

## STUDENT ASSESSMENT OF CLASSROOM CULTURE

You can adapt this sample survey to any grade level. Keep in mind that if you ask students to put their names on the survey, you may get different responses than if you give the survey anonymously.

	<b>Always</b>	<b>Most of the Time</b>	<b>Sometimes</b>	<b>Seldom</b>	<b>Never</b>
Does the class seem organized?					
Do you understand the classroom rules?					
Do you feel that you can ask me questions?					
Am I fair?					
Do you trust me?					
Do you receive help when you need it?					
Do you feel physically safe in class?					
Do you feel mentally safe in class?					
Are you excited to come to class?					
Do I listen to you when you have a problem?					
Do I listen to your suggestions?					
Do you feel involved in class?					
Do you feel supported by other students?					
Do you support other students?					
Do you participate in classroom discussions?					
Do you follow the classroom rules?					
Do you find school useful?					
Do you study things that interest you?					
Do you feel that your daily work is clearly connected to a larger goal?					

If you could change one thing about this class, what would it be and why?