

## STUDENT ATTITUDE PRE-SURVEY

We need your help. We want to find out more about why some students do well in school and others do not. Your answers may help us design classes that are more interesting for everyone. This survey will not be given to or shared with anyone at your school but will be mailed directly to Newark, Ohio, for inclusion in a national study of high school students. In reporting the results of this study only group data will be used.

Please answer these questions honestly. Please do not put your full name anywhere on this survey.

The first set of questions ask about your average weekly time use. In answering the following questions, place an  in the box that best describes you.

| During an AVERAGE WEEK, how many hours do you spend...   | no time at all           | less than 1 hour         | 1-2 hours                | 3-5 hours                | 6-10 hours               | 11 or more hours         |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. Doing homework?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Watching television, videos, or playing video games?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. In clubs or organizations <i>outside of school</i> other than sports (like Scouts, YMCA/YWCA, etc.)   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. In clubs or organizations at <i>school</i> other than sports (like drama, student council, or newspaper)?   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Attending worship services, youth groups, religious education, Sunday School, or other programs at a church, synagogue, or other religious institution? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

6. During an average week how many hours do you spend doing volunteer work not related to your school to help other people (like hospital, day care, food pantry, youth program, or community service agency)? \_\_\_\_\_ Hours.

7. Reflecting on Question 6, how many service or volunteer projects during the last three months have you participated in where you volunteered for a service project but were not given any time to talk or write about it? (Include projects through Scouts, your church/synagogue, or your school, but not any you may be involved in now).

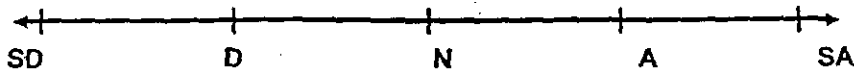
\_\_\_\_\_ None \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 or more projects

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8. During an average week how many hours do you spend working at a paid job? \_\_\_\_\_ Hours
9. During the last **THREE MONTHS OF SCHOOL**, how many times have you been sent to the principal or other school official's office because you had done something wrong? \_\_\_\_\_ Times
10. During the last **THREE MONTHS OF SCHOOL**, how many times have you been placed on school probation or suspended from school? \_\_\_\_\_ Times
11. During the last **FOUR WEEKS**, how many days have you been tardy (late to school)? \_\_\_\_\_ Days
12. During the last **FOUR WEEKS**, how many days of school have you missed because you skipped or "cut"? \_\_\_\_\_ Days
13. Since you started the 5th grade, how many times have you changed schools because you or your family moved?  
 \_\_\_ Never \_\_\_ Once \_\_\_ Twice \_\_\_ Three times \_\_\_ Over three times
14. How many close friends do you have with whom you can talk about any topic?
- |       |               |
|-------|---------------|
| ___ 0 | ___ 3         |
| ___ 1 | ___ 4         |
| ___ 2 | ___ 5 or more |
15. Highest level of education of your father:
- \_\_\_ some high school
  - \_\_\_ completed high school
  - \_\_\_ some college
  - \_\_\_ completed college
16. Highest level of education of your mother:
- \_\_\_ some high school
  - \_\_\_ completed high school
  - \_\_\_ some college
  - \_\_\_ completed college

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For the next set of questions, Read each item and check the box that best describes your opinion at this time based upon the scale below.



SD = Strongly Disagree  
 D = Disagree  
 N = Neither Agree nor Disagree  
 A = Agree  
 SA = Strongly Agree

| As a student, I ...   | SD                       | D                        | N                        | A                        | SA                       |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 17. believe that taking care of people who are having trouble taking care of themselves is everyone's responsibility. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. enjoy being around people whose backgrounds and experiences are different from mine.                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19. often seek out challenging opportunities that test my skills and abilities.                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. believe that helping a person in need is something people should do <u>only</u> for friends or relatives.         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. believe that there is <u>not</u> a whole lot to be learned from old people.                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22. believe that, on a project, it is everyone's responsibility to make sure the work gets done.                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23. cooperate and help on group projects.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24. know how to get things done.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 25. am aware of the problems in my community and which organizations are working to address them.                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 26. believe that you should nearly always be paid for helping others.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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27. Have any of your close friends dropped out of high school?

- None  Yes, several of them  
 Yes, 1 of them  Yes, many of them

28. Do you expect to graduate from high school?

- Yes  Probably Not  
 Probably  No

29. When you were younger were you retained in grade (held back):

A) During elementary school  
 Never  Once  Twice  3 or more times

B) During middle school  
 Never  Once  Twice  3 or more times

C) During high school  
 Never  Once  Twice  3 or more times

30. Do you plan to go to college at some time in the future?

- Yes, right after high school.  
 Yes, after staying out 1 year.  
 Yes, after a longer period out of school.  
 Don't know.  
 No.

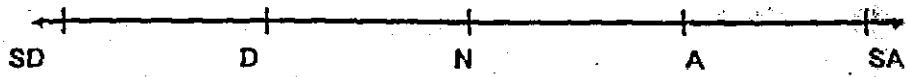
31. Most of the time I live with:

- one of my parents.  
 both of my birth parents.  
 one of my birth parents and one stepparent.  
 none of the above.

| 32. At what age do you expect to:                       |                            |                           |                          |                          |                          |                          |                          |
|---|----------------------------|---------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Read down this column and check off a box to the right. | a. Don't expect to do this | b. Have already done this | c. When I'm 18 or less   | d. When I'm 19           | e. When I'm 20           | f. When I'm 21 to 24     | g. When I'm 25 or older  |
| A) Get Married?   | <input type="checkbox"/>   | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B) Have first Child?                                    | <input type="checkbox"/>   | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C) Finish your full-time Education?                     | <input type="checkbox"/>   | <input type="checkbox"/>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

[Please go on to next page]

For the next set of questions, Read each item and check the box that best describes your opinion at this time based upon the scale below.



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 D = Disagree  
 N = Neither Agree nor Disagree  
 A = Agree  
 SA = Strongly Agree

| As a student, I ...   | SD                       | D                        | N                        | A                        | SA                       |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 33. usually treat other people with dignity and respect, regardless of who they are or where they come from.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 34. believe that being actively involved in community issues is everyone's responsibility, including mine.    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 35. believe that most problems will solve themselves if you just leave them alone.                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 36. would have no problem working with a person whose race or ethnicity differs from mine.                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 37. think that students should be required to perform service projects in the community in order to graduate. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 38. believe that people with disabilities can hold jobs and contribute to society.                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 39. am concerned about the problems and needs of my fellow human beings.                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 40. believe that it is up to the "experts" to solve problems in my community.                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

41. What is your latest cumulative grade point average across all subjects? \_\_\_\_\_ G.P.A.

42. Have you ever previously been in a class that involved service-learning? Yes \_\_\_ No \_\_\_

If yes, how many times? \_\_\_\_\_ Times Date of first service-learning class? \_\_\_/\_\_\_/\_\_\_

These last section of questions are about your plans for the next five years. Check the box which best describes how likely you think it is that you will do each of the following in the next five years.

- 1 = Not at all likely
- 2 = Not very likely
- 3 = Somewhat likely
- 4 = Pretty likely
- 5 = Very likely

| <i>In the next five years, how likely is it that...</i>   | 1                        | 2                        | 3                        | 4                        | 5                        |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 43. you will be actively involved in political issues or social causes that affect your community?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 44. you will volunteer your time to help others who are having problems or are in need (such as food or clothing drives or working in a shelter)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 45. you will spend some of your time working on projects aimed at preserving and protecting the environment?                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 46. you will volunteer to do something like tutoring kids, visiting the elderly, being a mentor, or coaching a team?                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 47. you will find personal and intellectual satisfaction in volunteering your time to help others?  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**INSTRUCTIONS FOR YOUR CODE NUMBER**

In order to match your answers today with those you give us in the future, please help us create a code that describes only you. Your responses will be averaged in with those of your peers. All data will be reported by class level. *Please complete the following information:*

48. I am participating in a school-related service-learning project that relates to a course I am taking:  
Yes \_\_\_ No \_\_\_

49. First letter of your first name: \_\_\_ 50. First four letters of your last name: \_\_\_

51. How old are you? \_\_\_ 52. What grade are you in? \_\_\_

53. Are you male or female? Male \_\_\_ Female \_\_\_

*Thank you for your time!*