

Student Needs Assessment

Please help your school counselor know how to best support you. Be honest in your responses. Only you will know the answers you provide as we do not ask for your name. There are about 25 questions. You may answer the questions in any order, but please complete the survey before leaving your current browser session. All the questions should be answered completely. If you do not find an answer that fits exactly, use the one that comes closest.

1. What is your grade?

- ☐ 6th grade
 - ☐ 7th grade
 - ☐ 8th grade
 - ☐ 9th grade
 - ☐ 10th grade
 - ☐ 11th grade
 - ☐ 12th grade
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2. What is your gender?

- ☐ Female
 - ☐ Male
 - ☐ Prefer not to answer
 - ☐ Other
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3. What is your race/ethnicity?

- ☐ White / Caucasian
 - ☐ Native Hawaiian or Pacific Islander
 - ☐ Hispanic or Latino
 - ☐ Asian
 - ☐ African American
 - ☐ American Indian / Alaskan Native
 - ☐ Other Ethnicity
 - ☐ Prefer not to answer
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4. What is the primary language spoken in your home?

- ☐ English
 - ☐ Spanish
 - ☐ Pacific Islander Language
 - ☐ American Indian Language
 - ☐ Asian Language
 - ☐ Other Language
 - ☐ Prefer not to answer
-

5. Will you be or are you a first-generation college student? A first-generation college student is a student whom neither parent graduated with a 4-year degree (in the U.S.)

- ☐ Yes
- ☐ No
- ☐ I don't know

6. What type of grades do you typically earn? You can also choose your answer based on approximate Grade Point Average (GPA).

- ☐ Mostly A's (3.7-4.0)
 - ☐ Mostly B's (2.5-3.3)
 - ☐ Mostly C's (1.7-2.3)
 - ☐ Mostly D's (1.0-1.3)
 - ☐ Below D's (1.0 or below)
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7. Please evaluate the services you received from your school counselor.

	Very Helpful	Helpful	Somewhat Helpful	Not Helpful	Have not received this service from my school counselor
Classroom school counseling lessons and activities (e.g., college and career search, interest inventory, financial aid/scholarships, life skills, suicide prevention, etc.)					
College and career awareness and exploration activities (e.g., Utah College Application Week, college tours, financial aid nights, job shadows, internships, career fairs, resume building, CTE pathways, online college/career exploration, etc.)					
Plan for College and Career Readiness Meetings, including 4-year course planning					
Small group counseling sessions (e.g., grief and loss, conflict resolution, life skills, etc.)					
Individual counseling sessions (e.g., short-term solution-focused counseling, not diagnostic or therapeutic counseling)					

Assisting students with connecting to community resources (e.g., therapeutic counseling and support groups, etc.)					
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8. Do you find online college and career activities a helpful resource? (e.g., interest surveys, learning style assessments, career and college searches, scholarship and financial aid planning, etc.)

- ☐ Yes
 - ☐ No
 - ☐ Sometimes
 - ☐ I have not used an online college/career platform (e.g., Keys to Success and YouScience)
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9. Do you feel comfortable going to the counseling office?

- ☐ Yes
 - ☐ No
 - ☐ Sometimes
 - ☐ I have not tried accessing resources in the counseling office.
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10. Do you feel comfortable seeking help from your school counselor?

- ☐ Yes
 - ☐ No
 - ☐ Sometimes
 - ☐ I have not tried seeking help from my school counselor.
 - ☐ I do not know who my school counselor is.
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11. Are you able to schedule an appointment with your school counselor?

- ☐ Yes
 - ☐ No
 - ☐ Sometimes
 - ☐ I have not tried to schedule an appointment with my school counselor.
-

12. Do you need additional support from your school counselor in any of the following areas? (Mark all that apply)

- ☐ Academics/School
 - ☐ College/Career Planning
 - ☐ Social/Friends
 - ☐ Emotional/Mental Health
 - ☐ Circumstances outside the school setting that impacts their learning (e.g., homelessness, food insecurity, safety, traumatic events, citizenship, etc.)
 - ☐ None of the above
-

13. Do any of the following emotions impact your success at school? (Mark all that apply)

- ☐ Anger
- ☐ Fear
- ☐ Loneliness
- ☐ Sadness
- ☐ Stress or anxiety
- ☐ Other (please explain)
- ☐ None of the above

14. Do you need help with any of the following skills?

	Very Needed	Needed	Somewhat Needed	Not Needed
Voicing my concerns and speaking up for myself.				
Learning how to talk to an adult (e.g., teacher, counselor, administrator) at school.				
Knowing what to do if I am or other students are being bullied, mistreated, or are feeling lonely.				
Knowing how to manage my emotions (e.g., sadness, anxiety, etc.) in a positive way without hurting myself or others.				

15. Which of the following services would help you improve your academic performance?

	Very Needed	Needed	Somewhat Needed	Not Needed
Additional access to school counselors				
Study hall/Academic support classes				
Individual support time during class				
Before/after school access to a teacher(s)				

16. When school counselors make classroom presentations, which topics do you feel are most valuable?

	Very Valuable	Valuable	Somewhat Valuable	Not Valuable
College and career information				
Scholarships and financial aid				
Stress management				
Study skills and succeeding in school				
Relationships with peers, parents, teachers				
Self-esteem/self-confidence				
Test preparation for college (e.g., ACT/SAT)				
Suicide prevention				
Internet/Social media safety				

17. Which topic(s) would help you in a small group counseling setting (upon parental consent)?

	Very Valuable	Valuable	Somewhat Valuable	Not Valuable
Mindfulness/Stress Management				
Life Skills				
Coping with Stress/Anxiety				
Healthy Relationships				

Conflict Resolution				
Grief/Loss				

18. What is your college/career plan after high school?

- ☐ Work or on-the-job training (apprenticeships)
- ☐ Military
- ☐ 1-2 years (or less) of college leading to a technical license or certificate program
- ☐ 2 years of college (associate or technical degree)
- ☐ 4 or more years at a college/university (bachelor, masters, or doctorate degree)
- ☐ I don't know
- ☐ Other (please explain)

19. What obstacles might prevent you from continuing your education after high school? (Mark all that apply)

- ☐ Family responsibilities
- ☐ Grades
- ☐ Motivation
- ☐ Cost
- ☐ None of the above
- ☐ Other (please explain)

20. What would you like for your school counselor to discuss during your yearly small group or individual Plan for College and Career Readiness meeting?

	Very Important	Important	Somewhat Important	Not Important
Recognizing and celebrating personal strengths and interests				
Goal setting for the future				
Career planning based on interests and abilities				
Academic 4-year planning that connects to future goals				

Information about training after high school (e.g., apprenticeships, technical colleges, and colleges/universities)				
College and job application process				
Resume building				
Scholarship and financial aid information				
Makeup/recovery credit				
Personal skills for self-advocacy and self-care (e.g., resiliency, balancing home and school, basic needs, coping strategies, etc.)				
Transition information (e.g., elementary to junior high; junior high to high school; high school to college)				

21. I feel that students in my school treat others with kindness and respect.

- ☐ Never
- ☐ Rarely
- ☐ Usually
- ☐ Always

22. In your opinion:

	Yes	No
I have access to information about the level of training/education I can earn after high school (e.g., apprenticeships, certificates, degrees).		
I understand how to apply for different training/education programs after high school.		
I understand what training/education after high school will cost.		
I understand the different ways to pay for the cost of training/education after high school (e.g., scholarships, financial aid/FAFSA, savings, etc.)		
I am provided information about classes that prepare me for college/career options (e.g., challenging classes, Career & Technical Education (CTE) classes/pathways, Honors, Concurrent Enrollment (CE), Advanced Placement (AP), etc.)		

23. I am aware of Career and Technical Education (CTE) Pathways.

- ☐ Yes
 - ☐ No
-

24. I understand how to become a CTE Pathway Concentrator or Completer.

- ☐ Yes
 - ☐ No
-

25. I feel connected to my school.

- ☐ Strongly Agree
 - ☐ Agree
 - ☐ Undecided
 - ☐ Disagree
 - ☐ Strongly Disagree
-

26. There are clubs and extracurricular activities that I belong to or interest me. If no, please explain.

- ☐ Yes
 - ☐ No
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