

MONTANA 21ST CENTURY COMMUNITY LEARNING CENTERS:
STUDENT SURVEY (6-12)

Dear Student,

We want to know what YOU think about the after school program.

- This is NOT a test.
- There are NO wrong answers.
- You do NOT have to answer any question if you do not want to, but we hope you will answer as many questions as you can.
- Please do not enter your name on this survey. No one can tell who filled out this survey. Your answers will be completely private and unknown to others.

1) WRITE IN YOUR AFTER SCHOOL PROGRAM CENTER NAME: (IF YOU DO NOT KNOW THE NAME OR ARE UNSURE, PLEASE ASK A STAFF PERSON)

2) WRITE YOUR SCHOOL NAME:

3) WHAT GRADE ARE YOU IN?

- | | |
|------------------------------|-------------------------------|
| <input type="checkbox"/> 6th | <input type="checkbox"/> 10th |
| <input type="checkbox"/> 7th | <input type="checkbox"/> 11th |
| <input type="checkbox"/> 8th | <input type="checkbox"/> 12th |
| <input type="checkbox"/> 9th | |

4) HOW OFTEN DO YOU USUALLY ATTEND THE AFTER SCHOOL PROGRAM?

- 3-7 days per week
- 1-2 days per week
- 1-3 times per month
- A few times per year

5) HOW MANY MONTHS HAVE YOU ATTENDED THIS YEAR (SINCE JUNE 2019)?

- | | | |
|----------------------------|----------------------------|-----------------------------|
| <input type="checkbox"/> 1 | <input type="checkbox"/> 5 | <input type="checkbox"/> 9 |
| <input type="checkbox"/> 2 | <input type="checkbox"/> 6 | <input type="checkbox"/> 10 |
| <input type="checkbox"/> 3 | <input type="checkbox"/> 7 | <input type="checkbox"/> 11 |
| <input type="checkbox"/> 4 | <input type="checkbox"/> 8 | <input type="checkbox"/> 12 |

6) DO THE ACTIVITIES YOU DO IN THE AFTER SCHOOL PROGRAM RELATE TO WHAT YOU'RE DOING IN SCHOOL?

- Yes
- No

7) IN WHAT WAY(S) IS THE PROGRAM SIMILAR TO WHAT YOU DO AT SCHOOL?

8) IN WHAT WAY(S) IS THE PROGRAM DIFFERENT FROM WHAT YOU DO AT SCHOOL?

9) HOW MUCH DO YOU DISAGREE OR AGREE WITH THE FOLLOWING?

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
I look forward to the after school program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I participate in activities at my after school program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am interested in the things we are doing at my after school program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The after school program motivates me to do well in school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The staff at the after school program care about me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The adults at the after school program are supportive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
The staff at the after school program treat me with respect.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The staff at the after school program listen when I have something to say.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The program staff make me feel welcome in the after school program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The students in the after school program make me feel welcome.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel like I belong to this program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have made friends at this program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The after school program has helped me identify my dreams for the future.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The after school program has helped me develop career skills, talents and interest.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The after school program has helped me prepare a plan for the future after graduation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10) IS THERE ANYTHING YOU WOULD LIKE THE AFTER SCHOOL PROGRAM STAFF TO KNOW?

11) HOW MUCH TO YOU AGREE OR DISAGREE WITH EACH OF THE FOLLOWING?

	Strongly Disagree	Disagree	Agree	Strongly Agree
I like the after school program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would recommend the after school program to my friends who do not already attend.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I want to come back to the after school program next year.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12) WOULD YOU LIKE MORE ACTIVITIES, OTHER THAN HOMEWORK HELP, IN THE AFTER SCHOOL PROGRAM?

- No, not at all
- Probably not
- Probably
- Yes, definitely

13) WHAT IS ONE THING YOU WOULD LIKE TO CHANGE ABOUT THE AFTER SCHOOL PROGRAM?

14) WHAT IS YOUR FAVORITE PART OF THE AFTER SCHOOL PROGRAM?

15) PLEASE ANSWER EACH OF THE FOLLOWING QUESTIONS:

	No, not at all	A little	Quite a bit	Yes, definitely	I don't know
Are you doing better in school since you started coming to the after school program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you feel happier since attending the after school program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the after school program helped you to get along with other people?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Are you better at dealing with problems since coming to the after school program?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the after school program helped increase your desire to do well and stay in school?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Has the after school program helped you feel more comfortable working with other students?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16) HOW MUCH DO YOU DISAGREE OR AGREE WITH EACH OF THE FOLLOWING?

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly Agree
I think carefully about what I'm going to do before I do it.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I look for opportunities to help others in my community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel safe at school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am responsible for my decisions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I spend time volunteering or helping others in my community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have control over how I act.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have control over my future.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel safe on my way to / from the after school program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I feel safe in this program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

YOU ARE DONE! THANK YOU FOR TAKING OUR SURVEY.