

**Dear Student,**

**Thank you for taking this survey. Your feedback is important to your school! What you say on the survey is CONFIDENTIAL and will be kept private. Your name will NOT be included in any results.**

**You can skip any question you do not want to answer.**

**Sincerely,**

**Office of Research and Evaluation  
The School District of Philadelphia**

1. How often are these things true?

	Never	Rarely	Occasionally	Most or all of the time
My teachers want me to succeed.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My teachers have high expectations for me in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My teachers encourage me to work hard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My school meets my learning needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My teachers treat me with respect.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My teachers really listen to what I have to say.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My teachers really care about me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My teachers are willing to provide me with extra help if I need it.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My teachers explain information in a way I understand.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can talk with teachers or other school staff about problems.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is at least one adult at school I trust.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. How often do the following things happen in your classes?

	Never	Rarely	Occasionally	Most or all of the time
In my classes we stay busy and do not waste time.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In my classes we learn a lot.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I learn interesting things in my classes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My teachers make sure I understand lessons before teaching something new.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. How often are these things true?

	Never	Rarely	Occasionally	Most or all of the time
I am bullied at school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel welcome in my school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I enjoy being in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other students treat me with respect.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have good friends at my school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I am in school, I feel like I belong.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The school building is in good condition.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My school is clean.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Students are bullied at my school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. Have you been treated badly in school?

- Yes
- No

5. I have been treated badly based on...

	Yes	No
my race/ethnicity or background	<input type="radio"/>	<input type="radio"/>
my religion	<input type="radio"/>	<input type="radio"/>
my gender identity	<input type="radio"/>	<input type="radio"/>
my sexual orientation	<input type="radio"/>	<input type="radio"/>
how well I speak English	<input type="radio"/>	<input type="radio"/>
my having a disability	<input type="radio"/>	<input type="radio"/>
something else	<input type="radio"/>	<input type="radio"/>

6. Are students treated badly in school?

Yes

No

7. Students are treated badly based on...

	Yes	No
their race/ethnicity or background	<input type="radio"/>	<input type="radio"/>
their religion	<input type="radio"/>	<input type="radio"/>
their gender identity	<input type="radio"/>	<input type="radio"/>
their sexual orientation	<input type="radio"/>	<input type="radio"/>
how well they speak English	<input type="radio"/>	<input type="radio"/>
their having a disability	<input type="radio"/>	<input type="radio"/>
something else	<input type="radio"/>	<input type="radio"/>

8. How much do you agree with the following statements?

	Strongly Disagree	Disagree	Agree	Strongly Agree
My family has high expectations for me in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I believe I can learn whatever is taught in my classes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Everyone can get smarter.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My family encourages me to work hard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can't change how smart I am.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I work hard at school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I concentrate on my schoolwork.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am a responsible student.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I usually complete my schoolwork.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can figure out difficult homework.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can learn the things taught in school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I can do even the hardest homework if I try.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



9. How often are these things true?

	Never	Rarely	Occasionally	Most or all of the time
I feel safe in the neighborhood surrounding my school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel safe going to and from school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel safe in the hallways in my school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel safe in my classes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel safe in the bathrooms in my school.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

10. On most school days, how do you get to and from school?

- I walk
- I bike
- I ride in a car
- I take the school bus
- I take public transportation (SEPTA bus, trolley, or subway)
- Other

11. On a regular school day, about how much time do you spend after school watching TV, playing video games, or on a computer, tablet, or cell phone? Do not count time you spend doing these things for school work. If you do not know for sure, take your best guess.

- None
- Less than 1 hour
- About 1 to 2 hours
- About 3-4 hours
- About 5 hours or more

12. During a regular school week (Monday to Friday), how many days do you buy food or drinks from a corner store on your way to school?

- 0 days
- 1-2 days
- 3-4 days
- All 5 days

13. During the past 7 days, on how many days were you physically active for a total of at least 60 minutes? (Add up all the time you did any activity that made your heart beat fast or made you breathe hard, like running, riding a bike, playing sports, or dancing.)

- 0 days
- 1-2 days
- 3-4 days
- 5-6 days
- All 7 days

For the next 4 questions, think about yesterday or, if today is Monday, think about last Friday.

14. Yesterday, how many times did you drink water? For example, from a glass, a cup, a bottle, or a water fountain.

- 0 times
- 1 time
- 2 times
- 3 times
- 4 times
- 5 or more times

15. Yesterday, how many times did you drink any soda, punch, fruit-flavored drinks, sweet iced tea, lemonade, sports drinks, or energy drinks?

- 0 times
- 1 time
- 2 times
- 3 or more times

16. Yesterday, how many times did you eat fruit? Count fresh, frozen, canned, and dried fruit. DO NOT count fruit juice.

- 0 times
- 1 time
- 2 times
- 3 times
- 4 times
- 5 or more times

17. Yesterday, how many times did you eat vegetables? Count cooked and raw vegetables, salad, and boiled, baked, or mashed potatoes.

- 0 times
- 1 time
- 2 times
- 3 times
- 4 times
- 5 or more times

18. In general, my health is...

- Bad
- Fair/OK
- Good
- Very good
- Excellent

19. About how many times a week do you eat school lunches?

- 0 times
- 1-2 times
- 3-5 times

20. How much do you agree with the following statements about school lunches...

	Strongly Disagree	Disagree	Agree	Strongly Agree	I don't know
the food tastes good.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
the food looks good.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
the food smells good.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
the food is fresh.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
food is cooked to the right temperature (for example, hot food is not served cold).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
the menu provides healthy choices.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I know what is on the menu before I get to the cafeteria.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
the cafeteria staff is nice.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
there are enough seats in the cafeteria.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
the cafeteria is clean.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have enough time to eat.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I get enough food to fill me up.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



21. On a regular school day, do you eat breakfast?

- No, I do not eat breakfast
- Yes, I eat breakfast at home
- Yes, I eat breakfast at school
- Yes, I eat breakfast at home AND at school
- Yes, I eat breakfast somewhere other than home or school

22. How do you get on the internet? (check all that apply)

- I don't go on the internet
- At a library
- At my school
- At a community center
- At a local computer lab
- At an after school program
- A computer at home
- A smartphone or tablet
- Other

23. How often do you use the internet?

- Every day
- Almost every day
- A few times a week
- Once a week or less
- I don't know

Thank you for taking the survey!

Please click DONE to submit your answers.