

**Comprehensive, Integrated, Three-Tiered (Ci3T) Model of Prevention  
Demographic Form**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

School district: \_\_\_\_\_ School (main): \_\_\_\_\_

<p><b>1. My preferred pronoun is</b></p> <p><input type="checkbox"/> He / Him / His</p> <p><input type="checkbox"/> She / Her / Hers</p> <p><input type="checkbox"/> They / Them / Theirs</p> <p><input type="checkbox"/> Individually defined: _____</p> <p><input type="checkbox"/> Prefer not to answer</p>	<p><b>2. My age (as of my last birthday)</b> _____</p>
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**3. I am of Hispanic, Latino, or Spanish origin**       No     Yes

**4. Please check all categories that best describe your race:**

<input type="checkbox"/> American Indian/Alaska Native	<input type="checkbox"/> White
<input type="checkbox"/> Asian/Pacific Islander	<input type="checkbox"/> Other (specify): _____
<input type="checkbox"/> Black	<input type="checkbox"/> Decline

**5. If you are a school employee:**  
**How many years have you worked in education (including this year)?**  
*Include the current school year as one year (e.g., if this is your first year, write 1 instead of 0) and round to the nearest whole number.* \_\_\_\_\_

**6. Do you provide instruction to students (e.g., whole class, small group, 1:1)?**     No     Yes

**- If you indicated you provide instruction to students, please circle all grade(s) you currently work with:**

Early childhood    PreK    K    1    2    3    4    5    6    7    8    9    10    11    12

Mixed grade class (please specify) \_\_\_\_\_

**7. What is your primary role in your school?**

<p><input type="checkbox"/> General education teacher</p> <p><input type="checkbox"/> Special education teacher</p> <p><input type="checkbox"/> Building administrator</p> <p><input type="checkbox"/> Staff (e.g., paraprofessional, administrative assistant, custodial): _____</p> <p><input type="checkbox"/> District leader/administrator (please specify): _____</p>	<p><input type="checkbox"/> Related service provider (please specify):</p> <p><input type="checkbox"/> school psychologist</p> <p><input type="checkbox"/> social worker</p> <p><input type="checkbox"/> counselor</p> <p><input type="checkbox"/> occupational therapist</p> <p><input type="checkbox"/> physical therapist</p> <p><input type="checkbox"/> adaptive physical education</p> <p><input type="checkbox"/> English as a second language</p> <p><input type="checkbox"/> mental health provider</p> <p><input type="checkbox"/> librarian / library media specialist</p> <p><input type="checkbox"/> behavior specialist / interventionist</p> <p><input type="checkbox"/> reading specialist</p> <p><input type="checkbox"/> speech &amp; language pathologist</p> <p><input type="checkbox"/> assistive technology</p> <p><input type="checkbox"/> Title I</p> <p><input type="checkbox"/> other: _____</p>
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**Briefly describe your primary role in your school:** \_\_\_\_\_

**8. If you are a teacher, are you certified in the areas/subjects you currently teach?**

No                       Yes                       I am not a teacher

*Please turn page*



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**9. What is the highest degree you have earned (check one)?**

- High school diploma
- Associate's degree / technical
- Bachelor's degree
- Master's degree
- Master's degree +30
- Doctoral, Educational Specialist, J.D. degree

**10. Have you had a course in classroom management?**

- No
- Yes

**11. Have you had a professional development or other training in**

**Academic screenings?**     No     Yes      **Behavior screenings?**    No     Yes

**12. On a scale from 1 – 5, what is your current level of familiarity with Comprehensive, Integrated, Three-Tiered (Ci3T) Model of Prevention?**

<b>Not at all familiar</b>					<b>Very familiar</b>
1	2	3	4	5	

**13. On a scale from 1 – 5, to what extent have you accessed the following professional learning materials related to Comprehensive, Integrated, Three-Tiered (Ci3T) Model of Prevention?**

	Not at all				A great deal
ci3t.org	1	2	3	4	5
Other websites (e.g., pbis.org, individual school websites, state websites)	1	2	3	4	5
Ci3T interactive eBook	1	2	3	4	5
District-provided Ci3T professional learning	1	2	3	4	5
Ci3T research staff-led professional learning (e.g., EMPOWER sessions)	1	2	3	4	5