

Appendix L

*Principal Survey
2006-2007 School Year*

Conversion Magnet Schools Evaluation

*Principal Survey
2006-2007 School Year*

June 2007

Paperwork Burden Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is **XXXX-XXXX**. The time required to complete this information collection is estimated to average 35 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(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, D.C. 20202-4700. **If you have comments or concerns regarding the status of your individual submission of this form, write directly to:** Lauren Angelo, U.S. Department of Education, Institute of Education Sciences, Room 502h, 555 New Jersey Avenue, NW, Washington, DC 20208.

Dear Principal:

The Conversion Magnet School Evaluation is a national study designed to examine the relationship between magnet programs on the academic achievement and minority group isolation of elementary school students. This study includes schools that have recently introduced magnet programs as well as schools that do not currently offer them. Because you are the principal of a school that is part of the study, we are asking you to complete this survey, which we estimate will take about a half hour of your time. Your participation is voluntary, but it is important and very much appreciated. Below are answers to some general questions concerning your participation.

What is the purpose of this survey?

The purpose of this survey is to obtain background information on principals and the resources, staffing, climate and programs at their schools. This information will help provide a sound basis for evaluating and understanding the relationship of magnet schools to student achievement and minority group isolation based on an examination of changes over time and the context surrounding these changes.

Who is conducting this survey?

The Conversion Magnet School Evaluation was commissioned by the Department of Education's Institute of Education Sciences (IES), in collaboration with the Office of Innovation and Improvement (OII). The study is being conducted for IES by the American Institutes for Research (AIR) and Berkeley Policy Associates (BPA).

Why should you participate in this survey?

You are an expert on the strengths of and the challenges facing elementary schools in this country, and the only individual capable of providing us with first-hand information about your school's unique circumstances. Policymakers and educational leaders rely on findings from studies like the Conversion Magnet School Evaluation to inform their decisions. The current study will fill a critical gap in the literature about the relationship between magnet school programs and student outcomes, which can inform educators and parents alike.

How will your information be reported?

The information you provide will be combined with the information provided by others to describe the general group of schools in statistical reports. No individual data that link your name, address, or telephone number with your responses will be included in the statistical reports.

Will your responses be kept confidential?

Your individual responses are protected from disclosure by federal statute (P.L. 107-279, Title I, Part E, Sec.183). Responses to this data collection will be used only for statistical purposes. The reports prepared for this study will summarize findings across the sample and will not associate responses with a specific district or individual. We will not provide information that identifies you or your district to anyone outside the study team, except as required by law.

Where should you return your completed survey?

Please place your completed survey in the enclosed envelope and follow the return instructions provided by AIR and BPA.

Thank you very much for your help in this important study.

Instructions

- It is important that this questionnaire be completed by the school PRINCIPAL.
- The questions in this survey refer to the 2006-2007 school year.
- If you were not the principal in 2006-2007, you may need to consult with key staff who worked in the school that year.
- If you are unsure about how to answer a question, please give the best answer you can rather than leave it blank.

Please write your answers directly on the questionnaire by marking the appropriate box, circling the appropriate number, or by writing your answer in the space given.

Thank you for your cooperation in this very important effort!

Staffing and Teacher Characteristics

I-1). How many full and part time teachers were teaching here in October of the 2003-2004 and 2006-2007 school years? *Please include in your counts all regular classroom or general education teachers, special area or resources teachers, and long-term substitute teachers. Do not include student teachers or short term substitute teachers. Record counts of individuals, not FTEs (full time equivalents).*

	October 2003-2004	October 2006-2007
Full-time teachers		
Part-time teachers		

I-2). How many new full and part time teachers did your school hire over the three school years from 2004-2005 through 2006-2007? *Please include all teachers who were newly hired during this time period to work at your school, even if they are no longer working at your school. However, count each individual only once based on their current or last status as a full or part-time teacher at the school. Do not include student teachers or individuals serving as short term substitutes. Record counts of individuals, not FTEs (full time equivalents).*

Count of Newly Hired Teachers 2004-2005 through 2006-2007	
Full-time teachers	
Part-time teachers	

1. How many staff members did your school employ in 2006-2007 in the following categories? Please provide counts in Column (1) of staff members who worked full time at your school and in column (2) of staff members who worked part time at your school. Place each staff member in only one staff category. If there was no staff in your school in a category, enter "0" on the line for that category. Record counts of individuals, not FTEs (full time equivalents).

Staff Category	(1) Number who worked full time in the school	(2) Number who worked part time in the school
a. General education teachers	_____	_____
b. Gym, drama, music or art teachers	_____	_____
c. Special education and related service providers	_____	_____
d. ESL/Bilingual education teachers	_____	_____
e. Reading teachers/specialists	_____	_____
f. Teachers of gifted/talented	_____	_____
g. School nurse or health professional	_____	_____
h. School psychologist, social worker, or counselor	_____	_____
i. Paraprofessionals (e.g., classroom aides or library assistance)	_____	_____
j. Library media specialists/librarian	_____	_____

2. How many of your school's full-time and part-time teachers in 2006-2007 were members of the following groups? Write the number on each line. Enter "0" on the line if your school has no teachers of that racial-ethnic group.

	Number
a. Asian or Pacific Islander	_____
b. Hispanic, regardless of race	_____
c. Black, not of Hispanic origin	_____
d. White, not of Hispanic origin	_____
e. American Indian or Alaska Native	_____

School Facilities and Resources

3. How many students is your school currently designed to serve? (Do **not** include space provided by portables or other temporary instructional space.)

_____ Students

(If your school consists entirely of portable [temporary] buildings, check here: and enter the number of students the portable [temporary] buildings are designed to serve on the line above. Then skip to question 5.)

4. a. Does this school have one or more portable (temporary) buildings?

Yes

No

- b. How many additional students (i.e., beyond the number reported above in response to question #3) are the portable (temporary) buildings designed to serve?

_____ Students

5. What is the total number of computers in this school? *Include computers used for instructional and administrative purposes. If none, mark (X) the box.*

None – Go to item 8

_____ Number of computers

6. Of the total number of computers in this school, how many are used for instructional purposes?

None – Go to item 8

_____ Number of computers

7. Do most students have access to the Internet through computers located in this school?

Yes

No

School Climate and Safety

8. Indicate how much you agree or disagree with the following statements about the school’s climate. *Mark (X) one box in each row.*

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
a. Parents are actively involved in this school’s programs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Teacher absenteeism is a problem at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Teacher turnover is a problem at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Child absenteeism is a problem at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. The community served by this school is supportive of its goals and activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. There is a consensus among administrators and teachers on goals and expectations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Order and discipline are maintained satisfactorily in the building(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Overcrowding is a problem at this school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Parents of children in this school are welcome to observe classes any time they are in session.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Did any of the following types of problems occur at this school during the 2006-2007 school year? *Mark (X) one box in each row.*

	Yes	No
a. Children bringing weapons to school?	<input type="checkbox"/>	<input type="checkbox"/>
b. Things being taken directly from children or teachers by force or threat of force at school or on the way to or from school?	<input type="checkbox"/>	<input type="checkbox"/>
c. Children or teachers being physically attacked or involved in fights?	<input type="checkbox"/>	<input type="checkbox"/>
d. Children bringing in or using alcohol at school?	<input type="checkbox"/>	<input type="checkbox"/>
e. Children bringing in or using illegal drugs at school?	<input type="checkbox"/>	<input type="checkbox"/>
f. Vandalism of school property?	<input type="checkbox"/>	<input type="checkbox"/>

Professional Development

10. a. In the 2006-2007 school year, did this school provide **teachers** with time for professional development during regular contract hours?

- Yes—Continue with Item 10b
- No—Go to Item 11

b. Were the following used to provide teachers with time for professional development during regular contract hours? *Mark (X) one box in each row.*

	Yes	No
Substitutes to cover teachers' classes?	<input type="checkbox"/>	<input type="checkbox"/>
Early dismissal or late start for students?	<input type="checkbox"/>	<input type="checkbox"/>
Professional days built in before the beginning of the school year?	<input type="checkbox"/>	<input type="checkbox"/>
Professional days built in during the school year?	<input type="checkbox"/>	<input type="checkbox"/>
Professional days built in after the school year?	<input type="checkbox"/>	<input type="checkbox"/>
Common planning time for teachers for professional development?	<input type="checkbox"/>	<input type="checkbox"/>
Reduced teacher work loads (Less time in the classroom with students, or less time or assigned non-instructional duties) for professional development?	<input type="checkbox"/>	<input type="checkbox"/>

11. During the 2006-2007 school year, approximately how much emphasis did the school place on professional development for teachers in the following areas? *Mark (X) one box in each row.*

Professional development areas	No emphasis	Little emphasis	Moderate emphasis	A great deal of emphasis
In-depth study in the core academic subjects taught	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New methods of teaching (e.g., cooperative learning)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
State or district curriculum and performance standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integration of educational technology in the grade or subject taught	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student performance assessment (e.g., methods of testing, interpreting assessment data, applying results to modify instruction)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Classroom management (including student discipline)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Question 11 continued on the next page.

11. Continued from previous page. *Mark (X) one box in each row.*

Professional development areas	No emphasis	Little emphasis	Moderate emphasis	A great deal of emphasis
Addressing the needs of students with limited English proficiency or from diverse cultural backgrounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Addressing the needs of students with disabilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Addressing the needs of struggling readers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (<i>Please specify</i>): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. Does this school use coaches* to help teachers strengthen their teaching in the following areas?
Mark (X) one box in each row.

	Yes	No
Reading	<input type="checkbox"/>	<input type="checkbox"/>
Mathematics	<input type="checkbox"/>	<input type="checkbox"/>

**Whereas reading or mathematics specialists work directly with students, reading and mathematics coaches work directly with teachers to improve their teaching of reading and mathematics.*

Goals and Decision Making

13. We are interested in the importance you place on various educational goals. From the following nine goals, which do you consider the most important, the second most important, and the third most important? *(Please write the numbers of the three most important goals in the boxes below.)*

- 1- Building basic literacy skills (reading, math, writing, speaking)
- 2- Encouraging academic excellence
- 3- Promoting occupational or vocational skills
- 4- Promoting good work habits and self-discipline
- 5- Promoting personal growth (self-esteem, self-knowledge, etc.)
- 6- Promoting human relations skills
- 7- Promoting multi-cultural awareness or understanding
- 8- Fostering religious or spiritual development

Most important

Second most important

Third most important

14. How much ACTUAL influence do you think each of the following groups or people has on decisions concerning the following activities? *Mark (X) one box in each row.*

a. Establishing curriculum at this school	No Influence	Minor Influence	Moderate Influence	Major Influence
1. State department of education or other state-level bodies (e.g., state board of education)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Local school board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. School district staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Principal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Curriculum specialists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Parent association	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Determining the content of in-service professional development programs for teachers at this school	No Influence	Minor Influence	Moderate Influence	Major Influence
1. State department of education or other state-level bodies (e.g., state board of education)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Local school board	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. School district staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Principal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Curriculum specialists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Parent association	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Parental Involvement

15. During the 2006-2007 school year, about how many of the parents at your school participated or were involved in each of the following? (“Parents” includes parents and other caregivers.)

	None / not offered	10% or fewer	11%- 30%	31%- 50%	50% or more
Open house or back-to-school night	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Regularly scheduled school-wide parent-teacher conferences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Special subject-area events (e.g., science fair, concert)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent education workshops or courses offered	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parent-child learning activities at school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parents involved in instructional issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parents involved in governance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parents involved in budget decisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Program and Practices

16. Does your school have any of the following special features? *Mark the box in the first column if your school offered this feature in 2006-2007. Mark the box in the second column if your school offered this feature in 2003-2004.*

	2006-2007	2003-2004
a. Program with a curricular focus		
Academics (rigorous, classical, etc)	<input type="checkbox"/>	<input type="checkbox"/>
Mathematics	<input type="checkbox"/>	<input type="checkbox"/>
Science	<input type="checkbox"/>	<input type="checkbox"/>
Technology	<input type="checkbox"/>	<input type="checkbox"/>
Arts (visual arts, music, drama, dance, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Communication	<input type="checkbox"/>	<input type="checkbox"/>
Multicultural/international awareness	<input type="checkbox"/>	<input type="checkbox"/>
Languages (e.g., dual immersion, Spanish, Chinese)	<input type="checkbox"/>	<input type="checkbox"/>
Character development	<input type="checkbox"/>	<input type="checkbox"/>
Other specialized curricular focus (<i>Please specify</i>):	<input type="checkbox"/>	<input type="checkbox"/>
b. Instructional approaches		
Team teaching	<input type="checkbox"/>	<input type="checkbox"/>
Cooperative learning groups	<input type="checkbox"/>	<input type="checkbox"/>
Integrating multi-sensory or hands-on activities	<input type="checkbox"/>	<input type="checkbox"/>
Integrating computers/multi-media	<input type="checkbox"/>	<input type="checkbox"/>
Interdisciplinary teaching (i.e., two or more teachers with different specializations collaborate to teach an interdisciplinary program to the same group of students.)	<input type="checkbox"/>	<input type="checkbox"/>
Long-term project-based learning to integrate knowledge	<input type="checkbox"/>	<input type="checkbox"/>
Student groups that remain two or more years with the same teacher (e.g. looping)	<input type="checkbox"/>	<input type="checkbox"/>
Simulations/role play	<input type="checkbox"/>	<input type="checkbox"/>
Other special instructional approach (<i>Please specify</i>):	<input type="checkbox"/>	<input type="checkbox"/>
c. Assessment approaches		
Progress monitoring	<input type="checkbox"/>	<input type="checkbox"/>
Diagnostic testing	<input type="checkbox"/>	<input type="checkbox"/>
Portfolio assessment	<input type="checkbox"/>	<input type="checkbox"/>
Other special assessment approach (<i>Please specify</i>):	<input type="checkbox"/>	<input type="checkbox"/>

Question 16 continued on next page.

16. Continued from the previous page. *Mark the box in the first column if your school offered this feature in 2006-2007. Mark the box in the second column if your school offered this feature in 2003-2004.*

d. Comprehensive school reform models	2006-2007	2003-2004
Comer School	<input type="checkbox"/>	<input type="checkbox"/>
Accelerated Schools	<input type="checkbox"/>	<input type="checkbox"/>
Success for All/Roots and Wings	<input type="checkbox"/>	<input type="checkbox"/>
Montessori School		
Other school reform model (<i>Please specify</i>):	<input type="checkbox"/>	<input type="checkbox"/>
e. Other		
Other special offering (<i>Please describe</i>):	<input type="checkbox"/>	<input type="checkbox"/>

17. In each grade, which of the following goals are considered *important* in assigning students to classrooms at the beginning of the school year?

Goals	Grade						
	K	1	2	3	4	5	6
None (assignment is random)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grouping students by ability (i.e., homogeneous by ability)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintaining mixed ability classrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintaining socioeconomic diversity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintaining race-ethnic diversity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintaining same-sex classrooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Matching teacher strengths to student needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. DROPPED THIS QUESTION

School Improvement Strategies

19. Looking back over the last three school years (2004-2005 through 2006-07), how much has your school focused on the following strategies in its improvement efforts? *Mark (X) one box in each row.*

School was...	Not a focus	Minor focus	Moderate Focus	Major focus
a. Using student achievement data to inform instruction and school improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Aligning curriculum and instruction with standards and/or assessments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Implementing new instructional approaches or curricula in <u>reading/language arts/English</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Implementing new instructional approaches or curricula in <u>mathematics</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Providing additional instruction to low-achieving students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Restructuring the school day to teach core content areas in greater depth (e.g., establishing a literacy block)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Increasing instructional time for all students (e.g., by lengthening the school day or year, shortening recess)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Providing extended-time instructional programs (e.g., before-school, after-school or weekend instructional programs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Implementing strategies for increasing parents' involvement in their children's education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Increasing the intensity, focus and effectiveness of professional development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. As a general school policy, how many hours and minutes per week do third-grade students in your school spend learning each of the following subjects? (*Write in the total numbers of hours and minutes per week. Example: For 1 ½ hours per day, write “7” hours and “30” minutes per week.*)

If there are no third-grade students in your school, check here and skip to Question 21.

	Times per week for typical 3 rd grade student in your school	
	Hours per week	Minutes per week
a. Mathematics		
b. Reading/language arts/English		
c. Science		
d. Social studies/ History		
e. Art/Music		
f. Physical education/Health		
g. Other _____		

21. For each of the following extended-time instructional programs, please indicate whether such a program is available in your school, and if so, enter the:

- A. Number of children served
- B. Number of hours children are served per week
- C. Number of weeks children are served per year

(Report only on instructional programs and do not include preschool, summer school, before- or after-school child care, clubs, or recreation programs. Mark the box if the program is available in your school, and if so, write in numbers in each box below.)

	Program available	A. Number of children served	B. Number of hours per week	C. Number of weeks per year
1. Before-school tutorial or instructional program	<input type="checkbox"/>			
2. After-school tutorial or instructional program	<input type="checkbox"/>			
3. Weekend tutorial or instructional program	<input type="checkbox"/>			

I-3a Did this school make Adequate Yearly Progress (AYP) as defined by No Child Left Behind in each of the following years? *For each year, please mark the box in the row corresponding to whether or not this school met AYP.*

Did School make AYP in...?	School Year				
	2002-2003*	2003-2004	2004-2005	2005-2006	2006-2007
Yes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
District had not implemented AYP*	<input type="checkbox"/>				

**(For the column labeled “ 2002-2003”, mark the box in this row if your district did not require reporting of AYP under No Child Left Behind in that year.)*

If your school made AYP in every year, please skip to question 22, otherwise continue with question I-3b.

I-3b. Please indicate the corrective action, if any, your school took as a response to not meeting AYP and the year(s) from 2003-2004 to 2006-2007 in which your school engaged in that action by marking an X in the appropriate box(es).

Type of Corrective Action Undertaken	School Year				
	2002-2003	2003-2004	2004-2005	2005-2006	2006-2007
No action taken as none was required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Adopted program improvement plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Converted to magnet school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Converted to charter school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Worked with outside expert to advise school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Offered students transfers to schools of choice that are not in need of improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Offered students supplemental education services (e.g. tutoring)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Implemented new instructional approaches or curricula	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extended length of school day or year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Replaced staff members with poor performance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Decreased authority of school administrators	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reconstituted the school*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contracted with a private entity to manage the school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Turned over operation of the school to the state	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify) _____ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(*A school is reconstituted when all school personnel contracts are cancelled and new administrators/staff/teachers are hired.)

Principal Background

22. Prior to the 2006-2007 school year, how many years were you employed in each of the following positions? *Count part of a year as 1 year. If none, mark (X) the box.*
- a. As principal of this school
 None or _____ years
 - b. As principal of another school or schools
 None or _____ years
23. a. How many years of elementary or secondary teaching experience did you have PRIOR to becoming a principal? *Count part of a year as one year. If none, mark (X) the box.*
 None or _____ year(s) of teaching
- b. Did you hold any school position other than teaching BEFORE you became a principal (e.g., department head, curriculum specialist, assistant principal or program director, guidance counselor, athletic coach, sponsor for student clubs or debate teams)?
 Yes – *Please describe:* _____
 No
24. What is the highest degree you have earned? *Mark (X) only one box.*
- Associate degree
 - Bachelor's degree (B.A., B.S., B.E., etc.)
 - Master's degree (M.A., M.A.T., M.B.A., M.Ed., M.S., etc.)
 - Education specialist or professional diploma (at least one year beyond master's level)
 - Doctorate or professional degree (Ph.D., Ed.D., M.D., L.L.B., J.D., D.D.S.)
 - Do not have a degree
25. What is your gender?
 Male
 Female
26. Are you of Hispanic or Latino origin?
 Yes, I am Hispanic or Latino
 No, I am not Hispanic or Latino

27. a. What is your race? *Mark (X) one or more races to describe yourself.*
- White
 - Black or African American
 - Asian
 - Native Hawaiian or other Pacific Islander
 - American Indian or Alaska Native – *Go to item 27b*
- b. Are you enrolled in a state or federally recognized tribe?
- Yes
 - No

-MSAP SCHOOL PRINCIPALS ONLY-**Principal Role and Implementation of the MSAP Program¹**

28. If you were a principal of this school **during** the 2003-2004 school year, continue with Item 28a. If you became principal of this school **after** the 2003-2004 school year, please go to Item 28b.

a. What role, if any, did the fact that this school was designated as an MSAP magnet school (i.e., received a federal magnet grant) have in your continuing as principal after the 2003-2004 school year? *Mark (X) one box.*

- Little or no role: I would have remained as principal without the magnet program.
- Some role: I remained in part because I was interested in the magnet program.
- The MSAP designation played a strong role: I remained as principal specifically because of my interest in the magnet program.

Go to Item 29.

b. What role, if any, did the fact that this school was designated as an MSAP magnet school (i.e., received a federal magnet grant) have in your becoming principal after the 2003-2004 school year? *Mark (X) one box.*

- Little or no role: I would have become principal here even without the magnet program.
- Some role: I became principal here in part because I was interested in the magnet program.
- A strong role: I was hired specifically to manage the magnet program in this school.

Go to Item 29.

29. To what extent were you involved in applying for or planning the magnet program for this school (i.e., during the development of the MSAP grant application and the start-up of the program)? *Mark (X) one box.*

- Not involved
- Slightly involved
- Moderately involved
- Strongly involved

30. How easy or difficult has it been to build a staff in this school that actively supports the magnet program (e.g., its curriculum, teaching methods, and activities)? *Mark (X) one box.*

- Very easy
- Fairly easy
- Fairly difficult
- Very difficult

¹ MSAP is the Magnet Schools Assistance Program, the federal grant that is supporting your magnet program.

31. Was part of the grant period used for planning before the program was implemented at the school?
 Yes—When did implementation begin? _____
 No

32. How complete was the implementation of the following components of the intended magnet program by the end of the first (2004-2005) and last (2006-2007) years of the grant?

Implementation Category	2004-2005					2006-2007				
	Not at All	Somewhat	Mostly	Fully	Not Applicable	Not at All	Somewhat	Mostly	Fully	Not Applicable
Hiring specialist staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hiring new staff who are enthusiastic about implementing magnet plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Providing professional staff development related to intended magnet program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obtaining instructional Materials/equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Planning curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Delivering curriculum (e.g., special activities, lessons)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creating new assessments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I-4. How important is completion of the following implementation activities to the success of the magnet program? *(Please check one response category for each activity. Separately, in the right-most column, please identify the **one** implementation activity from the list, the completion of which is most important to the success of the magnet program.)*

Implementation Activity	Importance of Completing Implementation of Activity to Success of the Magnet Program				What is the Most Important Activity (Choose only one)
	Not Important or Not Applicable	Minor Importance	Moderate Importance	Major Importance	
Hiring specialist staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hiring new staff who are enthusiastic about implementing magnet plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Providing professional staff development related to intended magnet program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obtaining instructional materials/equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Planning curriculum	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Delivering curriculum (e.g., Special activities, lessons)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Creating new assessments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Thank you for your help!