

Lab4Schools

Survey for Students



Student Questionnaire

Country:	
Student ID:	

1. On a scale of 1-5, how motivated are you to work on this project?

- (1) Not at all motivated (2) Somewhat motivated (3) Neutral (4) Moderately motivated (5) Extremely motivated

2. How much do you feel that this project is relevant to your personal interests and goals?

- (1) Not at all relevant (2) Somewhat relevant (3) Neutral (4) Moderately relevant (5) Extremely relevant

3. How confident do you feel about your ability to complete this project successfully?

- (1) Not at all confident (2) Somewhat confident (3) Neutral (4) Moderately confident (5) Extremely confident

4. How well do you feel that you are working with your team on this project?

- (1) Not at all well (2) Somewhat well (3) Neutral (4) Moderately well (5) Extremely well

5. How much do you feel that you are learning from this project?

- (1) Not at all (2) Somewhat (3) Neutral (4) Moderately (5) Extremely

6. How interested are you in the topic of this project?

- (1) Not at all interested (2) Somewhat interested (3) Neutral (4) Moderately interested (5) Extremely interested

7. How well do you feel that your teachers are supporting you in this project?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| (1) Not at all well | (2) Somewhat well | (3) Neutral | (4) Moderately well | (5) Extremely well |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

8. How much do you feel that you are able to contribute to your team in this project?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| (1) Not at all | (2) Somewhat | (3) Neutral | (4) Moderately | (5) Extremely |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

9. Would you like to work on a similar project in the future?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| (1) No | (2) Maybe | (3) Neutral | (4) Likely | (5) Definitely |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

10. On a scale of 1-5, how motivated are you to learn in school?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| (1) Not at all motivated | (2) Somewhat motivated | (3) Neutral | (4) Moderately motivated | (5) Extremely motivated |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

11. How much do you feel that the subjects you are learning are relevant to your personal interests and future goals?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| (1) Not at all relevant | (2) Somewhat relevant | (3) Neutral | (4) Moderately relevant | (5) Extremely relevant |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

12. How confident do you feel about your ability to learn and understand the subjects you are studying?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| (1) Not at all confident | (2) Somewhat confident | (3) Neutral | (4) Moderately confident | (5) Extremely confident |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

13. How well do you feel that you are supported by your teachers in your learning process?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| (1) Not at all well | (2) Somewhat well | (3) Neutral | (4) Moderately well | (5) Extremely well |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

14. How much do you feel that you are learning from the lessons and activities in class?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| (1) Not at all | (2) Somewhat | (3) Neutral | (4) Moderately | (5) Extremely |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

15. How often do you feel like you are making progress in your learning?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| (1) Rarely | (2) Sometimes | (3) Neutral | (4) Often | (5) Almost
always |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

16. How interested are you in the subjects you are learning in school?

- | | | | | |
|------------------------------|----------------------------|--------------------------|------------------------------|-----------------------------|
| (1) Not at all
interested | (2) Somewhat
interested | (3) Neutral | (4) Moderately
interested | (5) Extremely
interested |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

17. How much do you feel that you are able to participate and contribute in class discussions and activities?

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| (1) Not at all | (2) Somewhat | (3) Neutral | (4) Moderately | (5) Extremely |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

18. How motivated are you to continue learning and improving your academic skills?

- | | | | | |
|-----------------------------|---------------------------|--------------------------|-----------------------------|----------------------------|
| (1) Not at all
motivated | (2) Somewhat
motivated | (3) Neutral | (4) Moderately
motivated | (5) Extremely
motivated |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |