

# School Characteristics Inventory

2001-2002

Place school label here

Do NOT put barcode label here

This questionnaire will help us understand the staffing, students, and programs in your school.

Your responses are voluntary and confidential. If there is a question you do not wish to answer, simply skip it. We hope you will answer as many questions as possible. No individual schools or school staff members will be identified in any published reports.

# **Marking Instructions**

Please use a No. 2 pencil only

Erase unwanted marks completely Correct Marks:

Make no stray marks Incorrect Marks: ☑ ☑

Mark only one response to a question, unless other directions are given

5276



### Carefully place school barcode label here

### **School Calendar**

<ul><li>1. Does your school operate on a "year-round" schedule? Mark (X) ONE box.</li><li></li></ul>	<ol> <li>Please indicate (in hours and minutes) the amount of time per day this school is in session for students in: (Fill in number of hours and minutes for EACH item below.)</li> </ol>
☐ No  2. Please indicate the number of instructional days your school is scheduled to be in session this academic year.	Hours: Minutes  Pre-K  K  Grades 1-5
(Print number of days in the boxes below.)  Days	School Type
3. What was the first date of student attendance in the 2001-2002 school year? (Please enter a zero for leading blank spaces, e.g., August would be "08")  Month  Day  Year	6. Which of the following best describes your school? Mark (X) ONE box.  Charter school (release from some or all district or state requirements)  Magnet school (offers enhancements such as special curricular themes or methods of instruction to attract students from outside their normal attendance area)  School of choice (open enrollment, but not necessarily a programmatic focus)  Regular elementary school
4. What will be the last date of student attendance in the 2001-2002 school year? (Please enter a zero for leading blank spaces, e.g., August would be "08")  Month Day Year	7. Which statement best describes the enrollment policy of your school? Mark (X) ONE box.  □ Enrollment is mainly limited to students from a single attendance area  □ Students from outside the local attendance area are permitted to attend the school

# **Funding and Programs**

8. Does your school participate in any of the following comprehensive and/or research based model(s) of school reform? Mark (X) ALL that apply.

Whole-	School Models	
	Accelerated Schools Project	☐ School Development Program
	America's Choice	☐ Success for All
	ATLAS Communities	☐ The Learning Network
	Audrey Cohen College:	☐ Urban Learning Centers
	Purpose Centered Education Center for Effective Schools	☐ Ventures Initiative and Focus <sup>®</sup> System
		Reading/Language Arts Models
	Child Development Project	☐ Accelerated Reading
	Coalition of Essential Schools	
	Community for Learning	☐ Breakthrough to Literacy
	,	☐ Carbo Reading Styles Program
Ш	Computer Curriculum Corporation	☐ CELL/ExLL
	Co-NECT Schools	Cooperative Integrated Reading
	Core Knowledge	<ul><li>Cooperative Integrated Reading and Composition</li></ul>
	Different Ways of Knowing	☐ CORE
	,	☐ Early Intervention in Reading
Ш	Direct Instruction	_
	Edison Project	☐ Early Literacy Learning Initiative (ELLI)
	Expeditionary Learning Outward Bound	☐ Exemplary Center for Reading Instruction
	High/Scope Primary Grades	☐ First Steps <sup>™</sup>
_	Approach to Education	☐ Junior Great Books
	Integrated Thematic Instruction	
	Lightspan Achieve Now	☐ Literacy Collaborative
	League of Professional Schools	☐ National Writing Project
	_	☐ Reading Recovery
	MicroSociety <sup>®</sup>	☐ Reading Renaissance
	Modern Red Schoolhouse	•
	Montessori	☐ Strategic Teaching and Reading Project
	Onward to Excellence	Mathematics Models
	Paideia	☐ Growing with Mathematics
	QuESt	
, П	Roots & Wings	<ul> <li>University of Chicago School</li> <li>Mathematics Project</li> </ul>





9.	Does your school offer any of the following kinds o	f pro	ogram? Mark (X	) ALL th	nat apply.		
	Title I Targeted Assistance						
	☐ Title I School-Wide Program ☐ Medical Health Care Services						
	☐ Other Compensatory Education Program	Compensatory Education Program					
	☐ Special Education	ecial Education   Before- or After-School Day Care Program					
	☐ Bilingual Education		Parenting Educ	cation I	Program		
	☐ English as a Second Language		School Breakfa	ast/Lun	ch Program	l	
					Only for	Only for	For
10	O. Does this school take any of the following steps for students who need extra assistance in reading/language arts? Mark (X) EACH item.		Not	at all	in primary grades	students in intermediate grades	students in all grades
	Tutoring in reading/language arts is available to low- achieving students during the regular school day						
	Instructional aides work in classrooms to provide assistance in reading/language arts to low-achieving students		[				
	Instructional specialists work in classrooms to provide assistance in reading/language arts to low-achieving students						
	Instructional aides provide low-achieving students with pullout instruction in reading/language arts during the regular school day		[				
	Additional support in reading/language arts is provided low-achieving students outside the regular school day (e.g., in before- or after-school programs, summer school programs)	to	Ε				
11	I. Does this school take any of the following steps for students who need extra assistance in mathematics? Mark (X) EACH item.		Not	at all	Only for students in primary grades	Only for students in intermediate grades	For students in all grades
	Mathematics tutoring is available to low-achieving students during the regular school day						
	Instructional aides work in classrooms to provide assistance in mathematics to low-achieving students						
	Instructional specialists work in classrooms to provide assistance in mathematics to low-achieving students						
	Instructional aides provide low-achieving students with pullout instruction in mathematics during the regular school day						
	Additional support in mathematics is provided to low- achieving students outside the regular school day (e.g., in before- or after-school programs, summer school programs)	,	Г				

## 12. During the current school year, did your school receive funding from any of the following sources to support school improvement? (Mark (X) for YES or NO for EACH item.)

District, State and Private Sources	Received Funding Yes No		
Special school improvement funds set aside by your school district			
Special school improvement funds set aside by your state			
State Compensatory Education funds			
Private sources (foundations, community, parents)			
Federal Grants			
21st Century Community Learning Center			
Class Size Reduction			
Comprehensive School Reform Demonstration Program			
Eisenhower Professional Development Grants			
Elementary School Counseling Demonstration Program			
Freely Associated State Education Grant Program			
Fund for the Improvement of Education			
Innovative Education Program Strategies			
Innovative Programs			
Magnet School Assistance			
Native Hawaiian Curriculum Development Teacher Training and Recruitment Program			
Partnerships in Character Education			
Smaller Learning Communities Program			
State and Local Education Systematic Improvement			
Technology Literacy Challenge Fund			
Title I, part C (migrant) funds			
Title 7 bilingual education funds			
Title 9 funds for Indian Education services			
Training and Advisory Services			



### **Students**

13. Around October 1, what was the total number of students enrolled at your school?  (Print number of students in the boxes below.)  Number of students  Number of students	17. Around October 1, approximately what percentage of students in this school were identified as limited-English proficient? (Print percentage (%) of students in the boxes below.)  % of students
14. During the past school year, how many students transferred into this school?  (Print number of students in the boxes below.)  Number of students	18. Around October 1, approximately what percentage of students in this school had IEPs?  (Print percentage (%) of students in the boxes below.)  % of students
15. During the past school year, how many students transferred out of this school?  (Print number of students in the boxes below.)  Number of students	19. Around October 1, approximately what percentage of students from each of the following racial/ethnic groups attended this school?  (Print percentage (%) of students in EACH group below.)  Percentage of students  Hispanic, regardless of race
16. Around October 1, approximately what percentage of students in this school were eligible for free or reduced price lunches?  (Print percentage (%) of students in the boxes below.)  % of students	American Indian / Alaskan Native  Asian or Pacific Islander  Black (non-Hispanic)  White (non-Hispanic)

### **Staffing**

Questions 20-25 are designed to inventory the full-time professional staff in your school. The questions ask you to report the number of Full Time Equivalent (FTE) staff who perform various roles. For staff who work part time in your school, please only report the portion of time they spend in your school. For example, for a social worker who spends only one day per week in the school, you would report 0.2 FTE.

school, you would repo	JIL U.Z FIE.
	er of Full Time Equivalent (FTE) professional staff who <u>supervise teachers, coordinate</u> ool's instructional program, or provide instructional support to faculty and staff.
Number of FTE's	
	Principals
	Assistant Principals
	Program or subject area coordinators/facilitators
	Other professional staff who <u>supervise or coordinate instruction or</u> <u>provide instructional support</u>
	er of Full-Time Equivalent (FTE) professional staff who <u>provide non-instructional</u> xcluding food and transportation services).
	Attendance Officers
	Counselors
	Psychologists
	Social Workers
	Speech Pathologists
	Audiologists



Other professional staff who provide non-instructional services to students

22.	Please report the number to students.	mber of Full-Time Equivalent (FTE) professional staff who <u>provide instructional services</u>
	Number of FTE's	
		Regular classroom teachers
		Special education teachers
		Specialist teachers in mathematics
		Specialist teachers in reading/language arts
		English as a Second Language
		Other professional staff who provide instructional services to students
23.	Please report the nur services. Number of FTE's	mber of Full Time Equivalent (FTE) professional staff who <u>provide library or media</u>
		Librarians
		Instructional technology
		Other professional staff who <u>provide library or media services</u>
24.		mber of Full Time Equivalent (FTE) <u>non-certified, support staff providing services to</u> <u>f in the following categories</u> :
		Clerical/secretarial support
		Instructional Aides (excluding volunteers)
		Media services, including computers

Please report the nu following categories	ımber of Full Time Equivalent (FTE) <u>other paid staff working at the school i</u> n t s:
Number of FTE's	
	Day care staff
	Cafeteria staff
	Custodians
	Playground/lunchroom supervisors
	Other paid staff working at the school not previously mentioned
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comments here. P	you would like to tell us about the school or the study, please enter your lease print clearly.
Comments:	

Thank you for taking the time to complete this questionnaire. We greatly appreciate your contribution to the study.



Thanks again for completing this questionnaire.

Please place this questionnaire in the postage paid envelope provided and mail to the address on the envelope.

Please return your completed questionnaire in the enclosed envelope to:

The Study of Instructional Improvement Institute for Social Research University of Michigan 426 Thompson Street - EP Room 332 Ann Arbor, MI 48106-1248

If you have any questions, please feel free to call our toll-free number at: 1-877-397-2374

