

Gen Education Teacher Survey (IDEA Program Monitoring)

The Office of Special Education Services (OSES) at the South Carolina Department of Education is charged with monitoring special education programs to ensure that students with Individualized Education Programs (IEPs) are provided with a Free Appropriate Public Education (FAPE). As a general education teacher, your participation is vital to the provision of appropriate educational services to all students, including those with IEPs.

Please complete the following survey with respect to students with disabilities that you are teaching. The survey will take approximately 10 minutes and is anonymous. Your individual answers will not be given to anyone in your district. Individual information will be used only to track completion of the survey. The information will be analyzed and a general summary will be provided to your district to assist them in improving its special education services and programs.

There are 9 questions in this survey.

Participation in the IEP Process

1 Participation in the IEP Process *

Please choose the appropriate response for each item:

	Strongly Agree	Agree	Disagree	Strongly Disagree
I provide input and information that is used to develop or amend IEPs for students with disabilities whom I teach.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
For each student with an IEP whom I teach, I am made aware of the student's progress towards meeting measurable annual goals as outlined in the IEP.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
When I attend IEP meetings, I am considered a valued and contributing IEP team member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Teacher Communication

2 Teacher Communication *

Please choose the appropriate response for each item:

	Strongly Agree	Agree	Disagree	Strongly Disagree
I collaborate on a weekly basis with special education teachers regarding the needs of students with IEPs and issues related to special education.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am provided with opportunities to plan instruction with special education teachers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am well informed about instructional techniques related to teaching students with disabilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Special education teachers who work with my students are well informed of the curriculum that I use in my classes.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Accommodations for Students with Disabilities

3 Accommodations for Students with Disabilities *

Please choose the appropriate response for each item:

	Strongly Agree	Agree	Disagree	Strongly Disagree
Before the first day of class, I am provided with a listing of all accommodations for students with IEPs whom I teach.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
At IEP team meetings, I am provided with the opportunity to offer formal input into the development of individual accommodations for my students with IEPs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am provided with opportunities to provide informal input (e.g. discussions with special education teachers) into the development of individual accommodations for my students with IEPs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The accommodations listed in my students' IEPs fit their unique educational needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Behavioral Intervention Plans

4 Behavioral Intervention Plans *

Please choose the appropriate response for each item:

	Strongly Agree	Agree	Disagree	Strongly Disagree	Not Applicable
Whenever an IEP team is developing a Behavioral Intervention Plan (BIP) for a student whom I teach, I am asked to provide input and information for the development of the BIP.	<input type="radio"/>				
Whenever a student in my class has a BIP, I am informed of the contents of the BIP.	<input type="radio"/>				
For any student in my class who has a BIP, I am provided with the necessary information to implement the BIP.	<input type="radio"/>				
For any student in my class who has a BIP, I am provided with the necessary supports to implement the BIP.	<input type="radio"/>				
I understand the procedures that apply to disciplinary actions involving students with disabilities.	<input type="radio"/>				

Instruction, Services, and Extracurricular Activities

5 Instruction, Services, and Extracurricular Activities *

Please choose the appropriate response for each item:

	Strongly Agree	Agree	Disagree	Strongly Disagree	I am not sure
The students with disabilities whom I teach receive all of the general education instruction time that is listed in their IEPs.	<input type="radio"/>				
Students with disabilities whom I teach receive specialized instruction and when applicable, related services for the time and frequency delineated in their IEPs.	<input type="radio"/>				
Students with disabilities at my school are encouraged to participate in extracurricular activities.	<input type="radio"/>				

Demographic Information

6 Indicate the approximate years (cumulative or consecutive) that you have taught in this school district. *

Please choose **only one** of the following:

- This is my first year teaching in this school district.
- 2 to 4 years
- 5 to 9 years
- 10 or more years

7 Indicate the number of students with IEPs who are currently receiving instruction from you. *

Please choose **only one** of the following:

- 1 to 3 students
- 4 to 8 students
- 9 to 14 students
- 15 or more students

8 Indicate the grade level(s) that you teach. *

Please choose **only one** of the following:

- Elementary
- Middle
- High
- Other

9 During a typical school year, how many IEP team meetings do you attend? *

Please choose **only one** of the following:

- 0 meetings
- 1 to 3 meetings
- 4 to 8 meetings
- 9 to 14 meetings
- 15 or more meetings