

North Hunterdon Student Climate Survey

Please complete the survey as honestly as possible. You do not need to complete the survey if you have opted out. This survey is anonymous.

* Required

1. 1. How often do students interact with each other in positive, respectful ways in school? *

Mark only one oval.

1	2	3	4	5	
Never	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Always

2. 2. How often do students interact with each other in positive, respectful ways virtually or online? *

Mark only one oval.

1	2	3	4	5	
Never	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Always

3. 3. Have you witnessed incidents of microaggressions? If so, where? Check all that apply. *

Check all that apply.

	Not at all	Rarely	Sometimes	Often
In school during class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In School during other activities (bathrooms, hallways, lunch/cafeteria, study hall)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
During after school activities (practices, club meetings, sporting events)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On the bus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Online	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

For the next question, please consider the following definitions.

Verbal violence: a type of psychological/mental abuse that involves the use of oral language, gestured language, and written language directed to a victim.

Hate speech: abusive or threatening speech or writing that expresses prejudice against a particular group, especially on the basis of race, religion, or sexual orientation.

4. 4. Have you witnessed incidents of verbal violence or hate speech? If so, where did the event occur? Check all that apply. *

Check all that apply.

	Not at all	Rarely	Sometimes	Often
In school during class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In School during other activities (bathrooms, hallways, lunch/cafeteria, study hall)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
During after school activities (practices, club meetings, sporting events)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On the bus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Online	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. 5. How well does the school handle incidents of verbal violence and/or hate speech? *

Mark only one oval.

1 2 3 4 5

Not well at all Very well

6. 6. How well does the school prevent incidents of verbal violence and/or hate speech from occurring? *

Mark only one oval.

1 2 3 4 5

Not well at all Very well

7. 7. How confident are you that if you report an incident of bias, harassment and/or bullying that it will be handled in a manner that will prevent future incidents? *

Mark only one oval.

1 2 3 4 5

Not confident Very confident

8. 8. Have you ever avoided reporting an incident of bias, harassment and/or bullying? *

Mark only one oval.

- Yes
- No
- Not applicable

9. If you answered yes to the previous question, please indicate the reasons why. Check all that apply.

Mark only one oval.

- Did not think the situation would get better.
- Fear of retribution.
- Felt it would not be kept anonymous.
- Felt nothing would be done.
- Other: _____

10. 9. Do you feel comfortable reaching out to a staff member if you have witnessed or experienced a microaggression or incident of verbal violence and/or hate speech? *

Mark only one oval.

- Yes
- No
- I'm not sure

11. 10. Do celebrations, festivals and special events at the school reflect a variety of cultural groups and holidays? *

Mark only one oval.

- Yes
- No
- I'm not sure

12. 11. Do you think it is important that the school staff is representative demographically of the school community? *

Mark only one oval.

1	2	3	4	5		
Strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Strongly agree

13. If you choose, please share why you feel that way.

- 14. 12. School staff members respect and value all members of the school community regardless of race, gender, religious background, or sexual orientation. *

Mark only one oval.

1 2 3 4 5

Strongly disagree Strongly agree

- 15. If you choose, please share why.

- 16. 13. Do the instructional materials used in the classroom and available in the school library, including textbooks, supplementary books and multimedia resources, reflect the experiences and perspectives of people of diverse backgrounds? *

Mark only one oval.

1 2 3 4 5

No, the materials do not reflect experiences and perspectives diverse backgrounds at all. Yes, the materials reflect experie

- 17. 14. Are equitable opportunities for participation in extra- and co-curricular activities made available to students of all backgrounds and identities. *

Mark only one oval.

1 2 3 4 5

No, not at all. Yes, completely.

- 18. 15. Do you feel what students are taught increases cultural understanding and promotes acceptance? *

Mark only one oval.

1 2 3 4 5

No, not at all. Yes, completely.

- 19. 16. Do you feel teachers adequately incorporate instructional materials that reflect the histories, contributions and perspectives of diverse groups? *

Mark only one oval.

1 2 3 4 5

No, not at all. Yes, completely.

20. 17. Thinking about your experiences, is there any other information you would like to share regarding school climate?

Four horizontal lines for text input.

Demographics

No identifying information (student id, email) is collected with this survey. Honestly answering the demographic information helps make the data collected more meaningful.

For this next question, please consider the following information:

- Cisgender male - You identify with the gender you were assigned at birth: Male
Cisgender female - You identify with the gender you were assigned at birth: Female
Nonbinary - You identify outside of the gender binary
Transgender female - You do not identify with the gender you were assigned at birth you identify as: Female
Transgender male - You do not identify with the gender you were assigned at birth you identify as: Male
Questioning - You are unsure what gender you identify with

21. 1. Please select your gender *

Mark only one oval.

- Radio buttons for: Cisgender male, Cisgender female, Nonbinary, Transgender male, Transgender female, Questioning, Prefer not to say, Other: _____

22. 2. Please select your ethnicity *

Check all that apply.

- Checkboxes for: Asian, South Asian, Black (African American, etc), Caucasian/White, Hispanic/Latinx, Indigenous, Pacific Islander, Prefer Not To answer, Other: _____

23. 3. Please select your grade *

Mark only one oval.

- Freshman
- Sophomore
- Junior
- Senior

24. 4. Do you practice a religion?

Mark only one oval.

- Agnostic
- Atheist
- Buddhism
- Christianity
- Hinduism
- Islam
- Judaism
- Mormon
- None
- Prefer Not to Say
- Other: _____

25. 5. Do you identify as being part of the LGBTQ+ community?

Mark only one oval.

- Yes
- No
- Prefer not to answer

26. 6. Please share any other information about your demographics that were not addressed in the previous questions.

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