

School Characteristics Inventory

2002-2003

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

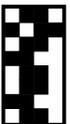
Make no stray marks

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

Marks: **MUST** be made like this for the
scanner to pick them up.

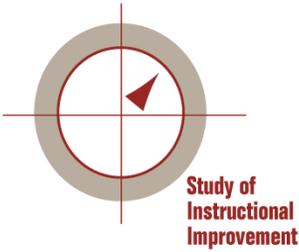
Correct Marks: 

Incorrect Marks:   



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Carefully place school barcode label here

School Calendar

1. Does your school operate on a "year-round" schedule? Mark (X) ONE box.

- Yes
 No

2. Please indicate the number of instructional days your school is scheduled to be in session this academic year.

(Print number of days in the boxes below.)

			Days
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3. What was the first date of student attendance in the 2002-2003 school year? (Please enter a zero for leading blank spaces, e.g., August would be "08")

Month	Day	Year
		0 2

4. What will be the last date of student attendance in the 2002-2003 school year? (Please enter a zero for leading blank spaces, e.g., August would be "08")

Month	Day	Year
		0 3

5. 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.)

Hours: Minutes

	:			Pre-K
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	:			K
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	:			Grades 1-5
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School Type

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**

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
- America's Choice
- ATLAS Communities
- Audrey Cohen College:
Purpose Centered Education
- Center for Effective Schools
- Child Development Project
- Coalition of Essential Schools
- Community for Learning
- Computer Curriculum Corporation
- Co-NECT Schools
- Core Knowledge
- Different Ways of Knowing
- Direct Instruction
- Edison Project
- Expeditionary Learning Outward Bound
- High/Scope Primary Grades
Approach to Education
- Integrated Thematic Instruction
- Lightspan Achieve Now
- League of Professional Schools
- MicroSociety[®]
- Modern Red Schoolhouse
- Montessori
- Onward to Excellence
- Paideia
- QuEST
- Roots & Wings

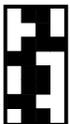
- School Development Program
- Success for All
- The Learning Network
- Urban Learning Centers
- Ventures Initiative and Focus[®] System

Reading/Language Arts Models

- Accelerated Reading
- Breakthrough to Literacy
- Carbo Reading Styles Program
- CELL/ExLL
- Cooperative Integrated Reading
and Composition
- CORE
- Early Intervention in Reading
- Early Literacy Learning Initiative (ELLI)
- Exemplary Center for Reading Instruction
- First Steps[™]
- Junior Great Books
- Literacy Collaborative
- National Writing Project
- Reading Recovery
- Reading Renaissance
- Strategic Teaching and Reading Project

Mathematics Models

- Math Wings
- Growing with Mathematics
- University of Chicago School
Mathematics Project



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9. The next two questions refer to three of the reform models listed in question 8: Accelerated Schools Project, America's Choice, and Success for All. Please indicate whether this school was affiliated with any of these programs during the 2002-2003 school year.

Mark (X) for YES or NO for EACH item.

	Yes	No
Accelerated Schools Project	<input type="checkbox"/>	<input type="checkbox"/>
America's Choice	<input type="checkbox"/>	<input type="checkbox"/>
Success for All	<input type="checkbox"/>	<input type="checkbox"/>

If marked "No" for all three programs, please skip to Question 11, page 6.

10. Please indicate whether you agree or disagree with the following statements about this school's affiliation with the program checked in question 9.
Mark (X) EACH item.

	
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This year, staff at this school were regularly in contact with staff at the reform program checked in question 9

<input type="checkbox"/>	<input type="checkbox"/>
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Staff from the program checked in question 9 visited the school this year

<input type="checkbox"/>	<input type="checkbox"/>
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This year, staff at this school received professional development associated with the program checked in question 9

<input type="checkbox"/>	<input type="checkbox"/>
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Teachers and leaders used curricular materials or assessments from the program checked in question 9 this year

<input type="checkbox"/>	<input type="checkbox"/>
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Staff at this school attended conferences or training programs associated with the program checked in question 9 this year

<input type="checkbox"/>	<input type="checkbox"/>
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This year the school received funding for participating in the program checked in question 9

<input type="checkbox"/>	<input type="checkbox"/>
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Staff at this school used routines or procedures associated with the program checked in question 9 this year

<input type="checkbox"/>	<input type="checkbox"/>
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11. Does your school offer any of the following kinds of programs? Mark (X) ALL that apply.

- | | |
|---|---|
| <input type="checkbox"/> Title I Targeted Assistance | <input type="checkbox"/> Gifted and Talented Program |
| <input type="checkbox"/> Title I School-Wide Program | <input type="checkbox"/> Medical Health Care Services |
| <input type="checkbox"/> Other Compensatory Education Program | <input type="checkbox"/> Mental Health Care Services |
| <input type="checkbox"/> Special Education | <input type="checkbox"/> Before- or After-School Day Care Program |
| <input type="checkbox"/> Bilingual Education | <input type="checkbox"/> Parenting Education Program |
| <input type="checkbox"/> English as a Second Language | <input type="checkbox"/> School Breakfast/Lunch Program |

12. 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	Only for students in primary grades	Only for students in intermediate grades	For students in all grades
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Tutoring in reading/language arts is available to low-achieving students during the regular school day

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Instructional aides work in classrooms to provide assistance in reading/language arts to low-achieving students

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Instructional specialists work in classrooms to provide assistance in reading/language arts to low-achieving students

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Instructional aides provide low-achieving students with pullout instruction in reading/language arts during the regular school day

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Additional support in reading/language arts is provided to low-achieving students outside the regular school day (e.g., in before- or after-school programs, summer school programs)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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13. 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
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Mathematics tutoring is available to low-achieving students during the regular school day

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Instructional aides work in classrooms to provide assistance in mathematics to low-achieving students

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Instructional specialists work in classrooms to provide assistance in mathematics to low-achieving students

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Instructional aides provide low-achieving students with pullout instruction in mathematics during the regular school day

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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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)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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14. 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	<input type="checkbox"/>	<input type="checkbox"/>
Special school improvement funds set aside by your state	<input type="checkbox"/>	<input type="checkbox"/>
State Compensatory Education funds	<input type="checkbox"/>	<input type="checkbox"/>
Private sources (foundations, community, parents)	<input type="checkbox"/>	<input type="checkbox"/>

Federal Grants

21st Century Community Learning Center	<input type="checkbox"/>	<input type="checkbox"/>
Class Size Reduction	<input type="checkbox"/>	<input type="checkbox"/>
Comprehensive School Reform Demonstration Program	<input type="checkbox"/>	<input type="checkbox"/>
Eisenhower Professional Development Grants	<input type="checkbox"/>	<input type="checkbox"/>
Elementary School Counseling Demonstration Program	<input type="checkbox"/>	<input type="checkbox"/>
Freely Associated State Education Grant Program	<input type="checkbox"/>	<input type="checkbox"/>
Fund for the Improvement of Education	<input type="checkbox"/>	<input type="checkbox"/>
Innovative Education Program Strategies	<input type="checkbox"/>	<input type="checkbox"/>
Innovative Programs	<input type="checkbox"/>	<input type="checkbox"/>
Magnet School Assistance	<input type="checkbox"/>	<input type="checkbox"/>
Native Hawaiian Curriculum Development Teacher Training and Recruitment Program	<input type="checkbox"/>	<input type="checkbox"/>
Partnerships in Character Education	<input type="checkbox"/>	<input type="checkbox"/>
Smaller Learning Communities Program	<input type="checkbox"/>	<input type="checkbox"/>
State and Local Education Systematic Improvement	<input type="checkbox"/>	<input type="checkbox"/>
Technology Literacy Challenge Fund	<input type="checkbox"/>	<input type="checkbox"/>
Title I, part C (migrant) funds	<input type="checkbox"/>	<input type="checkbox"/>
Title 7 bilingual education funds	<input type="checkbox"/>	<input type="checkbox"/>
Title 9 funds for Indian Education services	<input type="checkbox"/>	<input type="checkbox"/>
Training and Advisory Services	<input type="checkbox"/>	<input type="checkbox"/>

Students

15. Around October 1, what was the total number of students enrolled at your school?
(Print number of students in the boxes below.)

<input type="text"/>	,	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	Number of students
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16. During the past school year, how many students transferred into this school?
(Print number of students in the boxes below.)

<input type="text"/>	<input type="text"/>	<input type="text"/>	Number of students
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17. During the past school year, how many students transferred out of this school?
(Print number of students in the boxes below.)

<input type="text"/>	<input type="text"/>	<input type="text"/>	Number of students
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18. 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.)

<input type="text"/>	<input type="text"/>	<input type="text"/>	% of students
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19. 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.)

<input type="text"/>	<input type="text"/>	<input type="text"/>	% of students
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20. Around October 1, approximately what percentage of students in this school had IEPs?
(Print percentage (%) of students in the boxes below.)

<input type="text"/>	<input type="text"/>	<input type="text"/>	% of students
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21. 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

<input type="text"/>	<input type="text"/>	Hispanic, regardless of race
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<input type="text"/>	<input type="text"/>	American Indian / Alaskan Native
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<input type="text"/>	<input type="text"/>	Asian or Pacific Islander
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<input type="text"/>	<input type="text"/>	Black (non-Hispanic)
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<input type="text"/>	<input type="text"/>	White (non-Hispanic)
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Staffing

Questions 22-27 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 works half-time at this school (about 20 hours per week) you would report 0.5 FTE, or for a social worker who spends only one day per week at this school (about 8 hours per week) you would report 0.2 FTE.

22. Please report the number of Full Time Equivalent (FTE) professional staff who supervise teachers, coordinate some aspect of the school'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 supervise or coordinate instruction or provide instructional support

23. Please report the number of Full-Time Equivalent (FTE) professional staff who provide non-instructional services to students (excluding food and transportation services).

Number of FTE's

 .

Attendance Officers

 .

Counselors

 .

Psychologists

 .

Social Workers

 .

Speech Pathologists

 .

Audiologists

 .

Other professional staff who provide non-instructional services to students

24. Please report the number of Full-Time Equivalent (FTE) professional staff who provide instructional services to students.

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

25. Please report the number of Full Time Equivalent (FTE) professional staff who provide library or media services.

Number of FTE's

 .

Librarians

 .

Instructional technology

 .

Other professional staff who provide library or media services

26. Please report the number of Full Time Equivalent (FTE) non-certified, support staff providing services to the professional staff in the following categories:

Number of FTE's

 .

Clerical/secretarial support

 .

Instructional Aides (excluding volunteers)

 .

Media services, including computers



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27. Please report the number of Full Time Equivalent (FTE) other paid staff working at the school in the following categories:

Number of FTE's

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Day care staff

		.	
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Cafeteria staff

		.	
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Custodians

		.	
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Playground/lunchroom supervisors

		.	
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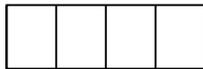
Other paid staff working at the school not previously mentioned

If there is anything you would like to tell us about your school or this study, please enter your comments here. Please print clearly.

Comments: _____ _____ _____ _____

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

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**

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