



Afterschool Science Networks Program Survey

The Afterschool Science Networks (ASN) project at SRI International was a five-year research study (2009-2014) focused on science in publicly funded elementary school grantees of California's Afterschool Education and Safety (ASES) program.

This program survey was one of the main components of the study, and gathered information regarding science offerings, science materials, and partnership. The questions in the survey addressed site practices and capacity in offering science, including:

- Frequency of science offerings and features of typical science activities
- Types of instructional materials used
- Partnerships and external supports for science activities
- Number of staff, staff turnover rate and staff backgrounds

The survey was sent to 600 ASES site coordinators (i.e., the on-the-ground program supervisors). These sites were randomly selected from among over 3,700 elementary ASES sites during the 2010-2011 school year and 415 complete surveys were returned, yielding a 71% response rate.



This project was funded by the National Science Foundation under NSF grant number DRL-0917536.

After-School Site Coordinator Survey - Fall 2010

SRI International is conducting a survey of ASES Site Coordinators as part of a project funded by the National Science Foundation. The purpose of this project is to explore the connections between afterschool providers and people or organizations with science expertise like museums, County Offices of Education, or school-day science teachers.

Learning about your program and the science activities you offer will help us understand how afterschool programs can best be supported in providing quality opportunities for children to learn science. Even if your program does not offer science or have any science support, it is very helpful for us (and quick for you) to complete the survey anyway - it helps us describe the extent of science offerings across the state.

Your site is one of 600 randomly selected ASES (After School Education and Safety) programs invited to participate in this study. If this survey reached you in error and you are not the site coordinator of an ASES program, please either forward this link to the appropriate person or send an email to Hannah Lesk at hannah.lesk@sri.com notifying us of the error. If there is someone else who is better suited than you to answer the survey questions about your program, working together or sharing the survey is just fine.

Your participation in this survey is completely voluntary. As a thank you for completing the survey, we will send you an online \$30 gift certificate from Amazon.

All your answers will be kept strictly confidential. We will never share the information we collect and your name will never appear in reports of any kind.

We hope you choose to answer this survey. If you decide you cannot, please let us know. That way, we will not follow up with you when we don't receive your survey.

The survey will take approximately 45 minutes to complete. If you have questions about this survey, please contact Hannah Lesk at hannah.lesk@sri.com or at our toll-free number: 877-371-5508. If you have questions about the project in general, you may contact Carlin Llorente, co-study director at 650-859-2381 or by Email at carlin.llorente@sri.com. For questions about your rights as a participant in this study you may contact SRI's Human Subjects Committee, at 650-859-2686.

Please complete this survey within one week.

While most participants are completing the survey on-line at <http://afterschoolsciencestudy.org/sitesurvey.html>, if you would like to complete this survey on paper please feel free to print out a copy to complete.

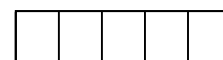
If you complete a paper survey, it may be returned by fax (650) 859-4605, or by mail to the address below. If you would like us to send you a return envelope (stamped and addressed) that you can use to return the completed survey, please call us toll free at (877) 371-5508 and leaving a message with your request and mailing address.

ASN Survey/Hannah Lesk
SRI International
333 Ravenswood Avenue BN344
Menlo Park, CA 94025

Please indicate your willingness to participate in this survey by signing in the space below.

Signature

/ /
Date (MM/DD/YYYY)



Afterschool Program Information, Participation, and Activities

1. How important is each of the following objective or goal for your afterschool program?

(Mark [X] ONE in each row.)

| | Not at all | A little | Some | A lot |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Provide a safe environment for children | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Help children improve their academic performance (e.g., grades, test scores) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Provide opportunities for youth development (e.g., social and personal development) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Provide opportunities for academic enrichment (e.g., interesting and exciting learning opportunities) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Provide sports and/or other recreational activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Provide children with positive adult guidance and/or mentors | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Help connect children to their community through service or other special projects | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Other (please explain): <div style="border: 1px solid black; height: 30px; width: 100%; margin-top: 5px;"></div> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

2. What type of organization operates your ASES program? (Mark [X] ALL that apply.)

- a. School or school district
- b. Community Based Organization
- c. Other (please specify):

3. How many children from each grade participate in your program during a typical school day (either before or after school)?

| | |
|--|--|
| K: <input style="width: 40px; height: 20px;" type="text"/> | 5th: <input style="width: 40px; height: 20px;" type="text"/> |
| 1st: <input style="width: 40px; height: 20px;" type="text"/> | 6th: <input style="width: 40px; height: 20px;" type="text"/> |
| 2nd: <input style="width: 40px; height: 20px;" type="text"/> | 7th: <input style="width: 40px; height: 20px;" type="text"/> |
| 3rd: <input style="width: 40px; height: 20px;" type="text"/> | 8th: <input style="width: 40px; height: 20px;" type="text"/> |
| 4th: <input style="width: 40px; height: 20px;" type="text"/> | |



4. About how often does a typical student in your afterschool program participate in the following activities? (Mark [X] ONE in each row.)

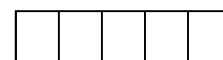
| | Not offered in program | Less than once a month | 1-3 times a month | Once a week | 2-4 times a week | Every day |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Homework time/Study hall | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Tutoring (one-to-one or peer) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. An academically oriented activity, project, or field trip in any subject except science | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. A science-related academically oriented activity, project, or field trip (e.g., to a local science museum) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Sports, outdoor games, or recreation activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Arts activities (e.g., crafts, theatre, music) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Individual counseling, mentoring, or other type of service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Community service | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Other (please explain): <div style="border: 1px solid black; height: 100px; width: 100%; margin-top: 5px;"></div> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

5. When does your program offer services at this site? (Mark [X] ALL that apply.)

- a. Before school
- b. After school
- c. Saturdays
- d. School holidays (during the school year)
- e. Summer (or session breaks for year round schools)

6. How long have *academically focused* (activities designed to promote academic development) before or afterschool services been offered at this particular site (including any years before the ASES grant)? (Mark [X] ONE only.)

- a. Less than 1 year
- b. 1-2 years
- c. 3-5 years
- d. 6-10 years
- e. More than 10 years
- f. Don't know / not sure



7. Where is your program located? (Mark [X] ALL that apply.)

- a. On school grounds
- b. At another location in the community

8. Approximately how many Internet-connected computers are available during program hours? (Write in a number in each box. Best estimates are fine, if you are not sure.)

Available for use by children only:

Available for use by afterschool program staff only:

Available for use by both children and afterschool program staff:

Staffing

9. How many staff work at this afterschool program site (including you)? (Please enter the number of staff in each column for each category.)

| | Number of Staff (including you): | Number of Staff involved in science activities (including you): |
|---|---|---|
| a. Certified teachers: | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| b. Other school staff (e.g., paraprofessionals): | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| c. Afterschool program staff (not employed at the school): | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| d. Unpaid volunteers: | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| e. Other (please describe their position/role): <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

10. Do you have a staff member in charge of the science activities at this site?

(Mark [X] ONE only.)

- a. Yes
- b. No

11. How many staff members were new to your afterschool program site for the 2010-2011 school year (including you)?

Number of new staff:

12. How long have you coordinated afterschool programs at this or any site?

(Please enter number of years/months including the current year.)

At this site: years months

At any other site: years months

Opportunities to Learn in Science

For the next eleven questions (Questions 13 through 23), we would like you to focus on the science activities offered by your afterschool program site.

13. Has your program offered any science activities so far in the 2010-2011 school year?

(Mark [X] ONE only.)

- a. Yes ▶ Proceed with question 14
- b. No ▶ Please skip ahead to Question 29 on page 15

14. How long have science activities been offered at this particular site (including any years before the ASES grant)? *(Mark [X] ONE only.)*

- a. Less than 1 year
- b. 1-2 years
- c. 3-5 years
- d. 6-10 years
- e. More than 10 years
- f. Don't know / not sure

15. Who is primarily responsible for selecting the science curriculum and/or science activities that are used in your afterschool program? *(Mark [X] ALL that apply.)*

- a. Site coordinator
- b. Program staff (including school day staff employed by your program)
- c. School staff (not employed by your program)
- d. District science specialist or coordinator
- e. Other (please explain):

16. For the science curriculum or science activities currently used in your program, which of the following factors were most important to their selection? *(Mark [X] ALL that apply.)*

- a. Free
- b. Easily available
- c. Already familiar with curriculum
- d. Already available at site/school
- e. Available from a local resource not at your site/school
- f. Recommended by a trusted source
- g. Available on internet
- h. Quality of content
- i. Ease of use



17. Please describe your main sources of science curriculum or science activities (e.g., books, web sites, workbooks) used in your afterschool program during the current school year (e.g., since September 2010). If you have used more than four, please describe the four that are most typical of your program's science offerings (activities and curriculum).

1 Name of science curriculum or activity:

Publisher or location (URL, web site) of this curriculum or activity:

Describe an activity you used from this curriculum:

2 Name of science curriculum or activity:

Publisher or location (URL, web site) of this curriculum or activity:

Describe an activity you used from this curriculum:

3 Name of science curriculum or activity:

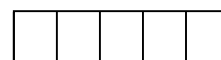
Publisher or location (URL, web site) of this curriculum or activity:

Describe an activity you used from this curriculum:

4 Name of science curriculum or activity:

Publisher or location (URL, web site) of this curriculum or activity:

Describe an activity you used from this curriculum:



18. To what extent are the *science offerings* at your program intended to:

(Mark [X] ONE in each row.)

| | Not at all | A little | Some | A lot |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Increase children's awareness of and knowledge about science | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Build children's interest in and engagement with science | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Improve children's attitudes about science | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Encourage children to participate in science activities and conduct scientific inquiry | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Build children's skills in science and the processes of scientific investigation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Other (please explain): <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

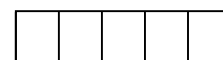
19. During this school year (2010-2011), how many of the science activities in your program have covered the following topics or concepts? (Mark [X] ONE in each row.)

| | None | A few | Some | All or nearly all |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Life Sciences (e.g., plants) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Earth/Space Sciences (e.g., clouds) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Other Physical Sciences (e.g., light) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Health Sciences (e.g., nutrition) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Engineering/Design/Robotics (e.g., Architecture, Mindstorms Lego Robotics) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Environmental Science (e.g., ecosystems, habitat, climate) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. General Science (no specific domain focus) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Other (please explain): <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



20. Typically, how many of the science activities at your afterschool program include the following features? (Mark [X] ONE in each row.)

| | None | A few | Some | All or nearly all |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Working on extended investigations or projects (e.g., a week or more in duration) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Working in small groups or teams | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Following specific instructions in an activity or investigation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Participating in hands-on activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Watching a live demonstration | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Watching an educational video | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Designing or implementing their own investigation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. Using computers, calculators, or other educational technology to learn science | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. Reading science-related materials (either children or teachers) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. Posing questions or setting up a scientific investigation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. Recording and/or representing data | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| l. Analyzing data | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| m. Writing up results or preparing a presentation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| n. Doing a science-related activity outside the program classroom (e.g., nature area, stream, pond) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o. Presenting findings or conclusions to others (e.g., peers, parents, or outside guests) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| p. Participating in a science-related field trip | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| q. Visits by scientists or other professionals | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| r. Allow for children to choose their own activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| s. Providing leadership opportunities for children | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| t. Making connections to children's interests | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| u. Enabling children to connect science to their real lives | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| v. Other (please explain): <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



21. To what extent have you seen increases in the following outcomes in the children you serve as a result of their participation in the science-related activities in your afterschool program? (Mark [X] ONE in each row.)

| | Not at all | Some | A little | A lot |
|--|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Awareness of and knowledge about science | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Interested in and engagement with science | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Attitude about science | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Participation in science activities and conduct of scientific inquiry | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Skills in science and the processes of scientific investigation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Other (please explain): <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 5px;"></div> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Supports for Program Activities

In the next two questions, we would like you to describe the organizations (Question 22) and individuals (Question 23) from which you get curricular materials and/or support for the **SCIENCE** offerings in your afterschool program. If you cannot answer questions 22 or 23, please contact your program director or other staff members to get the requested information.

22. Please tell us about the main organizations who provide your afterschool program with curricular materials or support (excluding basic supplies) for **SCIENCE** offerings. If you received materials or support from more than four organizations, please select those that are most typical of your program.

1

Organization's name:

City:

Name of contact person (if available):

Typically how often are you in contact with this organization during the year?

- 1-5 6-10 11-20 21-50 51+ times

How long has your program received support from them?

- Less than a month One month - less than a year 1-2 yrs 3-5 yrs 6+ yrs Don't know

What type of support have they provided? (Mark ALL that apply.)

- Leading activities for children on site Leading activities for children off site
 Training and/or coaching for staff Ideas for lessons or activities Supplies for lessons or activities
 Information, advice, or referrals to resources Science knowledge or expertise Science curricula/materials

How much influence has this contact had on your science offerings?

- None at all A little Some A lot

How much does this contact provide materials and/or support for non-science offerings (e.g., other academic subjects or youth development activities)?

- None at all A little Some A lot

2

Organization's name:

City:

Name of contact person (if available):

Typically how often are you in contact with this organization during the year?

- 1-5 6-10 11-20 21-50 51+ times

How long has your program received support from them?

- Less than a month One month - less than a year 1-2 yrs 3-5 yrs 6+ yrs Don't know

What type of support have they provided? (Mark ALL that apply.)

- Leading activities for children on site Leading activities for children off site
 Training and/or coaching for staff Ideas for lessons or activities Supplies for lessons or activities
 Information, advice, or referrals to resources Science knowledge or expertise Science curricula/materials

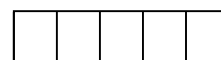
How much influence has this contact had on your science offerings?

- None at all A little Some A lot

How much does this contact provide materials and/or support for non-science offerings (e.g., other academic subjects or youth development activities)?

- None at all A little Some A lot

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3

Organization's name:

City:

Name of contact person (if available):

Typically how often are you in contact with this organization during the year?

- 1-5
- 6-10
- 11-20
- 21-50
- 51+ times

How long has your program received support from them?

- Less than a month
- One month - less than a year
- 1-2 yrs
- 3-5 yrs
- 6+ yrs
- Don't know

What type of support have they provided? (Mark ALL that apply.)

- Leading activities for children on site
- Leading activities for children off site
- Training and/or coaching for staff
- Ideas for lessons or activities
- Supplies for lessons or activities
- Information, advice, or referrals to resources
- Science knowledge or expertise
- Science curricula/materials

How much influence has this contact had on your science offerings?

- None at all
- A little
- Some
- A lot

How much does this contact provide materials and/or support for non-science offerings (e.g., other academic subjects or youth development activities)?

- None at all
- A little
- Some
- A lot

4

Organization's name:

City:

Name of contact person (if available):

Typically how often are you in contact with this organization during the year?

- 1-5
- 6-10
- 11-20
- 21-50
- 51+ times

How long has your program received support from them?

- Less than a month
- One month - less than a year
- 1-2 yrs
- 3-5 yrs
- 6+ yrs
- Don't know

What type of support have they provided? (Mark ALL that apply.)

- Leading activities for children on site
- Leading activities for children off site
- Training and/or coaching for staff
- Ideas for lessons or activities
- Supplies for lessons or activities
- Information, advice, or referrals to resources
- Science knowledge or expertise
- Science curricula/materials

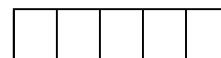
How much influence has this contact had on your science offerings?

- None at all
- A little
- Some
- A lot

How much does this contact provide materials and/or support for non-science offerings (e.g., other academic subjects or youth development activities)?

- None at all
- A little
- Some
- A lot

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23. In addition to people from organizations described in question 22, please tell us about any other individuals who provide your program with curricular materials or support (excluding basic supplies) for SCIENCE offerings. If you received materials or support from more than three people, please select those that are most typical of your program.

1 Name of individual: City:

Person's employer (if known): Typically how often are you in contact with this individual during the year?
 1-5 6-10 11-20 21-50 51+ times

How long has your program received support from them?
 Less than a month One month - less than a year 1-2 yrs 3-5 yrs 6+ yrs Don't know

What type of support have they provided? (Mark ALL that apply.)
 Leading activities for children on site Leading activities for children off site
 Training and/or coaching for staff Ideas for lessons or activities Supplies for lessons or activities
 Information, advice, or referrals to resources Science knowledge or expertise Science curricula/materials

How much influence has this contact had on your science offerings? None at all A little Some A lot

How much does this contact provide materials and/or support for non-science offerings (e.g., other academic subjects or youth development activities)? None at all A little Some A lot

2 Name of individual: City:

Person's employer (if known): Typically how often are you in contact with this individual during the year?
 1-5 6-10 11-20 21-50 51+ times

How long has your program received support from them?
 Less than a month One month - less than a year 1-2 yrs 3-5 yrs 6+ yrs Don't know

What type of support have they provided? (Mark ALL that apply.)
 Leading activities for children on site Leading activities for children off site
 Training and/or coaching for staff Ideas for lessons or activities Supplies for lessons or activities
 Information, advice, or referrals to resources Science knowledge or expertise Science curricula/materials

How much influence has this contact had on your science offerings? None at all A little Some A lot

How much does this contact provide materials and/or support for non-science offerings (e.g., other academic subjects or youth development activities)? None at all A little Some A lot

3 Name of individual: City:

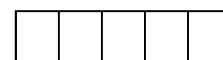
Person's employer (if known): Typically how often are you in contact with this individual during the year?
 1-5 6-10 11-20 21-50 51+ times

How long has your program received support from them?
 Less than a month One month - less than a year 1-2 yrs 3-5 yrs 6+ yrs Don't know

What type of support have they provided? (Mark ALL that apply.)
 Leading activities for children on site Leading activities for children off site
 Training and/or coaching for staff Ideas for lessons or activities Supplies for lessons or activities
 Information, advice, or referrals to resources Science knowledge or expertise Science curricula/materials

How much influence has this contact had on your science offerings? None at all A little Some A lot

How much does this contact provide materials and/or support for non-science offerings (e.g., other academic subjects or youth development activities)? None at all A little Some A lot



24. Have you attended any conferences or meetings in the last year (either local, statewide, or national) from which you gained information or support relevant to offering SCIENCE at your afterschool program? (Please answer about conferences in the last year regardless of when you became director of this afterschool program).

- a. Yes ▶ Please proceed with question 25
- b. No ▶ Please skip ahead to question 28 below

25. How many conferences did you attend in the last year that were relevant for your afterschool science program/activities?

Number of conferences:

26. Which conference that you attended was the most relevant to you?

Conference/meeting name:

Month/year attended:

 /

Location:

Type of information/support provided: (Mark ALL that apply)

- a. Training for staff
- b. Ideas for lessons or activities
- c. Curriculum for lessons or activities
- d. Supplies for lessons or activities
- e. Coaching for staff
- f. Referrals to resources
- g. Other (please explain):

27. How influential was that conference for you? (Mark [X] ONE only.)

- a. Not at all influential
- b. A little influential
- c. Somewhat influential
- d. Definitely influential

28. Which of the following has your afterschool program site ever provided to another afterschool program? (Mark [X] ALL that apply.)

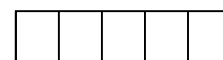
- a. Conducted workshop, inservice or other training
- b. One-on-one coaching
- c. Run activities at other site
- d. Posted information on our web site
- e. Other (please specify):

- f. None of the above

Program Challenges

29. How much are each of the following issues a challenge to implementing high-quality SCIENCE activities at your center? (Mark [X] ONE in each row.)

| | Not at all challenging | A little challenging | Somewhat challenging | Definitely challenging |
|---|---------------------------|--------------------------|--------------------------|---------------------------|
| a. The space available for science activities is inadequate, inappropriate, or unsafe | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. We cannot find staff with an interest in teaching science-related activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. We lack adequate science related instructional materials | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Children are not interested in participating in science activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Our program is focused primarily on non-science topics (e.g., reading, math, or homework help) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. There is too much competition for children's time from activities outside the afterschool program (e.g., sports, classes, or family obligations) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Science is not a priority at our school | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| h. We lack training and support for our staff in leading science activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| i. We cannot afford science materials or supplies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| j. There are too many other activities during our program hours, so there is insufficient time for science activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| k. There are no laboratory facilities available | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| l. It is difficult to get enough quality supplies | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| m. We have inadequate computers or internet access to conduct science-related activities | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| n. It is difficult to offer field-based science activities outside school premises | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| o. Other (please explain): <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



30. How would you describe the knowledge of your staff in these areas? (Mark [X] ONE in each row.)

| | Not at all adequate | Fairly adequate | Adequate | More than adequate | Doesn't apply |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| a. Deep knowledge of science domains. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Understands the nature of afterschool activities (e.g., objectives, challenges peculiar to this environment). | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Knows about existing high quality science activity curricula/resources. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Familiar with state science curriculum standards. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Knows how to design science activities for afterschool learning settings. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| f. Knows how to help English-language learners with science activities. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| g. Other (please specify): <div style="border: 1px solid black; height: 40px; width: 100%; margin-top: 5px;"></div> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

31. Is there anything else you would like to share about the science or any other program offerings in your program?

32. **And finally**, please provide your contact information in the spaces below. This contact information will be used to provide you an online \$30 gift certificate for completing the survey, and may be used to follow up with you about your survey responses. If you prefer, you can contact us toll-free at 877-371-5508 to make alternative gift certificate arrangements.

Phone number:

() - Ext:

Email address:

@ .

In the event that we need to follow up with you, when should we call?

Mailing address line 1:

Mailing address line 2:

City:

State: ZIP:

Thank you for your participation.

