

## GEAR UP Family Engagement Resource



**Title:** GEAR UP189 Student Interview Form - Google Forms

**Author / Organization:** East St. Louis District 189 GEAR UP

**Resource Topic:** Data and evaluation

**Resource Type:** Sample

**Description:** Tracking student progress, ambitions, and goals is an important aspect of supporting students. This comprehensive questionnaire is a detailed way to capture student information to better support students in reachign their goals.



**NATIONAL COUNCIL FOR COMMUNITY AND EDUCATION PARTNERSHIPS**

*Family Engagement Resources compiled with support from the NCCEP/GEAR UP Family Engagement Advisory Committee*

# GEAR Up Student Interview

\* Required

1. \*

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## Demographics

2. School \*

*Mark only one oval.*

- Lincoln Middle School
- Mason/Clark Middle School
- East St. Louis Senior High School

3. Student Age \*

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4. Grade in School \*

*Mark only one oval.*

- 8th grade
- 9th grade

## Academic

5. How would you describe yourself as a student? \*

*Mark only one oval.*

Excellent

Very good

Good

Average

Bad

Other: \_\_\_\_\_

6. How often do you turn in your assignments on time? \*

*Mark only one oval.*

Always

Usually

Sometimes

Never

7. What are you doing to improve your study skills and habits?

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8. Are you receiving homework help? \*

(Perhaps at an after school program).

*Mark only one oval.*

Yes

No

9. If so, what subject area? \*

*Check all that apply.*

- Math
- Science
- ELA
- Social Studies
- Foreign Language
- Other
- N/A

10. Do you have test-taking anxiety? \*

(Nervous, scared, panicked, etc)

*Mark only one oval.*

- Yes
- No
- Sometimes

11. Are your teachers available to assist you when you don't understand something? \*

*Mark only one oval.*

- Always
- Usually
- Sometimes
- Never

12. Do your teachers encourage you to make plans for your future? \*

*Mark only one oval.*

- Yes
- No
- Don't know
- Other: \_\_\_\_\_

13. Why is getting an education important for you?

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### Career Development

14. What do you want to do after graduation? \*

*Mark only one oval.*

College

Trade school

Military

Employment / work force

Other: \_\_\_\_\_

15. What would you like to study in college/university?

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16. Where would you like to attend college/university?

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17. Is school now preparing you to achieve this goal? \*

*Mark only one oval.*

Yes

No

Somewhat

18. How is school preparing you to achieve this goal? \*

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19. What do you envision your long-term career to be? \*

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20. What training is required for what you want to do? \*

*Mark only one oval.*

No training

Higher education

Trade school

Other: \_\_\_\_\_

### Extra and Co-curricular Activities

21. What do you do with your time after school and on weekends? \*

*Check all that apply.*

Homework

After school program (specify under other)

Job / employment

Play outside

Cares for other sibling(s)

Sports

Other:  \_\_\_\_\_

### Life Skills Development

22. How do you handle stress? \*

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23. Do you think of yourself as a leader? \*

*Mark only one oval.*

Yes

No

24. How do you deal with peer pressure? \*

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25. Have you completed any community service projects or volunteer work? \*

*Mark only one oval.*

Yes

No

26. Why or why not?

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27. How do you keep problems from turning into arguments? \*

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### Knowing Myself

28. How do others describe you? \*

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29. Is your parents or family's approval important to you? \*

*Mark only one oval.*

- Yes
- No
- Sometimes

30. How often are you lonely, sad or extremely mad? \*

*Mark only one oval.*

- Always
- Usually
- Sometimes
- Never



31. Have you been involved with police, juvenile justice, or the court system? \*

*Check all that apply.*

Yes (explain under other)

No

Other:  \_\_\_\_\_

### Getting Along with Others

32. How many close friends do you have? \*

\_\_\_\_\_

33. Do you have a problem making friends? \*

*Mark only one oval.*

Yes

No

Sometimes

34. How often do you argue with other students? \*

*Mark only one oval.*

Many times a day

About once a day

A few times a week

Once a week

A couple times a month

Rarely

35. How do you feel about your interactions with your teachers? \*

*Mark only one oval.*

- Always positive
- Usually positive
- Usually negative
- Always negative

36. What do you mean by that? \*

In regards to question above.

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37. How often do you argue with your teachers? \*

*Mark only one oval.*

- Many times a day
- About once a day
- A few times a week
- Once a week
- A couple times a month
- Rarely

38. Are your parents interested in what you're doing in school? \*

(Behavior, subject matter, coursework, class schedule, extracurriculars, attendance, etc)

*Mark only one oval.*

- Yes
- No
- Sometimes

39. How often do you share what is going on in school with your parents? \*

*Mark only one oval.*

- Always
- Sometimes
- When something good and/or bad happens
- Never

40. How do you feel about your interactions with your parents? \*

*Mark only one oval.*

- Always positive
- Usually positive
- Usually negative
- Always positive

41. What do you mean by that?

(In regards to above question)

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42. How often do you argue with your parent or guardian? \*

*Mark only one oval.*

- Many times a day
- About once a day
- A few times a week
- Once a week
- A couple times a month
- Rarely
- N/A

43. How often do you argue with your siblings? \*

*Mark only one oval.*

- Many times a day
- About once a day
- A few times a week
- Once a week
- A couple times a month
- Rarely
- N/A

44. Who do you talk to when you have a problem? \*

*Check all that apply.*

- Parent / guardian
- Other family member
- Friend
- School staff

Other:  \_\_\_\_\_

45. Have you ever been suspended for fighting? \*

*Mark only one oval.*

- Yes
- No

46. If so, tell me what happened with your suspension.

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## Family Life

47. Who do you live with? \*

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48. How many siblings do you have? \*

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49. How often do you help with your siblings? \*

Specify under other: Babysitting, cooking/helping with meals, etc

*Check all that apply.*

Always

Sometimes

Never

Other:  \_\_\_\_\_

50. Are both of your parents in the home? \*

*Mark only one oval.*

Yes

No

Other: \_\_\_\_\_

51. Do you have a quiet place to study at home? \*

*Mark only one oval.*

Yes

No

52. What are your parents' expectations of you after you graduate? \*

*Mark only one oval.*

- College
- Trade school
- Employment / work force
- Military
- Other: \_\_\_\_\_

53. Do your parents help you with your homework? \*

*Mark only one oval.*

- Yes
- No
- Other: \_\_\_\_\_

54. Do your parents know your grades? \*

*Mark only one oval.*

- Yes
- No
- Sometimes

55. Is there anything else you'd like to share with me?

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# Google Forms