

Perception of School Social Bonding Instrument – STUDENT VERSION

I know that by being a part of the study, my teacher will not let any bad things happen to me and I can stop at any time if I do not want to participate.

Mark as shown: Fill in the correct answer with an 'X' as shown. USE PENCIL or BLUE/BLACK INK Correction: If you make a mistake, fill in that entire box solidly, then put an 'X' in the correct box.

Survey Questions Part I

Direction: Please place an 'X' in the answer that you think is the right answer.

I feel that...	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. All students at my school are treated fairly by school officials.	<input type="checkbox"/>				
2. All my peers at my school are treated fairly by school officials.	<input type="checkbox"/>				
3. I get along with school staff, at my school.	<input type="checkbox"/>				
4. I try my best in school.	<input type="checkbox"/>				
5. What I am learning in school is important to my future.	<input type="checkbox"/>				
6. I enjoy school.	<input type="checkbox"/>				
7. I am rewarded for participating in school activities.	<input type="checkbox"/>				
8. I participated in or was a leader in at least one positive school activity.	<input type="checkbox"/>				
9. I participated in more than one extracurricular activity in school.	<input type="checkbox"/>				
10. I knew the punishment for breaking a school rule.	<input type="checkbox"/>				
11. My teachers cared if I succeeded.	<input type="checkbox"/>				
12. I had adults, in my school, who I could talk to about important things.	<input type="checkbox"/>				
13. Adults in my school notice when I do something well.	<input type="checkbox"/>				
14. When I do something good adults in my school tell me about it.	<input type="checkbox"/>				
15. I participated in school activities during school time.	<input type="checkbox"/>				
16. Persons, in my school, encourage me to go further in my education.	<input type="checkbox"/>				

Information about you:

How old are you?

6-10 yrs 11-15 yrs 16-20 yrs

Are you a...

Boy Girl

What grade are you in?

4th 5th 6th 7th 8th 9th
 10th 11th 12th Alternative/Vocational Ed

What is your race?

Black White Hispanic Asian
 Native American Other

How many years have you been at this school?

1 yr 2 yrs 3 yrs 4 yrs 5 yrs 6+ yrs

How many days, this school year, have you missed school?

1-2 3-4 5-6
 7-8 9-10 11+

This 16 item student tool offers your school an assessment of school social bonding. The scores are averaged to rate your school and its programs as "Very Effective", "Effective", or "Somewhat Effective" on opportunities for your students to be Committed, Involved, Attached, and Believe in the value of school.

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