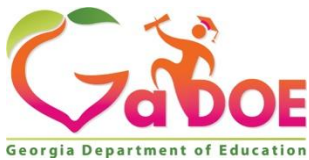


The Georgia School Climate Survey 2025-2026

Student Questions (Grades 6-12)



November 1, 2025



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Please read before starting the survey.

What is the purpose of this survey?

To measure what students think about their school.

How will the data be used?

To help school leaders create a better place to learn.

How long will it take?

About 25 minutes

How many questions are there?

73 questions

Is the data kept confidential?

Answers are not linked to names in any way.

Am I required to answer every question?

Please skip questions you do not feel comfortable answering or questions that do not apply to you.

Information to Consider

Adults - Any adult who works in the school and interacts with students.

Bullying – when someone is mean or aggressive on purpose and repeatedly. These actions are meant to hurt another person or make them feel scared at school or during any school activity (such as waiting at a school bus stop, riding the school bus, or watching a school concert or sporting event). It can happen through words, actions, or writing, and it makes it very hard for the person being bullied to learn because they feel unsafe or uncomfortable at school.

Cyberbullying – when someone uses phones, computers, or the internet to be mean, threatening, or harass others online while at school or during online school activities. It can include sending hurtful messages or sharing embarrassing photos or videos.

Teachers - All teachers, including math, English language arts, science, social studies, art, music, PE, or any other school subject. Students should think about all their teachers when answering questions.

Student Questions (Grades 6-12)

*What grade are you in?

6th

7th

8th

9th

10th

11th

12th

Academically Supportive Environment

Teaching and Learning: Confidence in Teachers

This year at this school...

1	how many of your teachers have significantly impacted your learning?	None of my teachers	A few of my teachers	About half of my teachers	Most of my teachers	All my teachers	Skip
2	how many of your teachers make learning interesting?	None of my teachers	A few of my teachers	About half of my teachers	Most of my teachers	All my teachers	Skip
3	how many of your teachers create an environment where students can learn?	None of my teachers	A few of my teachers	About half of my teachers	Most of my teachers	All my teachers	Skip
4	how many of your teachers have helped you set learning goals?	None of my teachers	A few of my teachers	About half of my teachers	Most of my teachers	All my teachers	Skip

Teaching and Learning: Classroom Discussions

This year at this school...

5	how often do you have group discussions about what you are learning in class?	Never	1 or 2 times this year	1 or 2 times a month	1 or 2 times a week	Almost every day	Skip
6	how many of your teachers have classroom discussions that improve your learning?	None of my teachers	A few of my teachers	About half of my teachers	Most of my teachers	All my teachers	Skip
7	how many of your teachers ensure everyone is respectful during classroom discussions?	None of my teachers	A few of my teachers	About half of my teachers	Most of my teachers	All my teachers	Skip
8	how many of your teachers make you feel comfortable sharing your thoughts and opinions?	None of my teachers	A few of my teachers	About half of my teachers	Most of my teachers	All my teachers	Skip

Teaching and Learning: Teacher Clarity and Feedback

This year at this school...

9	how many of your teachers give you specific feedback about the quality of your work?	<i>None of my teachers</i>	<i>A few of my teachers</i>	<i>About half of my teachers</i>	<i>Most of my teachers</i>	<i>All my teachers</i>	<i>Skip</i>
10	how many of your teachers always check with students to make sure they understand instructions?	<i>None of my teachers</i>	<i>A few of my teachers</i>	<i>About half of my teachers</i>	<i>Most of my teachers</i>	<i>All my teachers</i>	<i>Skip</i>
11	how many of your teachers explain new topics in a way that is easy for you to understand?	<i>None of my teachers</i>	<i>A few of my teachers</i>	<i>About half of my teachers</i>	<i>Most of my teachers</i>	<i>All my teachers</i>	<i>Skip</i>
12	how many of your teachers share examples of quality work before you start an assignment?	<i>None of my teachers</i>	<i>A few of my teachers</i>	<i>About half of my teachers</i>	<i>Most of my teachers</i>	<i>All my teachers</i>	<i>Skip</i>
13	how many of your teachers give you time to practice what you've learned before moving to a new topic?	<i>None of my teachers</i>	<i>A few of my teachers</i>	<i>About half of my teachers</i>	<i>Most of my teachers</i>	<i>All my teachers</i>	<i>Skip</i>
14	how often do your teachers tell you what you did well?	<i>Never</i>	<i>1 or 2 times this year</i>	<i>1 or 2 times a month</i>	<i>1 or 2 times a week</i>	<i>Almost every day</i>	<i>Skip</i>
15	how helpful is the feedback you get from your teachers?	<i>Not helpful</i>	<i>Slightly helpful</i>	<i>Somewhat helpful</i>	<i>Very helpful</i>	<i>Extremely helpful</i>	<i>Skip</i>

Healthy, Safe, and Supportive Environment

Student-Staff Relationships

This year at this school...

16	how many adults show they care about students?	<i>None of the adults</i>	<i>A few of the adults</i>	<i>About half of the adults</i>	<i>Most of the adults</i>	<i>All the adults</i>	<i>Skip</i>
17	how many adults show respect toward students?	<i>None of the adults</i>	<i>A few of the adults</i>	<i>About half of the adults</i>	<i>Most of the adults</i>	<i>All the adults</i>	<i>Skip</i>
18	how many adults do you feel comfortable going to for help?	<i>None of the adults</i>	<i>A few of the adults</i>	<i>About half of the adults</i>	<i>Most of the adults</i>	<i>All the adults</i>	<i>Skip</i>

Safety

This year at this school...

19	how safe do you feel in the halls?	<i>Not safe</i>	<i>Slightly safe</i>	<i>Somewhat safe</i>	<i>Very safe</i>	<i>Extremely safe</i>	<i>Skip</i>
20	how safe do you feel in the classrooms?	<i>Not safe</i>	<i>Slightly safe</i>	<i>Somewhat safe</i>	<i>Very safe</i>	<i>Extremely safe</i>	<i>Skip</i>
21	how safe do you feel in the restrooms?	<i>Not safe</i>	<i>Slightly safe</i>	<i>Somewhat safe</i>	<i>Very safe</i>	<i>Extremely safe</i>	<i>Skip</i>
22	how safe do you feel in the lunchroom?	<i>Not safe</i>	<i>Slightly safe</i>	<i>Somewhat safe</i>	<i>Very safe</i>	<i>Extremely safe</i>	<i>Skip</i>
23	how safe do you feel in the gym or locker room?	<i>Not safe</i>	<i>Slightly safe</i>	<i>Somewhat safe</i>	<i>Very safe</i>	<i>Extremely safe</i>	<i>Skip</i>
24	if you rode the school bus this year, how safe did you feel?	<i>Not safe</i>	<i>Slightly safe</i>	<i>Somewhat safe</i>	<i>Very safe</i>	<i>Extremely safe</i>	<i>Skip</i>
25	how safe do you feel at extracurricular activities (such as school sports events or concerts)?	<i>Not safe</i>	<i>Slightly safe</i>	<i>Somewhat safe</i>	<i>Very safe</i>	<i>Extremely safe</i>	<i>Skip</i>
26	how well do you know the right steps to follow in an emergency (such as a fire or tornado)?	<i>Not well</i>	<i>Slightly well</i>	<i>Somewhat well</i>	<i>Very well</i>	<i>Extremely well</i>	<i>Skip</i>
27	how well do you know the steps to follow in case of an intruder?	<i>Not well</i>	<i>Slightly well</i>	<i>Somewhat well</i>	<i>Very well</i>	<i>Extremely well</i>	<i>Skip</i>
28(R)	how easy is it for someone to get into the building even if they are not authorized to be there?	<i>Not easy</i>	<i>Slightly easy</i>	<i>Somewhat easy</i>	<i>Very easy</i>	<i>Extremely easy</i>	<i>Skip</i>

Physical Environment

This year...

29	how clean is this school?	<i>Not clean</i>	<i>Slightly clean</i>	<i>Somewhat clean</i>	<i>Very clean</i>	<i>Extremely clean</i>	<i>Skip</i>
30	how proud are you of the way this school looks?	<i>Not proud</i>	<i>Slightly proud</i>	<i>Somewhat proud</i>	<i>Very proud</i>	<i>Extremely proud</i>	<i>Skip</i>
31	how many of your teachers keep their classrooms neat and organized?	<i>None of my teachers</i>	<i>A few of my teachers</i>	<i>About half of my teachers</i>	<i>Most of my teachers</i>	<i>All my teachers</i>	<i>Skip</i>
32	how many things in this school (such as toilets, computers, chairs, lab equipment, gym equipment) are in good working condition?	<i>Nothing works</i>	<i>A few things work</i>	<i>About half work</i>	<i>Most things work</i>	<i>Everything works</i>	<i>Skip</i>

Student Supports

This year at this school...

33	how easy is it to access student wellness services (such as school counselors, nurses, and social workers)?	<i>Not easy</i>	<i>Slightly easy</i>	<i>Somewhat easy</i>	<i>Very easy</i>	<i>Extremely easy</i>	<i>Skip</i>
34	how satisfied are you with the amount of student wellness resources available?	<i>Not satisfied</i>	<i>Slightly satisfied</i>	<i>Somewhat satisfied</i>	<i>Very satisfied</i>	<i>Extremely satisfied</i>	<i>Skip</i>
35 MS	how well do classes offered match what you like (such as fine arts, music, and other exploratory classes)? Middle School ONLY	<i>Not well</i>	<i>Slightly well</i>	<i>Somewhat well</i>	<i>Very well</i>	<i>Extremely well</i>	<i>Skip</i>

35 HS	how well do course offerings (such as CTAE, dual enrollment, AP/IB, and electives) match your college or career goals? High School ONLY	<i>Not well</i>	<i>Slightly well</i>	<i>Somewhat well</i>	<i>Very well</i>	<i>Extremely well</i>	<i>Skip</i>
36	how well do adults help students if they are new to the school?	<i>Not well</i>	<i>Slightly well</i>	<i>Somewhat well</i>	<i>Very well</i>	<i>Extremely well</i>	<i>Skip</i>
37	how well do adults help students if they feel sad?	<i>Not well</i>	<i>Slightly well</i>	<i>Somewhat well</i>	<i>Very well</i>	<i>Extremely well</i>	<i>Skip</i>
38	how well do adults help students if they are experiencing bullying?	<i>Not well</i>	<i>Slightly well</i>	<i>Somewhat well</i>	<i>Very well</i>	<i>Extremely well</i>	<i>Skip</i>
39	how well do adults help students if they are dealing with substance abuse issues (such as alcohol or drugs)?	<i>Not well</i>	<i>Slightly well</i>	<i>Somewhat well</i>	<i>Very well</i>	<i>Extremely well</i>	<i>Skip</i>

Student Wellbeing

This year at this school...

40(R)	how often are you bullied?	<i>Never</i>	<i>1 or 2 times this year</i>	<i>1 or 2 times a month</i>	<i>1 or 2 times a week</i>	<i>Almost every day</i>	<i>Skip</i>
41(R)	how often are you cyber-bullied by phone, email, social media, or text messaging?	<i>Never</i>	<i>1 or 2 times this year</i>	<i>1 or 2 times a month</i>	<i>1 or 2 times a week</i>	<i>Almost every day</i>	<i>Skip</i>
42(R)	how big of a problem is bullying?	<i>Not a problem</i>	<i>A slight problem</i>	<i>Somewhat a problem</i>	<i>Very much a problem</i>	<i>An extreme problem</i>	<i>Skip</i>

43(R)	how big of a problem is cyber-bullying?	<i>Not a problem</i>	<i>A slight problem</i>	<i>Somewhat a problem</i>	<i>Very much a problem</i>	<i>An extreme problem</i>	<i>Skip</i>
44(R)	how big of a problem are gangs?	<i>Not a problem</i>	<i>A slight problem</i>	<i>Somewhat a problem</i>	<i>Very much a problem</i>	<i>An extreme problem</i>	<i>Skip</i>
45(R)	how big of a problem is substance abuse (with alcohol or drugs)?	<i>Not a problem</i>	<i>A slight problem</i>	<i>Somewhat a problem</i>	<i>Very much a problem</i>	<i>An extreme problem</i>	<i>Skip</i>
46(R)	how big of a problem is vaping?	<i>Not a problem</i>	<i>A slight problem</i>	<i>Somewhat a problem</i>	<i>Very much a problem</i>	<i>An extreme problem</i>	<i>Skip</i>
47(R)	how big of a problem is students harming themselves?	<i>Not a problem</i>	<i>A slight problem</i>	<i>Somewhat a problem</i>	<i>Very much a problem</i>	<i>An extreme problem</i>	<i>Skip</i>
48(R)	how often have you been very sad?	<i>Never</i>	<i>1 or 2 times this year</i>	<i>1 or 2 times a month</i>	<i>1 or 2 times a week</i>	<i>Almost every day</i>	<i>Skip</i>
49(R)	how often have you been very worried about something?	<i>Never</i>	<i>1 or 2 times this year</i>	<i>1 or 2 times a month</i>	<i>1 or 2 times a week</i>	<i>Almost every day</i>	<i>Skip</i>
50(R)	how stressed are you due to school?	<i>Not stressed</i>	<i>Slightly stressed</i>	<i>Somewhat stressed</i>	<i>Very stressed</i>	<i>Extremely stressed</i>	<i>Skip</i>

Informational Only

This year at this school...

51	*if you were absent, what were the reasons? (Select all that apply)	Never missed	Sick	Doctor's appointment	Too tired	I had no way of getting to school	Skip
		Problems with other students	I don't feel like I can be successful in school	Bored	School is too hard	I was suspended	
		Family emergency	Family vacation	School field trip, competition, or sport	Bad weather	Mental health or stress Middle & High School ONLY	

Middle & High School ONLY

		<i>Family responsibilities (such as caring for family members or doing chores)</i> Middle & High School ONLY	<i>I had to go to work</i> High School ONLY	<i>Other</i>			
52(R)	*how big of a problem is students being distracted by cell phones during classroom lessons?	<i>Not a problem</i>	<i>A slight problem</i>	<i>Somewhat a problem</i>	<i>Very much a problem</i>	<i>An extreme problem</i>	<i>Skip</i>
53	*how aware are you of the dangers associated with fentanyl?	<i>Not aware</i>	<i>Slightly aware</i>	<i>Somewhat aware</i>	<i>Very aware</i>	<i>Extremely aware</i>	<i>Skip</i>
54(R)	*how big of a problem is accidental fentanyl overdoses?	<i>Not a problem</i>	<i>A slight problem</i>	<i>Somewhat a problem</i>	<i>Very much a problem</i>	<i>An extreme problem</i>	<i>Skip</i>

Individual Self-Harm, Alcohol, and Substance Use Questions

Self-Harm

During the past 12 months,

*have you harmed or seriously considered harming yourself on purpose?

Yes

No

Note: Only those who answer “Yes” will see questions 55-57.

During the past 12 months,

55(R) *on how many occasions have you seriously considered harming yourself on purpose?

On no occasion

On 1-2 occasions

On 3-5 occasions

On more than 5 occasions

56(R) *on how many occasions have you harmed yourself on purpose?

On no occasion

On 1-2 occasions

On 3-5 occasions

On more than 5 occasions

During the past 12 months,

57	*what were your reasons for harming yourself or seriously considering harming yourself on purpose? (Select all that apply)	<i>Demands of schoolwork</i>	<i>Problems with peers or friends</i>	<i>Social media</i>	<i>Family reasons</i>	<i>Being bullied</i>
		<i>School grades or performance</i>	<i>School discipline or punishment</i>	<i>Relationship related argument or breakup</i>	<i>Dating violence</i>	<i>Drugs or alcohol</i>
		<i>Other</i>				

During the past 12 months,

*have you attempted or seriously considered attempting suicide?	Yes	No	Note: Only those who answer “Yes” will see questions 58-60.
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During the past 12 months,

58(R)	*on how many occasions have you seriously considered attempting suicide?	<i>On no occasion</i>	<i>On 1-2 occasions</i>	<i>On 3-5 occasions</i>	<i>On more than 5 occasions</i>
59(R)	*on how many occasions have you attempted suicide?	<i>On no occasion</i>	<i>On 1-2 occasions</i>	<i>On 3-5 occasions</i>	<i>On more than 5 occasions</i>

During the past 12 months,

60	*what were your reasons for attempting or seriously considering attempting suicide? (Select all that apply)	<i>Demands of schoolwork</i>	<i>Problems with peers or friends</i>	<i>Social media</i>	<i>Family reasons</i>	<i>Being bullied</i>
		<i>School grades or performance</i>	<i>School discipline or punishment</i>	<i>Relationship related argument or breakup</i>	<i>Dating violence</i>	<i>Drugs or alcohol</i>
		<i>Other</i>				

Alcohol and Substance Use

During the past 30 days,

61(R)	*on how many days did you have at least one drink of alcohol?	<i>0 days</i>	<i>1-5 days</i>	<i>6-10 days</i>	<i>11-20 days</i>	<i>More than 20 days</i>	<i>Skip</i>
62(R)	*on how many days did you smoke cigarettes?	<i>0 days</i>	<i>1-5 days</i>	<i>6-10 days</i>	<i>11-20 days</i>	<i>More than 20 days</i>	<i>Skip</i>
63(R)	*on how many days did you use any other tobacco products?	<i>0 days</i>	<i>1-5 days</i>	<i>6-10 days</i>	<i>11-20 days</i>	<i>More than 20 days</i>	<i>Skip</i>
64(R)	*on how many days did you smoke an electronic vapor product (such as Juul, e-cigars, e-pipes, vape pipes, vaping pens, e-hookahs, or hookah pens)?	<i>0 days</i>	<i>1-5 days</i>	<i>6-10 days</i>	<i>11-20 days</i>	<i>More than 20 days</i>	<i>Skip</i>
65(R)	*on how many days did you use marijuana (also called pot, weed) or hashish?	<i>0 days</i>	<i>1-5 days</i>	<i>6-10 days</i>	<i>11-20 days</i>	<i>More than 20 days</i>	<i>Skip</i>

66(R)	*on how many days did you use methamphetamines (also called speed, crystal/crystal meth, crank, ice, or uppers)?	<i>0 days</i>	<i>1-5 days</i>	<i>6-10 days</i>	<i>11-20 days</i>	<i>More than 20 days</i>	<i>Skip</i>
67(R)	*on how many days did you use heroin (also called dope, crack, smack, junk, or snow)?	<i>0 days</i>	<i>1-5 days</i>	<i>6-10 days</i>	<i>11-20 days</i>	<i>More than 20 days</i>	<i>Skip</i>
68(R)	*on how many days did you use a prescription drug painkiller (such as Fentanyl/ Fent/ Hydrocodone/ Hydros, Oxycodone/ Oxy, Gabapentin/ Gabbies or Tramadol/ Trammies) that was not prescribed to you?	<i>0 days</i>	<i>1-5 days</i>	<i>6-10 days</i>	<i>11-20 days</i>	<i>More than 20 days</i>	<i>Skip</i>
69(R)	*on how many days did you use a prescription drug tranquilizer or sedative (such as Benzos, Xanax/Xans, Klonopin, or Ativan) that was not prescribed to you?	<i>0 days</i>	<i>1-5 days</i>	<i>6-10 days</i>	<i>11-20 days</i>	<i>More than 20 days</i>	<i>Skip</i>
70(R)	*on how many days did you drink 5 or more drinks of alcohol in a row, that is, within a couple of hours?	<i>0 days</i>	<i>1-5 days</i>	<i>6-10 days</i>	<i>11-20 days</i>	<i>More than 20 days</i>	<i>Skip</i>

71(R)	*on how many days did you use a prescription drug stimulant (such as Ritalin or Adderall) that was not prescribed to you?	<i>0 days</i>	<i>1-5 days</i>	<i>6-10 days</i>	<i>11-20 days</i>	<i>More than 20 days</i>	<i>Skip</i>
72(R)	*on how many days did you use any other type of prescription drug that was not prescribed to you?	<i>0 days</i>	<i>1-5 days</i>	<i>6-10 days</i>	<i>11-20 days</i>	<i>More than 20 days</i>	<i>Skip</i>

During the past 30 days,

73	*if you used a prescription drug that was not prescribed to you, please indicate why.	<i>Medical reasons</i>	<i>To feel more alert</i>	<i>To relax or quiet my nerves</i>	<i>To enjoy myself</i>	<i>To get high</i>	<i>Skip</i>
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Additional Information

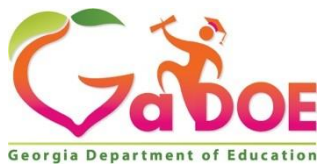
When you answer these questions, we can better understand what different groups think about this school.

*What is your gender?	<i>Female</i>	<i>Male</i>				<i>Skip</i>
*What is your race and/or ethnicity? (Select all that apply)	<i>American Indian or Alaska Native</i>	<i>Asian</i>	<i>Black or African American</i>	<i>Hispanic or Latino</i>	<i>Native Hawaiian or Other Pacific Islander</i>	<i>Skip</i>
	<i>White or Caucasian</i>	<i>Other</i>				
*Do you have an individual education plan (IEP)?	<i>Yes</i>	<i>No</i>	<i>I don't know</i>			<i>Skip</i>

*In what category is your disability? (Select all that apply)	<i>Learning disability</i>	<i>Emotional behavior disorder</i>	<i>Attention Deficit/ Hyperactivity Disorder</i>	<i>Physical disability</i>	<i>Other</i>	<i>Skip</i>
*Are you enrolled in any of the following programs? (Select all that apply)	<i>Gifted Placement</i>	<i>Advanced Placement/ Honors Courses</i>	<i>Dual Enrollment High School ONLY</i>			<i>Skip</i>

* These questions are not included when calculating a subscale score, they are for information purposes only.

(R) = Reverse coded questions have response options that go from positive to negative rather than the typical order (negative to positive).



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