

Student Learning Survey – Grade 4 Questions

1. My school gives me choices of sports or other activities to do after school. (Strongly disagree ... Strongly agree)
2. What activities would you like to do after school? (Open-ended response)
3. Do you go to any clubs, dance, sports, or music classes outside of school time? (Never ... All of the time)
4. Do you participate in any First Peoples activities? (Never ... All of the time)
5. Do you participate in any ongoing First Peoples activities outside your school day? (Never ... All of the time)
6. Is school a place where you feel like you belong? (Never ... All of the time)
7. How many adults do you think care about you at your school? (None ... 4 or more adults)
8. I am happy at my school. (Never ... All of the time)
9. What changes would you like to see happen in your school? (Open-ended response)
10. Do adults in the school treat all students fairly? (Never ... All of the time)
11. Do you feel welcome at your school? (Never ... All of the time)
12. Do you like school? (Never ... All of the time)
13. If you have a problem, can you get the help you need from adults at your school? (Never ... All of the time)
14. Do you feel you have choice about what you are learning? (Never ... All of the time)
15. Are your questions valued and welcomed by the adults at your school? (Never ... All of the time)
16. Are there supplies you wish you had at your school? (Open-ended response)
17. Do you feel safe at school? (Never ... All of the time)
18. Have you ever felt bullied at school? (Never ... All of the time)
19. Have you ever felt teased or picked on at school? (Never ... All of the time)
20. Who gives you extra help with your schoolwork? (Open-ended response)
21. Are you able to get extra help when needed? (Never ... All of the time)
22. Is there any part of your learning where you need more help? (Open-ended response)
23. I know how my school expects me to behave. (Never ... All of the time)
24. Are you learning about First Peoples at school? (Never ... All of the time)
25. Are you learning about local First Nations at school? (Never ... All of the time)
26. Are you learning the local First Nations' language(s) at school? (Never ... All of the time)
27. Are you learning about how people change our environment? (Never ... All of the time)
28. Do you get to work together on projects with your classmates? (Never ... All of the time)
29. Are you helped to understand how you can improve your learning? (Never ... All of the time)
30. Do you get to work on things you are interested in as part of your schoolwork? (Never ... All of the time)
31. Do you have chances to self-assess your work? (Never ... All of the time)
32. Do you feel you are getting better at self-assessing your learning? (Never ... All of the time)
33. If you do not understand something at school, do you ask for help? (Never ... All of the time)
34. What do you do when you don't understand something at school? (Open-ended response)
35. Do students share their work with others? (Never ... All of the time)

36. Do you know what things are considered when your work is assessed? (Never ... All of the time)
37. Are you shown different samples of what work looks like? (Never ... All of the time)
38. Are you asked what you already know about a topic before learning something new? (Never ... All of the time)
39. Do you set a learning intention or goal when learning something new? (Never ... All of the time)
40. Are you learning to explain the way you solve problems? (Never ... All of the time)
41. Do you have chances to show your learning in different ways (pictures, models, writing)? (Never ... All of the time)
42. Are you learning ways to think of and explore new ideas? (Never ... All of the time)
43. Are you learning how to care for your mental health? (Never ... All of the time)
44. Are you learning how to care for your body? (Never ... All of the time)
45. When you make a choice, do you think about how it might affect others? (Never ... All of the time)
46. I feel I am getting better at math. (Strongly disagree ... Strongly agree)
47. I feel I am getting better at reading. (Strongly disagree ... Strongly agree)
48. I feel I am getting better at writing. (Strongly disagree ... Strongly agree)
49. Are you learning how to solve problems in peaceful ways? (Never ... All of the time)
50. I try my best in Math and Science at school. (Strongly disagree ... Strongly agree)
51. I try my best in Language Arts and Social Studies at school. (Strongly disagree ... Strongly agree)
52. I like the gym and P.E. activities at my school. (Strongly disagree ... Strongly agree)
53. I like making new friends and meeting people at school. (Strongly disagree ... Strongly agree)
54. Does school make you feel stressed or worried? (Never ... All of the time)
55. What causes you to feel stressed or worried at school? (Open-ended response)
56. Do you feel good about yourself? (Never ... All of the time)
57. How many times a week do you eat breakfast? (Never ... Every day)
58. How many times a week do you eat fresh vegetables? (Never ... Every day)
59. How many times a week do you wake up tired? (Never ... Every day)
60. I feel like I participate in too many activities outside of school. (Strongly disagree ... Strongly agree)
61. On a normal school day, how many hours do you exercise (can include recess, lunch, P.E. class)? (Not at all ... More than 2 hours)