

Strafford Elementary Primary Student Safety Survey

(Grades Pre-K through 1st Grade)

Circle: **Yes** OR **No**

Teacher _____

- | | | | |
|---|------------|----|-----------|
| 1. I like school. | Yes | OR | No |
| 2. I feel safe at school. | Yes | OR | No |
| 3. I like recess. | Yes | OR | No |
| 4. Kids are nice at recess. | Yes | OR | No |
| 5. The kids are nice in my classroom. | Yes | OR | No |
| 6. I like the PBS/CARING KIDS program. | Yes | OR | No |
| 7. Kids know how to act/behave at school. | Yes | OR | No |
| 8. I have problems with bullies OFTEN? | Yes | OR | No |

If you have had 3 problems with bullies, circle WHERE it happened)

Playground

Lunch

Classroom

Home

Bus

Bathroom

Pow-Wow

Other: _____

- | | | | |
|---|------------|----|-----------|
| 9. I know what to do if I am being bullied? | Yes | OR | No |
| 10. I know what to do if I see someone being bullied? | | | |

Yes OR **No**

- | | | | |
|---|------------|----|-----------|
| 11. Do you ride the bus?
(IF you ride the bus, answer 11a. and 11b.) | YES | or | NO |
| a. I like to ride the bus. | Yes | OR | No |
| b. Kids are nice on the bus. | Yes | OR | No |

12. If you were choosing a reward for next year for being a PBS CARING Kid would you rather have a necklace or a snack?
(Circle your favorite)

Necklace

Snack