OMB#: 0970-0151 EXPIRATION DATE: 10/2006

Spring 2005/06



KINDERGARTEN FOLLOWUP to the Head Start Family and Child Experiences Survey

Kindergarten Teacher Survey

Spring 2005/06

PLEASE NOTE:

If you teach separate A.M. and P.M. classes, please answer the questions in this survey with respect to the class that the child/children listed attend.

If FACES children are in both of your classes, please fill out two Kindergarten Teacher Survey forms, one for each class. Please indicate below which of these classes you are reporting on here, and please write down the names of the FACES children in this class. Thank you.

This report is about my...(Circle one answer.)

a. A.M. class b. P.M. class	
The following FACES children are in this class	ss:

DEFINITIONS

(appear in italics in questionnaire):

Transitional (or readiness) kindergarten – extra year of school for kindergarten-age eligible children who are judged not ready for kindergarten

Kindergarten - traditional year of school primarily for 5-year-olds prior to first grade

Transitional first grade - extra year of school for children who have attended kindergarten and have been judged not ready for first grade

Class - refers to the child's total school day, including time spent with any teacher, as well as time spent on meals, naps, recess, and between activities

Activity center - clearly delineated, organized, thematic work and play area where children interact with materials and other children without the teacher's constant presence or direction (such as a language arts area, a block area, a dramatic play area)

Limited English proficiency (LEP) – children whose native language is other than English and whose skills in listening, speaking, reading, or writing English are such that they have difficulty understanding school instruction in English.

QUESTIONS ABOUT YOUR CLASS

1.	Wha	at type of school is this?		
		Public school Catholic school Private school with other religious affiliation		
		Private school with no religious affiliation		
2.	Doy	you teach (Circle one answer in each row):	Yes	No
	a.	a full-day class?		2
	b.	a half-day morning class?	1	2
	C.	a half-day afternoon class?	1	2
3.	Wha	at type of class is this? (See definitions on page 2 and circle one.)		
		Kindergarten class		
		Transitional (or readiness) kindergarten class Transitional first grade class		
		Transitional first grade class		
		Multigrade or ungraded class with at least some kindergarten-age (specify)	childre	า ์
4.	Wha	at is the highest grade taught at this school?		
		Transitional kindergarten (pre-kindergarten)		0
		Kindergarten		0
		Pre-first grade (after kindergarten)		
		1st grade		
		2 nd grade		0
		3 rd grade		0
		4 th grade		0
		5 th grade		
		6 th grade		O
		7 th grade		1
		8 th grade		1
				1:
		10 th grade		1
		11 th grade		1
		12 th grade		18
5.	Appı	roximately how many students are currently enrolled		
	a.	in this school?		
	b.	in kindergarten?		
	C.	in this class?		

6.		many children currently enrolled in this class are ase enter a number on each line. If none, please enter 0)
	a.	American Indian or Alaskan Native
	b.	Asian or Pacific Islander
	c.	Black, non-Hispanic
	d.	Hispanic
	e.	White, non-Hispanic
7.		many children with <i>limited English proficiency (LEP)</i> are there in this class? (See
		Number of LEP children
8.		many children who are eligible for free or reduced-price lunch or breakfast are there is class?
		Number of eligible children
9.	How	often does this class meet?
	a.	Number of days each week
	b.	Total number of hours per week
10.	How wee	many paid assistants or co-/team- teachers do you have in this class in a typical k?
		Number of paid assistants or co-teachers:
11.		average, how many hours per week is there at least one paid assistant or co-/team- her with you in this class?
		Number of hours per week
12.	How	many adult volunteer assistants do you have in this class in a typical week?
		Number of adult volunteers:
13.		average, how many hours per week all together do adult volunteer assistants spend in class?
		Total number of hours per week:
14.	Doe	s each child have his or her own desk?
		Yes

15.	Do you have activity centers in this classroom?	(See definitions on page 2.)
	Yes	1
	No	2

16. How often do children in this class do each of the following reading and language activities? Would you say children (READ ITEM) never, about once a month or less, two or three times a month, once or twice a week, three or four times a week, or every day?

			Once a month or	Two or three times	Once or twice a	Three or four times	Every
		Never	less	a month	week	a week	day
a.	Work on learning the names of the letters	1	2	3	4	5	6
b.	Practice writing the letters of the alphabet	1	2	3	4	5	6
C.	Discuss new words	1	2	3	4	5	6
d.	Dictate stories to a teacher, aide, or volunteer	1	2	3	4	5	6
e.	Work on phonics	1	2	3	4	5	6
f.	Listen to you read stories where they see the print (e.g., Big Books)	1	2	3	4	5	6
g.	Listen to you read stories but they don't see the print	1	2	3	4	5	6
h.	Retell stories	1	2	3	4	5	6
i.	Learn about conventions of print (left to right orientation, book					_	
	holding)	1	2	3	4	5	6
j.	Write own name	1	2	3	4	5	6
k.	Learn about rhyming words and word families	1	2	3	4	5	6
l.	Learn about common prepositions, such as over and under, up and down	1	2	3	4	5	6
	andor, ap and down		_	0	7	0	U

17. How often do children in this class do each of the following **math** activities?

		Never	Once a month or less	Two or three times a month	Once or twice a week	Three or four times a week	Every day
a.	Count out loud	1	2	3	4	5	6
b.	Work with geometric manipulatives	1	2	3	4	5	6
C.	Work with counting manipulatives to learn basic operations	1	2	3	4	5	6
d.	Play math-related games	1	2	3	4	5	6
e.	Use music to understand math concepts	1	2	3	4	5	6
f.	Use creative movement or creative drama to understand math concepts	1	2	3	4	5	6
g.	Work with rulers, measuring cups, spoons, or other measuring instruments	1	2	3	4	5	6
h.	Engage in calendar-related	-	_	-	-	-	-
	activities	1	2	3	4	5	6

18. At this point in the kindergarten year, how would you rate the behavior of children in your class? Would you say...

The group misbehaves very frequently and is almost always difficult to handle,	1
The group misbehaves frequently and is often difficult to handle,	2
The group misbehaves occasionally,	3
The group behaves well, or	4
The group behaves exceptionally well?	5

QUESTIONS ABOUT YOU (KINDERGARTEN TEACHER)

19.	Wha	it is your gender?
		Male 1 Female 2
20.	In w	hat year were you born? 19
21.	Are	you of Hispanic or Latino origin? (Circle one number.)
		Yes
22.	Whi	ch best describes your race? (Circle one or more.)
		American Indian or Alaskan Native
23.	and <i>Plea</i>	Inting this school year, how many years have you taught each of the following grades programs? (Write the number of years to the nearest half year, for example 2.5, 3.5. ase include part-time teaching. Write "0" if you have never taught the grade or gram listed.) Total years grade/
		program taught
	a.	Preschool or Head Start
	b.	Kindergarten (including Transitional/Readiness Kindergarten and Transitional/pre-1st grade)
	c.	First grade
	d.	
		Second through fifth grade
	e.	
	e. f.	Second through fifth grade
	٠.	Second through fifth grade
	f.	Second through fifth grade
	f. g.	Second through fifth grade
	f. g. h.	Second through fifth grade

25.	What is the highest level of education you have completed? (Circle only one number.)									
	High school diploma or GED									
	Associate's degree									
	Bachelor's									
	At least one year of course work beyond a Bachelor's but not a graduate degree4									
	Master's 5									
	Education specialist or professional diploma based on at least one year of course work past a Master's degree level									
	Doctorate 7									
	Other (please specify on line below)									
26.	How many college courses have you completed in the following areas? (Circle one number on each line.)									
	a. Early childhood education 0 1 2 3 4 5 6-									
	b. Elementary education 0 1 2 3 4 5 6									
	c. Special education 0 1 2 3 4 5 6									
	d. English as a Second Language (ESL) . 0 1 2 3 4 5 6									
	e. Child development 0 1 2 3 4 5 6									
	f. Methods of teaching reading 0 1 2 3 4 5 6									
	g. Methods of teaching mathematics 0 1 2 3 4 5 6									
	h. Methods of teaching science 0 1 2 3 4 5 6									
27.	What type of teaching certificate do you have? (Circle only one number.)									
	a. None									
	b. Temporary, probational, provisional, or emergency certification									
	c. Certificate for completion of an alternative certification program									
	e. The highest certification available									
28.	In what areas are you certified? (Circle all that apply.)									
	a. Elementary education									
	b. Early childhood									
	c. Other (please specify): 3									
0.0										
29.	Date questionnaire completed://									

Thank you for participating in FACES!