



Student Survey

ARISE Project evaluation
WIRB® Protocol #20070991

This survey will help us learn more about you and will help schools learn how to serve youth better. This survey is NOT a test. There are no right or wrong answers. It is important that you answer each question as truthfully as you can. Since students are different from each other, everyone's answers will be different - just choose the best answer for YOU for each question.

Your answers will be private. No one you know - your parents, your teachers, your friends - will ever know how you answered the questions.

Your teacher will read each statement to you. Think about how the statement describes you, and then mark the answer that best shows how you feel.

Please PRINT clearly.

Today's Date: _____

Your Name: _____

Prepared by:



1. What is your school's name? _____
2. What is your teacher's name? _____
3. How much do you agree with the following statements? Fill in the circle that best describes how you feel.

	Not at all true ★	Somewhat true ★★	Very true ★★★
a. I like going to school.	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
b. I work very hard on my homework.	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
c. I learn a lot in school.	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
d. I pay attention in class.	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
e. I like the other kids in my class.	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
f. I feel comfortable talking in class.	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
g. I like to do art in school.	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
h. I like to hear what people think of my school work.	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
i. I understand the rules in my school and classroom.	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
j. I like to follow directions.	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★



4. How good are you at performing arts activities? Fill in the circle that says how good you are at the following activities.

	I don't do well ★	I do okay ★★	I am very good ★★★
a. Playing theater games	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
b. Making up new dance moves	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
c. Acting or performing in class	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
d. Dancing in front of other people	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★
e. Telling stories	<input type="radio"/> ★	<input type="radio"/> ★★	<input type="radio"/> ★★★

Please write your answers to the following questions on the lines provided.

5. What theater or dance projects did you do in school this year?

6. What do you like most about your school?



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7. How do you feel when you do theater or dance?

8. Draw a picture of you and your friends performing or dancing.

Thank you for completing this survey!