

# Minnesota Student Survey – Level 1

You can help your community and school learn more about the lives and feelings of young people like you. The questions on this survey cover many areas. Some questions might make you feel uncomfortable. You do not have to answer any question you don't want to. You can choose not to complete the survey.

No one will know how you answered these questions. Your answers will be kept private. Thank you for filling out this survey honestly and carefully.

- 1. What is your grade in school right now?**
  - a. 5th grade
  - b. 6th grade
  
- 2. How old are you?**
  - a. 9 years old or younger
  - b. 10 years old
  - c. 11 years old
  - d. 12 years old
  - e. 13 years old
  - f. 14 years old or older
  
- 3. How do you describe yourself? (*Mark ALL that apply*)**
  - a. American Indian or Alaskan Native
  - b. Asian, South Asian or Asian American
  - c. Black, African or African American
  - d. Hispanic or Latino/Latina
  - e. Middle Eastern or North African
  - f. Native Hawaiian or Other Pacific Islander
  - g. White
  
- 4. If you are American Indian or Alaskan Native, which group best describes you? (*If more than one describes you, mark ALL that apply*)**
  - a. Anishinaabe/Ojibwe
  - b. Dakota/Lakota
  - c. Other tribal affiliation

5. **If you are Asian, South Asian or Asian American, which group best describes you? (If more than one describes you, mark ALL that apply)**
- a. Bangladeshi
  - b. Burmese
  - c. Chinese
  - d. Filipino
  - e. Hmong
  - f. Indian
  - g. Karen
  - h. Korean
  - i. Lao
  - j. Nepali
  - k. Pakistani
  - l. Vietnamese
  - m. Other Asian
6. **If you are Black, African or African American, which group best describes you? (If more than one describes you, mark ALL that apply)**
- a. African American
  - b. Ethiopian – Oromo
  - c. Ethiopian – other
  - d. Liberian
  - e. Nigerian
  - f. Somali
  - g. Other Black, African or African American
7. **If you are Hispanic or Latino/Latina, which group best describes you? (If more than one describes you, mark ALL that apply)**
- a. Colombian
  - b. Ecuadoran
  - c. Guatemalan
  - d. Mexican
  - e. Puerto Rican
  - f. Salvadoran
  - g. Spanish/Spanish-American
  - h. Other Hispanic or Latino/Latina
8. **If you are Middle Eastern or North African, which group best describes you? (If more than one describes you, mark ALL that apply)**
- a. Egyptian
  - b. Iranian
  - c. Iraqi
  - d. Lebanese
  - e. Palestinian
  - f. Other Middle Eastern or North African

**9. Are you a boy or girl?**

- a. Boy
- b. Girl

**10. Do you receive special education services as part of an IEP (individualized education program)?**

- a. Yes
- b. No
- c. Not sure

**11. About how many books are there in your home?**

- a. Few (0-10)
- b. Enough to fill one shelf (11-25)
- c. Enough to fill one bookcase (26-100)
- d. Enough to fill several bookcases (more than 100)

**12. Do you have any of the following in your home?**

Question	Yes	No
a. Access to the internet		
b. Your own bedroom		
c. A desktop or laptop computer (including Chromebooks) that you can use		
d. A tablet (for example, Surface Pro, iPad, Kindle Fire) that you can use		
e. A smartphone (for example, iPhone, Samsung Galaxy, HTC One) that you can use		

**13. How would you describe your grades this school year?**

- a. Mostly A's
- b. Mostly B's
- c. Mostly C's
- d. Mostly D's
- e. Mostly F's
- f. Mostly Incompletes
- g. None of these letter grades

**14. On a typical school day, how do you travel to school? (Mark ALL that apply)\***

- a. Walk
- b. Bike
- c. School bus
- d. Family vehicle (riding with others from your family)
- e. Carpools (riding with children from other families)
- f. Transit (city bus, light rail, etc.)
- g. Other (skateboard, scooter, inline skates, etc.)

\* Indicates the question was not asked to students in online schools

- 15. On a typical school day, how do you travel home from school? (Mark ALL that apply)\***
- a. Walk
  - b. Bike
  - c. School bus
  - d. Family vehicle (riding with others from your family)
  - e. Carpools (riding with children from other families)
  - f. Transit (city bus, light rail, etc.)
  - g. Other (skateboard, scooter, inline skates, etc.)
- 16. How often do you wear a seat belt when you are riding in a car, truck or SUV?**
- a. I don't ride in a car, truck or SUV
  - b. I never do this
  - c. Rarely
  - d. Sometimes
  - e. Often
  - f. Always
- 17. During the last 30 days, how many times did you miss a full day of school? (Do not include school-sponsored activities like field trips, sports, academic or music events)\***
- a. None
  - b. Once or twice
  - c. 3 to 5 times
  - d. 6 to 9 times
  - e. 10 or more times

**(Online schools only) During the last 30 days, how many times did you miss scheduled classes?**

- a. None
  - b. Once or twice
  - c. 3 to 5 times
  - d. 6 to 9 times
  - e. 10 or more times
  - f. Do not attend scheduled classes
- 18. During the last 30 days, how many times did you miss part of a day of school such as coming late, leaving early or missing class time during the day? (Do not include school-sponsored activities like field trips, sports, academic or music events)\***
- a. None
  - b. Once or twice
  - c. 3 to 5 times
  - d. 6 to 9 times
  - e. 10 or more times

**(Online schools only) During the last 30 days, how many times did you miss assigned activities?**

- a. None
- b. Once or twice
- c. 3 to 5 times
- d. 6 to 9 times
- e. 10 or more times

**19. (If student missed full or part of a day of school in the last 30 days) What are the reasons you missed a full or part of a day of school in the last 30 days? (Mark ALL that apply)\***

- a. Felt sick
- b. Had or exposed to COVID-19
- c. Medical, dental or other health-related appointment
- d. Vacation or trip
- e. Felt very sad, hopeless, anxious, stressed or angry
- f. Didn't get enough sleep
- g. Didn't feel safe at school
- h. Missed your ride or didn't have a way to get to school
- i. Had to work (for pay or to help with a family business or chores)
- j. Had to take care of or help a family member, sibling or friend
- k. Behind in schoolwork or not prepared for a test or class assignment
- l. Bored with or not interested in school
- m. Suspended from school
- n. Other reason

**(Online schools only; if student missed scheduled classes or assigned activities) What are the reasons you missed scheduled classes or assigned activities in the last 30 days? (Mark ALL that apply)**

- a. Felt sick
- b. Had or exposed to COVID-19
- c. Medical, dental or other health-related appointment
- d. Vacation or trip
- e. Felt very sad, hopeless, anxious, stressed or angry
- f. Didn't get enough sleep
- g. Had to work (for pay or to help with a family business or chores)
- h. Had to take care of or help a family member, sibling or friend
- i. Behind in schoolwork or not prepared for a test or class assignment
- j. Bored with or not interested in school
- k. Other reason

**20. During the last 30 days, how many times did you get sent out of the classroom for discipline?\***

- a. None
- b. Once or twice
- c. 3 to 5 times
- d. 6 to 9 times
- e. 10 or more times

**21. How often do you...**

Question	All of the time	Most of the time	Some of the time	None of the time	(Online schools) Do not attend scheduled classes
a. Care about doing well in school?					Not applicable
b. Pay attention in class?					
c. Go to class unprepared?					

\* Indicates the question was not asked to students in online schools

**22. How much do you agree or disagree with each of the following statements?**

Question	Strongly agree	Agree	Disagree	Strongly disagree
a. If something interests me, I try to learn more about it.				
b. I think things I learn at school are useful.				
c. Being a student is one of the most important parts of who I am.				
d. Overall, adults at my school treat students fairly.				
e. Adults at my school listen to the students.				
f. The school rules are fair.				
g. At my school, teachers care about students.				
h. Most teachers at my school are interested in me as a person.				

**23. How much do you agree or disagree with each of the following statements?**

Question	Strongly agree	Agree	Disagree	Strongly disagree
a. I feel safe going to and from school.*				
b. I feel safe at school.*				
c. I feel safe in my neighborhood.				
d. I feel safe at home.				

**24. I would feel comfortable going to the police if I was having problems or needed help.**

- a. Strongly agree
- b. Agree
- c. Disagree
- d. Strongly disagree

**25. During the last 30 days, how often have other students harassed or bullied you for any of the following reasons?**

Question	Never	Once or twice	About once a week	Several times a week	Every day
a. Your race, ethnicity or national origin					
b. Your religion					
c. Your gender (being male or female)					
d. A physical or mental disability					
e. Your size or weight					
f. Your physical appearance					

\* Indicates the question was not asked to students in online schools

**26. During the last 30 days, how often have you been cyberbullied? (Count being bullied through texting, Instagram, Snapchat, TikTok or other social media)**

- a. Never
- b. Once or twice
- c. About once a week
- d. Several times a week
- e. Every day

**27. During the last 30 days, how often have other students at school...**

Question	Never	Once or twice	About once a week	Several times a week	Every day
a. Pushed, shoved, slapped, hit or kicked you when they weren't kidding around?*					
b. Threatened to beat you up?					
c. Spread mean rumors or lies about you?					
d. Excluded you from friends, other students or activities?					

**28. During the last 30 days, how many times at school have YOU...**

Question	Never	Once or twice	About once a week	Several times a week	Every day
a. Pushed, shoved, slapped, hit or kicked someone when you weren't kidding around?*					
b. Threatened to beat someone up?					
c. Spread mean rumors or lies about someone else?					
d. Excluded someone from friends, other students or activities?					

**29. During a typical week, how often are you home alone or somewhere unsupervised after school?**

- a. 0 days
- b. 1 day
- c. 2 days
- d. 3 days
- e. 4 days
- f. 5 days

\* Indicates the question was not asked to students in online schools

**30. During a typical week, how often do you go to the following places after school?**

Question	0 days	1 day	2 days	3 to 4 days	5 days
a. I stay at my school or go to another school*					
b. My home or another home such as a friend's, relative's or neighbor's					
c. A rec, community or other youth center					
d. A park or other outdoor space					
e. A library					
f. A church, synagogue, mosque, or other spiritual/religious place					

**31. Does your school or community offer a variety of programs for people your age to participate in outside of the regular school day?**

- a. Yes
- b. No
- c. I don't know what programs are available in my community

**32. During a typical week, how often do you participate in the following activities outside of the regular school day?**

Question	0 days	1 day	2 days	3 to 4 days	5 or more days
a. Sports teams, such as park and rec teams, school teams, in-house teams or traveling teams					
b. School sponsored activities or clubs that are not sports, such as drama, music, chess or science club					
c. Tutoring, homework help or academic programs					
d. Leadership activities such as student government, youth councils or committees					
e. Artistic activities, such as music, dance, drawing, photography, or pottery					
f. Cultural heritage programs					
g. Physical activity lessons, such as tennis or karate					
h. Other community clubs and programs such as 4-H, Scouts, Y-clubs or Community Ed					
i. Religious activities such as religious services, education or youth group					

\* Indicates the question was not asked to students in online schools



**33. When you spend time doing activities outside of the regular school day, how often do you...**

Question	Rarely or never	Sometimes	Often	Very often
a. Feel safe?				
b. Learn skills like teamwork or leadership?				
c. Develop trusting relationships with peers your age?				
d. Develop trusting relationships with adults?				
e. Help make decisions?				
f. Do something that gives you joy and energy?				
g. Learn skills that you can use in a future job?				

**34. How would you describe your health in general?**

- a. Excellent
- b. Very good
- c. Good
- d. Fair
- e. Poor

**35. Have you had any of the following dental problems during the past 12 months? (Mark ALL that apply)**

- a. Toothaches or pain
- b. Decayed teeth or cavities
- c. Swollen, painful or bleeding gums
- d. Could not eat certain foods because of a dental problem
- e. Missed one or more school days because of a dental problem
- f. I have not had any of these dental health problems

**36. (If student had a dental problem in past 12 months) Have you had this dental problem treated by a dentist?**

- a. Yes
- b. No, but I will see a dentist
- c. No, I am not able to get dental treatment

**37. When was the last time you saw a dentist for a check-up, exam or teeth cleaning or other dental work?**

- a. During the last year
- b. Between 1 and 2 years ago
- c. More than 2 years ago
- d. Never

**38. Do you have any physical disabilities, or long-term health problems (such as asthma, cancer, diabetes, epilepsy or something else)? Long-term means lasting 6 months or more.**

- a. Yes
- b. No

- 39. When you are feeling upset, stressed or having problems, how comfortable are you talking to a counselor or social worker at school?**
- a. Very comfortable
  - b. Somewhat comfortable
  - c. Not at all comfortable
  - d. There is no counselor or social worker at my school
- 40. Have you ever been treated for a mental health, emotional or behavioral problem? (Mark ALL that apply)**
- a. No
  - b. Yes, during the last year
  - c. Yes, more than a year ago
- 41. During the last 7 days, on how many days were you physically active for a total of AT LEAST 60 MINUTES PER DAY? (Add up all the time you spent in any kind of physical activity that increased your heart rate and made you breathe hard some of the time)**
- a. 0 days
  - b. 1 day
  - c. 2 days
  - d. 3 days
  - e. 4 days
  - f. 5 days
  - g. 6 days
  - h. 7 days
- 42. During the last 30 days, have you had to skip meals because your family did not have enough money to buy food?**
- a. Yes
  - b. No
- 43. During a typical school week, where do you usually get your lunch? (Mark ALL that apply)\***
- a. I usually don't eat lunch
  - b. Regular school lunch from the cafeteria
  - c. The a la carte line (buy individual items)
  - d. School store or vending machine
  - e. Fast food restaurant, gas station or somewhere else outside of school
  - f. I bring lunch from home

**44. Has a doctor or nurse ever told you that you have...**

Question	Yes	No
a. Diabetes?		
b. Pre-diabetes?		
c. Asthma?		
d. An allergy that requires you to carry an epi-pen?		

**45. During a typical school night, how many hours of sleep do you get?**

- a. 4 hours or less
- b. 5 hours
- c. 6 hours
- d. 7 hours
- e. 8 hours
- f. 9 hours
- g. 10 or more hours

**46. How much do you feel...**

Question	Not at all	A little	Some	Quite a bit	Very much
a. Your parents care about you?					
b. Other adult relatives care about you?					
c. Friends care about you?					
d. Teachers at school care about you?					
e. Other adults at school care about you?					
f. Adults in your community care about you?					

**47. Which of these adults can you talk to about problems you are having? (Mark ALL that apply)**

- a. Parent or guardian
- b. Adult at school
- c. Some other adult
- d. I don't have any adults that I can talk to about problems I am having

**48. In general, how does each of the following statements describe you?**

Question	Not at all or rarely	Somewhat or sometimes	Very or often	Extremely or almost always
a. I can shape and influence what happens in my life and future.				
b. I think about what I want to do in my life when I grow up.				
c. I feel good about myself.				
d. I say no to things that are dangerous or unhealthy.				
e. I build friendships with other people.				
f. I express my feelings in proper ways.				
g. I feel good about my future.				
h. I deal with disappointment without getting too upset.				
i. I find good ways to deal with things that are hard in my life.				
j. I plan ahead and make good choices.				
k. I stay away from bad influences.				
l. I resolve conflicts without anyone getting hurt.				
m. I feel valued and appreciated by others.				
n. I accept people who are different from me.				
o. I am included in family tasks and decisions.				
p. I am given useful roles and responsibilities.				
q. I am sensitive to the needs and feelings of others.				

**49. Thinking back on the last 30 days, how much do you agree or disagree?**

Question	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
a. I worry a lot					
b. I sometimes feel sad without knowing why					

**50. Have you ever been in foster care? (Mark ALL that apply)**

- a. No
- b. Yes, during the last year
- c. Yes, more than a year ago

**51. During the last 30 days, have you smoked any cigarettes?**

- a. Yes
- b. No

52. During the last 7 days, have you been in the same room as someone who was smoking cigarettes?  
 a. Yes  
 b. No
53. During the last 7 days, did you ride in a car with someone who was smoking cigarettes?  
 a. Yes  
 b. No
54. During the last 30 days, have you vaped or used an e-cigarette?  
 a. Yes  
 b. No
55. During the last 7 days, have you been in the same room with someone who was vaping or using an e-cigarette?  
 a. Yes  
 b. No
56. During the last 7 days, did you ride in a car with someone who was vaping or using an e-cigarette?  
 a. Yes  
 b. No

57. During the last 12 months, have you...

Question	Yes	No
a. Had alcoholic beverages to drink such as beer, wine, wine coolers, and liquor?		
b. Used marijuana (pot, weed) or hashish (hash, hash oil)?		
c. Sniffed glue or huffed or inhaled the contents of aerosol spray cans or other gases to get high?		
d. Used prescription drugs without a doctor's prescription or differently than how a doctor told you to use it?		

**(Online schools only) Why did you choose to attend an online school? (Mark ALL that apply)**

- a. Avoid COVID-19
- b. Offers courses I couldn't get at my previous school
- c. Provides flexibility I need to pursue my interests (sports, work, hobbies)
- d. Allows me to avoid difficult or uncomfortable social settings (bullying, drama)
- e. Provides flexibility I need to manage my physical or mental health
- f. Allows me to avoid teachers or administrators I don't like
- g. Is a better fit for how I learn
- h. Allows me to stay home to take care of family members

**There are no more questions. You may go back and change your answers or hit "Submit" to end the survey. This completes the survey. Thank you for your participation.**