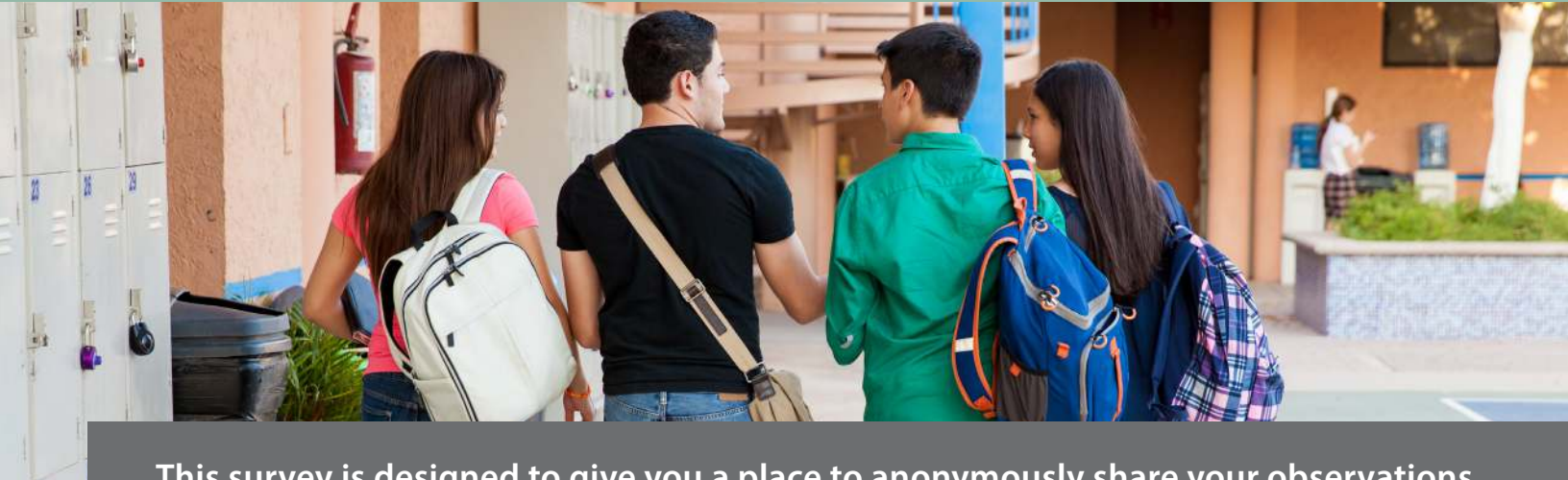


SCHOOL SAFETY

Student Survey



This survey is designed to give you a place to anonymously share your observations, concerns, and ideas, so that we can all work together to keep our school safe.

1. Put a check in the squares to show how often you've witnessed each of the following in school.

Never	Some	A Lot	
☐	☐	☐	Physical bullying (hitting, pushing)
☐	☐	☐	Social bullying (rumors, exclusion)
☐	☐	☐	Verbal bullying (mean remarks)
☐	☐	☐	Cyberbullying (hurtful posts or texts)
☐	☐	☐	Hazing
☐	☐	☐	Threats of violence at school or online
☐	☐	☐	Drug/alcohol activity in school
☐	☐	☐	Weapons brought to school
☐	☐	☐	Hate speech at school or online (racist, sexist, homophobic remarks)

2. Think about how safe you feel in school and answer the following “Yes” or “No” questions.

Yes	No	Do you feel safe...
☐	☐	in the hallways at school?
☐	☐	in the restrooms?
☐	☐	in the cafeteria?
☐	☐	in all of your classes?
☐	☐	in the parking lot?
☐	☐	while going to and from school?

3. Think about how we can make our school a safer, more inviting learning space. Answer the following questions and share your thoughts on the lines

Yes	No	
☐	☐	Do you feel that the teachers, counselors, and administrators in your school are concerned about your safety?
☐	☐	If you saw something that worried you, do you think you'd report it?

What can your teachers, administrators, and counselors do to make you feel safer?
