



Student Safety Survey for Secondary Students

Dear students,

We want to know what you think about your school! The following survey questions ask about your perceptions of discipline, school climate, school safety, and bullying. Your answers are completely confidential, and individual responses will not be shared.

The survey will take 5-10 minutes to complete.

Your insight is valued and will provide meaningful feedback to inform our efforts at fostering a safe and supportive learning environment for all students.

Thank you.

1. Overall, I feel safe at school.

	Yes	<input type="radio"/>
	Sometimes	<input type="radio"/>
	No	<input type="radio"/>

2. How safe do you feel in the following locations?

	Safe	Somewhat Safe	Unsafe	Not Applicable
In the school hallways	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the classroom	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the parking lot	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the lunchroom	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the gym or locker room	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
In the bathrooms	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
At school events/activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
On the bus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
On school grounds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Walking home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



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Bullying is a serious matter and is not allowed by the district. Many people use the term bullying to identify a variety of mean or hurtful actions, but sometimes what feels hurtful does not meet the criteria to be treated as bullying. Your school has procedures in place to help make sure you feel safe and welcome and address anytime someone is being hurtful or bullying others.

The State of Texas has a specific definition that identifies certain actions as bullying. Bullying is defined as behavior that makes a student or group of students feel more powerful than another student and interferes with a student's education or disrupts the school environment.

Under Texas law, bullying can be written, verbal, electronic, online, or physical conduct that is made against another student on school property, at a school-sponsored or school-related activity, or in a district-operated vehicle. In addition, the behavior must:

- Result in harm to the student or the student's property,
- Place a student in reasonable fear of physical harm or of damage to the student's property, or
- Be so severe, persistent/repetitive, and pervasive that it creates an intimidating, threatening, or abusive educational environment.

3. Based on the definition above, have you been bullied this school year?

Yes	<input type="radio"/>
No	<input type="radio"/>

4. Who did you tell when you were bullied? (Please select all that apply.)

[Answer this question only if answer to Q#3 is Yes]

Family	<input type="checkbox"/>
Friends	<input type="checkbox"/>
A teacher	<input type="checkbox"/>
A school counselor	<input type="checkbox"/>
A school administrator	<input type="checkbox"/>
Another school staff member	<input type="checkbox"/>
I did not tell anyone.	<input type="checkbox"/>
I reported through the SpeakUP app.	<input type="checkbox"/>
Other (Please specify)	<input type="checkbox"/>



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5. Please share why you did not report the bullying. (Please select all that apply.) <i>[Answer this question only if answer to Q#4 is I did not tell anyone.]</i>	
I didn't have anyone I trusted to tell.	<input type="checkbox"/>
I didn't think anyone would do anything.	<input type="checkbox"/>
I didn't want to be called a rat/snitch/tattletale.	<input type="checkbox"/>
I was worried about what would happen if I told.	<input type="checkbox"/>
Other (Please specify)	<input type="checkbox"/>

6. How frequently do the following types of bullying occur in your school?	Never	Not Often (a few times each year)	Sometimes (a few times each month)	Frequently (A few times a week)	Daily	Not Applicable
Cyberbullying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical bullying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Social/Emotional bullying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Verbal bullying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Written bullying	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bullying during the school day	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bullying at school-related activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bullying on a school bus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. Please select the platforms through which cyberbullying has occurred. (Select all that apply) <i>[Answer this question only if answer to Q#6 is Not Often, Sometimes, Frequently, or Daily]</i>	
Chat rooms/gaming parties/Video games/Online games	<input type="checkbox"/>
Email	<input type="checkbox"/>
Facebook	<input type="checkbox"/>
Instagram	<input type="checkbox"/>
Snapchat	<input type="checkbox"/>
Text message	<input type="checkbox"/>
Tik Tok	<input type="checkbox"/>
Twitter	<input type="checkbox"/>
Other (Please specify)	<input type="checkbox"/>



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8. Since the start of the school year, how often have the following happened at your school?	Never	Not Often (a few times each year)	Sometimes (a few times each month)	Frequently (a few times a week)	Daily
Other students told lies or spread false rumors about me and tried to make others dislike me.	○	○	○	○	○
I was called names, made fun of, or teased in a hurtful way.	○	○	○	○	○
I was purposefully left out of a group.	○	○	○	○	○
Others won't sit by me or talk to me.	○	○	○	○	○
Unwanted practical jokes were played on me.	○	○	○	○	○
I was physically hurt in some way (e.g., hit, kicked, pushed, shoved).	○	○	○	○	○
Other students made unwanted sexual jokes, comments, or gestures.	○	○	○	○	○
I was verbally threatened by someone in person.	○	○	○	○	○
I received a threatening or hurtful message from another student online (e.g., email, social media) or by phone (e.g., phone call, text message).	○	○	○	○	○
I was threatened or harmed with a weapon.	○	○	○	○	○
Someone took or damaged my belongings on purpose.	○	○	○	○	○
I missed school because I felt unsafe or worried about going to school because of being bullied.	○	○	○	○	○



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9. Have you ever been bullied or harassed at school because of any of the following? Please check all that apply.

Athletic ability	<input type="checkbox"/>
Clothes	<input type="checkbox"/>
Disability	<input type="checkbox"/>
Family income	<input type="checkbox"/>
Gender	<input type="checkbox"/>
Grades	<input type="checkbox"/>
Hobbies/Activities/Interests	<input type="checkbox"/>
Language	<input type="checkbox"/>
Physical looks	<input type="checkbox"/>
Race, culture or skin color	<input type="checkbox"/>
Religion/Faith	<input type="checkbox"/>
Other (Please specify)	<input type="checkbox"/>

10. How frequently do the adults in your school do the following?	Rarely/Never	Sometimes	Often	Almost Always/Always
Make sure students follow the rules	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Apply the rules and expectations equally	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stop bullying and other forms of mistreatment when they see it or hear about it	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stop and address the use of racial slurs or discrimination	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Stop and address the use of offensive language	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Please answer the following questions/statements.	Yes	No	Don't Know
I would tell an adult at school if I was being bullied.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I would stand up for another student if I witnessed him or her being bullied.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If you were to witness any negative issues or situations at school, including bullying, bringing weapons to school, substance abuse, or fighting, would you report it?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



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12. Overall, do you think reports about bullying and mistreatment are appropriately addressed in your school?

	Yes	<input type="radio"/>
	No	<input type="radio"/>
	I don't know.	<input type="radio"/>

13. Please share with us anything else you would like us to know about safety and behavior at your school.