

Please **PRINT** contact's name, contact's relationship to you, and contact's cell and home phone number.

(2) Second Contact Person

- a. First name**

9028

Last name

9029

- b. Relationship to you**

9030

- c. Cell phone number**

AREA CODE TELEPHONE NUMBER

9031

 - -

- d. Home phone number**

AREA CODE TELEPHONE NUMBER

9032

 - -


9-3. Please enter the date you completed this questionnaire.

🍏 Report month as a number, that is, 01 for January, 02 for February, etc.

Month

Day

Year

0033

0034

0035

9-4. Please indicate how much time it took you to complete this form, not counting interruptions.

🍏 Please record the time in minutes, e.g., 50 minutes, 65 minutes, etc.

0036

Minutes

**Thank you very much for your participation
in this survey. If you have any questions,
please contact us, toll-free, at: 1-888-595-1338
or by e-mail at: addp.education.surveys@census.gov.**

**Please return your completed questionnaire
in the enclosed pre-addressed, postage-paid
envelope or mail it to:**

**U.S. CENSUS BUREAU
ATTN: DCB/PCSPU, BUILDING 60A
1201 E. 10TH STREET
JEFFERSONVILLE, IN 47132-0001**



To learn more about this survey and to access reports from earlier collections, see the National Teacher and Principal Survey (NTPS) website at:
<http://nces.ed.gov/surveys/ntps>

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' website at:
<http://nces.ed.gov>

For additional data collected by various Federal agencies, including the Department of Education, visit the Federal Statistics clearinghouse at:
<http://www.fedstats.sites.usa.gov>

