**My Classroom**

These are questions about what this class is like for you. There are no right or wrong answers because class is different for every student. You don’t have to put your name on this paper.

I’m going to read the sentence aloud and you color in Yes/“Smiley face” if you agree; No/”Frown face” if you don’t agree; and Sometimes/“Straight face” if you kind of agree.

|  |  |  |  |
| --- | --- | --- | --- |
|  | YES | Sometimes | No |
| I feel safe at school | J | K | L |
| My teacher wants me to do well in school | J | K | L |
| My teacher cares about me | J | K | L |
| Other students like me | J | K | L |
| I feel like I am an important part of the class | J | K | L |