



**KINDERGARTEN FOLLOWUP**  
**Head Start Family and Child Experiences Survey**  
**Kindergarten Teacher Survey**  
Spring 2002/2003

**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 on the attached forms 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:

_____	_____
_____	_____
_____	_____

## 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. What type of school is this?

- Public school ..... 1
- Catholic school..... 2
- Private school with other religious affiliation ..... 3
- Private school with no religious affiliation..... 4

2. Do you teach.... (Circle one answer in each row):

**Yes    No**

- a. a full-day class? ..... 1    2
- b. a half-day morning class? ..... 1    2
- c. a half-day afternoon class? ..... 1    2

3. What type of class is this? (See definitions on page 2 and circle one.)

- Kindergarten class ..... 1
- Transitional (or readiness) kindergarten class ..... 2
- Transitional first grade class ..... 3
- Multigrade or ungraded class with at least some kindergarten-age children  
(specify) \_\_\_\_\_ 4

4. What is the highest grade taught at this school?

- Transitional kindergarten (pre-kindergarten) ..... 01
- Kindergarten..... 02
- Pre-first grade (after kindergarten)..... 03
- 1st grade ..... 04
- 2<sup>nd</sup> grade ..... 05
- 3<sup>rd</sup> grade ..... 06
- 4<sup>th</sup> grade ..... 07
- 5<sup>th</sup> grade ..... 08
- 6<sup>th</sup> grade ..... 09
- 7<sup>th</sup> grade ..... 10
- 8<sup>th</sup> grade ..... 11
- 9<sup>th</sup> grade ..... 12
- 10<sup>th</sup> grade ..... 13
- 11<sup>th</sup> grade ..... 14
- 12<sup>th</sup> grade ..... 15

5. Approximately how many students are currently enrolled...

- a. in this school? ..... \_\_\_\_\_
- b. in kindergarten? ..... \_\_\_\_\_
- c. in this class?..... \_\_\_\_\_

6. How many children currently enrolled in this class are...  
(Please 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. How many children with *limited English proficiency (LEP)* are there in this class? (See definition on page 2.)
- Number of LEP children ..... \_\_\_\_\_
8. How many children who are eligible for free or reduced-price lunch or breakfast are there in this 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 many paid assistants or co-/team- teachers do you have in this class in a typical week?
- Number of paid assistants or co-teachers: \_\_\_\_\_
11. On average, how many hours per week is there at least one paid assistant or co-/team-teacher 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. On average, how many hours per week all together do adult volunteer assistants spend in this class?
- Total number of hours per week: \_\_\_\_\_
14. Does each child have his or her own desk?
- Yes ..... 1
  - No..... 2

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?*

	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. 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

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. What is your gender?

- Male ..... 1
- Female ..... 2

20. In what year were you born? 19\_\_\_\_\_

21. Are you of Hispanic or Latino origin? *(Circle one number.)*

- Yes ..... 1
- No..... 2

22. Which best describes your race? *(Circle one or more.)*

- American Indian or Alaskan Native ..... 1
- Asian ..... 2
- Black or African American..... 3
- Native Hawaiian or Other Pacific Islander \_\_\_\_\_ 4
- White ..... 5

23. Counting this school year, how many years have you taught each of the following grades and programs? *(Write the number of years to the nearest half year, for example 2.5, 3.5. Please include part-time teaching. Write "0" if you have never taught the grade or program 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. Sixth grade or higher..... \_\_\_\_\_
- f. English as a Second Language (ESL) program..... \_\_\_\_\_
- g. Bilingual education program..... \_\_\_\_\_
- h. Special education program ..... \_\_\_\_\_
- i. Physical education program..... \_\_\_\_\_
- j. Art or music program..... \_\_\_\_\_

24. Counting this school year, how many years have you taught in your current school including part-time teaching? *(Write the number of years to the nearest half year, for example, 2.5, 3.5.)*

Number of years: \_\_\_\_\_

25. What is the highest level of education you have completed? *(Circle only one number.)*
- High school diploma or GED ..... 1
  - Associate's degree ..... 2
  - Bachelor's ..... 3
  - At least one year of course work beyond a Bachelor's but not a graduate degree ..... 4
  - Master's ..... 5
  - Education specialist or professional diploma based on at least one year of course work past a Master's degree level ..... 6
  - Doctorate ..... 7
  - Other *(please specify on line below)* ..... 8
- 

26. How many college courses have you completed in the following areas? *(Circle one number on each line.)*

- a. Early child hood 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 ..... 1
- b. Temporary, probational, provisional, or emergency certification ..... 2
- c. Certificate for completion of an alternative certification program ..... 3
- d. Regular certification but less than the highest available ..... 4
- e. The highest certification available ..... 5

28. In what areas are you certified? *(Circle all that apply.)*

- a. Elementary education ..... 1
- b. Early childhood ..... 2
- c. Other *(please specify):* \_\_\_\_\_ 3

29. Date questionnaire completed: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
MM DD YY

***Thank you for participating in FACES!***