32N Out-of-School-Time Survey: Youth

Dear program participants,

You are receiving this survey because you have participated in an after-school program this year. We'd like to learn about your experience for improvement purposes.

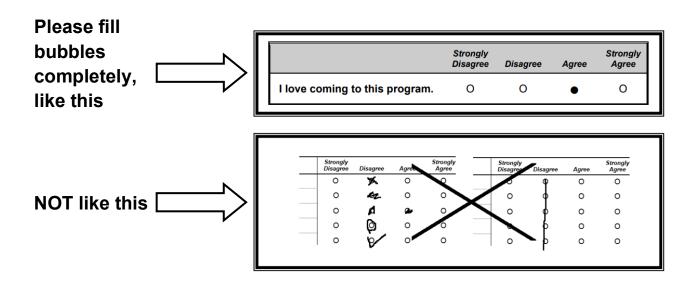
Your answers will be kept confidential and only be presented in a group report by researchers from Michigan State University. **NO ONE IN YOUR PROGRAM OR FAMILY** will know your answers.

Please answer each question by filling in the circle next to your answer. You can use a pencil or a <u>blue or black</u> pen to fill in the circles and only answer one answer per question.

By completing this short survey, you'll be entitled to enter a drawing for one of fifty \$50 Amazon gift cards (one per household).

If you have any questions, please feel free to contact the lead researcher, Dr. Jamie Wu, at wuhengch@msu.edu.

Thank you!



D1	D1. With what gender do you identify?			
	O Male			
	○ Female			
	○ Non-binary			
	O Prefer to self-describe (please describe on line below)			
	O Prefer	not to answer		
D2	. With wh	at race/ethnicity do you identify? (Choose all that apply)		
		American Indian or Alaskan Native		
		Asian		
		Black or African American		
		Hispanic or Latino		
		Middle Eastern or North African		
		Native Hawaiian or Pacific Islander		
		White		
		Prefer not to answer		

33. What is your current grade level?		
	Kindergarten	
	1 st Grade	
	2 nd Grade	
	3 rd Grade	
	4 th Grade	
	5 th Grade	
	6 th Grade	
	7 th Grade	
	8 th Grade	
	9 th Grade	
	10 th Grade	
	11 th Grade	
	12 th Grade	
D4. What is	the name of your school?	
05. What is the name of the city or zip code # where you live?		

D6. How often do you come to this program?					
O Almo	O Almost every day				
O 2 - 3	O 2 - 3 times a week				
O Abou	O About once a week				
O Abou	O About once every 2 weeks				
O Abou	O About once a month				
D7. What ac	D7. What activities do you usually do at this program? (Check all that apply)				
	Sports				
	Art				
	Music				
	Leadership or social emotional learning				
	Homework or tutoring				
	Reading				
	Math				
	Science				
	Technology				
	Engineering				
	Other (please describe)				

	is afterschool program, how much do agree with the following statements?	Strongly Disagree	Disagree	Agree	Strongly Agree
Α.	Positive Climate				
A.1	Adults here care about me.	\circ	\circ	\bigcirc	\circ
A.2	I can tell the adults here about my problems.	\circ	\circ	\circ	\circ
A.3	This program helps me make new friends.	0	\circ	\circ	\circ
A.4	My friends and I tell each other when we do a good job here.	0	\circ	\circ	\circ
В.	Negative Climate				
B.1	Kids get bullied here.	0	\circ	\circ	\circ
B.2	Adults get mad a lot at this program.	\circ	\circ	\circ	\circ
В.3	Adults don't tell me the plan for the day.	0	\circ	\circ	\circ
B.4	We wait around a lot here.	\circ	\circ	\circ	\bigcirc
C.	Youth Voice				
C.1	I get to choose my activities here.	\circ	\circ	\circ	\circ
C.2	I get to help plan activities, projects or events here.	\circ	\circ	\circ	\circ
C.3	Adults ask what we think about activities here.	0	\circ	\circ	\circ
D.	Collaboration				
D.1	I get to lead activities here (example: planning, meetings).	0	0	0	0
D.2	I get to help other kids here (example: homework, projects).	0	\circ	\circ	\circ

D.3	At this program, we learn how to deal with a conflict without fighting.	\circ	\bigcirc	\circ	\circ
E.	Growth Mindset				
E.1	This program encourages me to be the best I can be.	0	0	\circ	\circ
E.2	This program teaches me that mistakes or failure are just part of learning.	0	0	0	0
F.	Identity Development			,	
F.1	At this program, I learn about my feelings.	0	0	\circ	\circ
F.2	This program spends time helping me understand my identities (race, social class, gender, etc.)	0	0	\circ	\circ
F.3	I feel comfortable expressing all of my identities in this program.	0	\circ	\circ	\circ
G.	School Connection				
<i>G.</i> G.1	School Connection The activities here help me do better at school.	0	0	0	0
	The activities here help me do better at	0	0	0	0
G.1	The activities here help me do better at school. I can use the things I do here during	0	0	0	0
G.1 G.2	The activities here help me do better at school. I can use the things I do here during my school day.	0	0	0	0
G.1 G.2	The activities here help me do better at school. I can use the things I do here during my school day. Healthy Eating & Active Living This program offers me fruits and	0	0	0	0
G.1 G.2 <i>H.</i> H.1	The activities here help me do better at school. I can use the things I do here during my school day. Healthy Eating & Active Living This program offers me fruits and vegetables every day. This program helps me get up and		0	0	0
G.1 G.2 <i>H.</i> H.1 H.2	The activities here help me do better at school. I can use the things I do here during my school day. Healthy Eating & Active Living This program offers me fruits and vegetables every day. This program helps me get up and play for at least 60 minutes a day.				0 0

Do you have anything else you'd like to share with us about your experience in this program? (We won't share your answers with anyone at your program, or with your family.)
This is the end of the survey. Your answers will not be reported in any way that links to your name. Would you like to be entered to win a drawing for a gift card?
 Yes (if so, you will need to provide your contact information ONLY for gift card verification; 1 per household)
○ No
ONLY FILL THIS SECTION IF YOU SELECTED "YES" TO BEING ENTERED FOR THE GIFT CARD DRAWING.
Please indicate the name and email of the gift card recipient.
First Name
Last Name
Email address