

## 2025 BCPS Customer Survey – Students, Grades 3-5

PURPOSE: In an effort to improve System Practices, Broward County School District is conducting a Customer Survey. The questions are aligned to the District's 2022-2027 Strategic Plan Guardrails. We value your opinion and ask that you complete the entire survey. Please be assured that your responses to this survey will be anonymous. Your honest opinion is appreciated. Thank you for taking your time to complete the survey.

**\*\*\*Unless otherwise noted, the answer choices for the survey are:**

**Strongly Agree      Agree      Neutral      Disagree      Strongly Disagree**

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### SECTION 1

TELL US ABOUT YOU:

1. Gender (Optional)
  - Male
  - Female
  - Prefer not to answer
2. Race (Optional)
  - I am American Indian or Alaska Native
  - I am Asian
  - I am Black or African American
  - I am Native Hawaiian or Other Pacific Islander
  - I am White
  - I am Multiracial
  - Other
3. Ethnicity (Optional)
  - Hispanic
  - Non-Hispanic or Latino
  - Prefer not to answer
4. Current Grade in this School
  - Grade 3
  - Grade 4
  - Grade 5

## SECTION 2

1. I feel safe at my school. \*\*
2. I would recommend my school to my friends. \*\*
3. \*Note: Remember, this survey is anonymous, please report any bullying concerns to a trusted adult at your school. The next 10 questions ask about bullying. Bullying is when 1 or more students tease, threaten, spread rumors about, hit, shove, or hurt another student over and over again. It is not bullying when 2 students of about the same strength or power argue, fight or tease each other in a friendly way. Since the start of the school year, have you ever been bullied on school property?
  - Yes
  - No
4. Since the start of the school year, where on school property were you bullied?
  - On the school bus
  - In the classroom
  - In the cafeteria
  - In the hallway
  - In the restroom
  - Other school area
  - Does not apply to me
5. Since the start of the school year, have you ever been electronically bullied? (Count being bullied through texting, Instagram, TikTok, Snapchat or other social media).
  - Yes
  - No
6. After I was bullied, I:
  - Told an adult at school
  - Told a parent
  - Told someone else
  - Did not tell anyone
  - Does not apply to me
7. After I told an adult at school about being bullied, the bullying:
  - Stopped
  - Got worse
  - Stayed the same
  - Doesn't apply to me

8. A teacher or another adult at school taught our class about what bullying is this school year.
- Yes
  - No
9. I think bullying is wrong. \*\*
10. I know different ways to intervene or help if bullying was happening or was going to happen. \*\*
11. I would intervene or help if another student was being bullied. \*\*
12. What can adults do to help stop bullying at school? (check all that apply)
- Supervise the school better
  - Start a student patrol program
  - Make punishment for bullying more harsh
  - Intervene more when they see bullying or disrespect
  - Talk/teach about bully prevention and/or intervention in class
  - Help students work together and make friends
  - Teach and celebrate kindness and respect more
13. Since the start of the school year, how many times were you in a physical fight on school property?
- 0 times
  - 1 time
  - 2 or 3 times
  - 4 or more times
14. My school is clean and well maintained. \*\*

### **SECTION 3**

1. My school has computers to help me learn. \*\*

### **SECTION 4**

1. My school provides sufficient material resources (books, supplies, technology, etc.) to meet my needs. \*\*
2. My teachers help me when I need them. \*\*
3. I use technology, such as computers or tablets, to help me complete my assignments. \*\*

4. My school has many places where I can learn, such as the library. \*\*

## **SECTION 5**

1. If I have a problem, I know who I can go to for help. \*\*
2. In my school, I am treated fairly. \*\*
3. In my school, students treat each other with respect. \*\*
4. In my school, adults treat students with respect. \*\*
5. In my school, students treat adults with respect. \*\*
6. I am friends with other students at this school. \*\*
7. During the school year, I participated in alcohol, other drug or tobacco prevention activities or lessons.
  - Yes
  - No
8. I enjoy eating food prepared by the cafeteria. \*\*
9. Which character traits do you value the most in yourself and others? (check all that apply)
  - Cooperation
  - Responsibility
  - Citizenship
  - Respect
  - Kindness
  - Honesty
  - Self-Control
  - Tolerance
  - Patriotism
10. My teachers listen to me. \*\*
11. My teachers ask me what I think about school. \*\*
12. I receive acknowledgement and/or praise for my strengths or accomplishments by adults at my school. \*\*
13. At my school, the following programs/services are available (check all that apply):

- Counseling
- Family Counseling
- Pro-Social Clubs (e.g., Choose Peace, SAVE Promise)
- Performing Arts
- Mentoring
- Academic/Social Clubs (e.g., SGA, Debate, Environmental Club, etc.)
- Safety Patrol
- Before and/or After School Child Care
- Tutoring (e.g., push-in, pull-out, etc.)
- Extended Learning Opportunities (ELO)
- Other

14. At my school, I participate in the following programs/services (check all that apply):

- Counseling
- Family Counseling
- Pro-Social Clubs (e.g., Choose Peace, SAVE Promise)
- Performing Arts
- Mentoring
- Academic/Social Clubs (e.g., SGA, Debate, Environmental Club, etc.)
- Safety Patrol
- Before and/or After School Child Care
- Tutoring (e.g., push-in, pull-out, etc.)
- Extended Learning Opportunities (ELO)
- Other

15. At my school, these are the programs/services that I value most or would value if they were available (check all that apply):

- Counseling
- Family Counseling
- Pro-Social Clubs (e.g., Choose Peace, SAVE Promise)
- Performing Arts
- Mentoring
- Academic/Social Clubs (e.g., SGA, Debate, Environmental Club, etc.)
- Safety Patrol
- Before and/or After School Child Care
- Tutoring (e.g., push-in, pull-out, etc.)
- Extended Learning Opportunities (ELO)
- Other

## **SECTION 6**

1. My teachers want every student to learn. \*\*

2. My teachers use different activities to help me learn new things. \*\*
3. In my school, my teachers want me to do my best work. \*\*
4. I set academic goals for myself. \*\*
5. I work on real-life problems to help me learn things I will need in the future. \*\*
6. I choose topics for my projects. \*\*
7. I give class presentations or share my work with classmates. \*\*
8. I work on assignments that challenge me and take more than one day to complete. \*\*
9. I complete homework to review what I learned in class and/or to prepare for the next day's lesson. \*\*
10. I complete assignments that meet my personal learning needs. \*\*
11. I work with other students in pairs or small groups. \*\*
12. I receive feedback about my work that helps me better understand what I'm learning. \*\*
13. I am provided opportunities to correct or improve my work. \*\*
14. I actively participate in class discussions and activities. \*\*
15. My teachers tell me how I should behave. \*\*
16. My teachers tell my family how I am doing in school. \*\*
17. My teachers ask my family to come to school activities. \*\*
18. My teachers send information to my parents. \*\*
19. My teachers smile and answer my questions. \*\*

## **SECTION 7**

### **ADDITIONAL INFORMATION**

1. What else would you like to tell us about your school?