

At-Home Student Survey

As you create activities, lessons and units for your classes, it’s important to keep equity, inclusion and accessibility, SEL, and a trauma-sensitive learning environment at the forefront. Adapting or creating new routines or classroom management procedures that incorporate the above concepts are great beginning steps to help your students prepare for learning.

Conducting an at-home student survey can help you learn more about your students and their home environment, which is especially important during this time of
COVID-19. The survey can be the first step in building a meaningful relationship with your students.

The survey template provided on the following pages is intended as a starting point; customize the survey to suit your situation and the age of your students. In some cases, parents may be the ones completing the survey for their children.

Keep the survey results confidential and use the information to guide the development of units, lessons, and learning experiences.

STUDENT SURVEY

**Available Technology/Supplies:**

**What type of technology do you use at home?** *(check all that apply)*

\_\_Desktop computer
\_\_Tablet
\_\_Chromebook/laptop
\_\_Smart phone

\_\_None

\_\_Other (please specify)

**How do you access the internet at home?**

\_\_WiFi (through phone/cable company) \_\_Dial-Up (must connect via phone dial) \_\_Cellular service

\_\_No internet access

**How would you categorize your internet connection speed?**

\_\_*Slow to Moderate.* Enough to get online, check email, and comfortably browse the web.

\_\_*Fast.* Enough to smoothly stream video, quickly download large files, etc.

\_\_*Lightning speeds.* Fastest possible connection for all sorts of projects.

**How many other members of the household share the device you primarily use for schoolwork?**

\_\_1

\_\_2

\_\_3

\_\_4+

**If you share the device with others, how much access do you have to do your own schoolwork each day?**

\_\_I don’t have access to a device at home

\_\_Limited access (1-2 hours/day) \_\_Medium access (3-4 hours/day) \_\_Unlimited access

**Which of the following household items do you have available to use for physical education?**
*(check all that apply)*

\_\_Pair of socks

\_\_Laundry basket

\_\_Small ball

\_\_Large ball

\_\_Bed sheet

\_\_Pillowcase

\_\_Plastic cup

\_\_Jump rope

\_\_Other: *(list any sporting or fitness equipment you have at home)*

**Which of the following school supplies do you have available to use for physical education?**
*(check all that apply)*

\_\_Colored pencils

\_\_Crayons

\_\_Markers

\_\_Construction paper

\_\_Loose leaf paper

\_\_Notebook

\_\_Computer paper

\_\_Glue

\_\_Scissors

\_\_Tape

\_\_Other: *(list any additional school supplies you have at home)*

**About You:**

**If you have siblings living at home, what are their names and ages?**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_

**What is one word that best describes you?**

**What is your favorite food?**

**What are some of your hobbies or interests? (e.g., television shows, sports, hidden talents)**

**What are you most excited about in preparing to return to school?**

**What are you most concerned about in preparing to return to school?**

**What is one thing you liked about distance learning?**

**What is one thing you didn’t like about distance learning?**

**What are your goals for the new school year?**

**What health content areas do you want to learn the most about?**

*(Rank each item from 1-8, with 1 being the area you are most interested in)*

\_\_\_ Disease prevention

\_\_\_ Mental/emotional health

\_\_\_ Nutrition

\_\_\_ Sexual health

\_\_\_ Social justice

\_\_\_ Stress management

\_\_\_ Substance abuse

\_\_\_ Tobacco use/vaping

**What physical education content areas do you want to learn the most about?**

*(Rank each item from 1-8, with 1 being the area you are most interested in)*

\_\_\_ Dance

\_\_\_ Games to play at home

\_\_\_ Improving motor skills (e.g., throwing, catching, kicking)

\_\_\_ Individual fitness (e.g., running/jogging, strength training, HIIT — high intensity interval training)

\_\_\_ Mindfulness/self-care strategies (e.g., yoga, deep breathing exercises)

\_\_\_ Net/wall games (e.g., tennis, badminton, volleyball)

\_\_\_ Outdoor/yard games (e.g., cornhole, frisbee golf, other disc throwing games)

\_\_\_ Target games (e.g., bocce, bowling, golf)

**Which skills do you feel you need most right now?**

*(Rank each item from 1-7, with 1 being the area you are most interested in)*

\_\_\_ Accessing valid and reliable information, products and services

\_\_\_ Advocacy

\_\_\_ Analyzing influences

\_\_\_ Decision-making

\_\_\_ Goal setting

\_\_\_ Interpersonal communication

\_\_\_ Self-management

**Is there anything else you want to share that might be helpful for me to know?**