

Remote Core Survey

Elementary School Questionnaire

2021-2022

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

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

Your answers will help improve your school.

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

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

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

Thank you for taking this survey!

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Your School Schedule

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

1. Which of the following **best describes** your school schedule **during the past 30 days**?

- A) I went to school in person at my school building for the entire day, Monday through Friday. [**In-School Model**]
- B) I participated in school from home for the entire day on most or all weekdays and did not go to school in person. [**Remote Learning Model**]
- C) I went to school in person at my school building for the entire day on some weekdays and participated in school from home on other weekdays. [**Hybrid Model**]
- D) I went to school in person at my school building for half of the day and participated in classes from home during the other half of the day on most or all weekdays. [**Hybrid Model**]

2. Are you female or male?

- A) Female
- B) Male

3. What grade are you in?

- A) 3rd grade
- B) 4th grade
- C) 5th grade
- D) 6th grade

4. What is your race or ethnicity? (*Mark All That Apply.*)

- | | |
|-------------------------------------|----------------------------------------|
| A) American Indian or Alaska Native | E) Native Hawaiian or Pacific Islander |
| B) Asian or Asian American | F) White |
| C) Black or African American | G) Something else |
| D) Hispanic or Latinx | |

5. Did you eat breakfast this morning?

- A) No
- B) Yes

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

- A) Before 9:00 pm
- B) Between 9:00 pm and 10:00 pm
- C) Between 10:00 pm and 11:00 pm
- D) Between 11:00 pm and midnight
- E) After 12:00 am

The next questions ask about your experiences participating in school from home.

Participating in school from home means that, instead of going to a school building in person to learn and complete schoolwork, you did all your schoolwork and learning from home.

7. In the past 30 days, how many weekdays in an average week did you participate in school from home for the entire school day?

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

8. On the average weekday, how much of your day did you spend learning and completing schoolwork from home?

- A) Less than 1 hour
- B) Between 1 and 2 hours
- C) Between 2 and 3 hours
- D) Between 3 and 4 hours
- E) Between 4 and 5 hours
- F) More than 5 hours

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9. How many days in the past week did you participate in an online class from home where your teacher talked to students from a computer, phone, or tablet (iPad)?
- A) 0 days
 - B) 1 day
 - C) 2 days
 - D) 3 days
 - E) 4 days
 - F) 5 days
10. In the past 30 days, how often did you miss an entire day of school from home for any reason?
- A) I did not miss any days of school from home in the past 30 days
 - B) 1 day
 - C) 2 days
 - D) 3 or more days
11. Do you get really bored participating in school from home?
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
12. Do the teachers and other grown-ups from your school provide you with interesting activities to do while you are learning from home?
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time

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

13. Do the teachers and other grown-ups from your school check on how you are feeling?

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

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

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

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

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

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

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

17. Do your teachers ask you what you want to learn about?

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

18. How well do you do in your schoolwork?

- A) I'm one of the best students
- B) I do better than most students
- C) I do about the same as others
- D) I don't do as well as most others

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19. **Do the teachers and other grown-ups at school listen when you have something to say?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
20. **Do the teachers and other grown-ups at school believe that you can do a good job?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
21. **Do the teachers and other grown-ups at school make an effort to get to know you?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
22. **Do the teachers and other grown-ups at school want you to do your best?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
23. **Does your school teach students to understand how other students think and feel?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
24. **Do you finish all your school assignments?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time

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25. **Do you keep working and working on your schoolwork until you get it right?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
26. **Do you keep doing your schoolwork even when it's really hard for you?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
27. **Do you follow the classroom rules?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
28. **Do you listen when your teacher is talking?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
29. **Are you nice to other students?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
30. **During the past 30 days, did kids spread mean rumors or lies, or hurtful pictures, about you online, on social media, or on a cell phone?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time

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

31. Do you feel good and happy?

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

32. Do you feel sad?

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

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

Keep the following definitions in mind

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

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

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

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

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

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

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

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

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Here are questions about your home.

42. **Does a parent or some other grown-up at home care about your schoolwork?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
43. **Does a parent or some other grown-up at home believe that you can do a good job?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
44. **Does a parent or some other grown-up at home want you to do your best?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
45. **Does a parent or some other grown-up at home ask if you did your schoolwork?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
46. **Does a parent or some other grown-up at home check your schoolwork?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time
47. **Does a parent or some other grown-up at home ask you about school?**
- A) No, never
 - B) Yes, some of the time
 - C) Yes, most of the time
 - D) Yes, all of the time

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48. Does a parent or some other grown-up at home ask you about your grades?

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

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