

“Know Me” Student Census

Dear Parent or Guardian:

The purpose of the *WECDSB Student Census* is to better understand our students and their school communities, identify and eliminate barriers to student success, and develop effective programs, supports and resources to best meet student needs and promote student well-being, achievement and success. *The higher the completion rate, the more reliable the information will be to help us support our students.*

Our goal is to ensure school environments are welcoming to all identities, cultures, races, ethnicities, abilities, gender and religions. The questions and answer choices on the census are informed by and based on the recommendations by the Ministry of Education, Ontario’s Education Equity Action Plan, the Data Standards for the Identification and Monitoring of Systemic Racism, the *Ontario Human Rights Commission*, and the 2016 Canadian Census.

The data and information that you provide for the *Student Census* is collected under the authority of the Education Act, the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) and is aligned with Ontario’s Anti-Racism data Standards and the Ontario Human Rights Code.

The data and information you provide for the *Student Census* is not anonymous; however your responses to the census questions will be kept private and confidential. The data and information you provide to the census will be linked to our Student Information System that stores other data related to student achievement, attendance, and discipline data. This will allow us to understand better how we can more effectively enhance student success and well-being for ALL students. Completing the Student Census is separate from the collection of Indigenous self-identification data.

To protect the privacy and confidentiality of students and their families, any report of findings from the *Student Census* will only contain data about groups of students and not individual students. Individual student data or information from the Student Census will never be released.

The *Student Census* will take you about 15 minutes to complete and is entirely voluntary. You can skip questions if you do not wish to provide a response.

We want to thank you for taking the time to complete the *Student Census*; we very much value your input!

Would you like to complete the Student Census?

Yes

No

Indigenous Identity

Does your child identify as First Nations, Metis, and/or Inuit? (If yes, select all that apply)

No

Yes, First Nations

Yes, Metis

Yes, Inuit

Not Sure

Prefer not to answer

Ethnic Identity

What is the first language(s) or dialect(s) your child learned to speak? Please select one of the options whenever possible before writing in the textbox.

- | | | |
|---|--|---|
| <input type="checkbox"/> Albanian | <input type="checkbox"/> Hungarian | <input type="checkbox"/> Swahili |
| <input type="checkbox"/> American Sign Language | <input type="checkbox"/> Italian | <input type="checkbox"/> Serbian |
| <input type="checkbox"/> Amharic | <input type="checkbox"/> Karen | <input type="checkbox"/> Serbo-Croatian |
| <input type="checkbox"/> Arabic | <input type="checkbox"/> Khmer (Cambodian) | <input type="checkbox"/> Somali |
| <input type="checkbox"/> Assyrian Neo-Aramaic | <input type="checkbox"/> Korean | <input type="checkbox"/> Spanish |
| <input type="checkbox"/> Bengali | <input type="checkbox"/> Kurdish | <input type="checkbox"/> Tagalog (Pilipino, Filipino) |
| <input type="checkbox"/> Bosnian | <input type="checkbox"/> Kurdish Kurmanji | <input type="checkbox"/> Tamil |
| <input type="checkbox"/> Cantonese | <input type="checkbox"/> Lunaape | <input type="checkbox"/> Telugu |
| <input type="checkbox"/> Chaldean Neo-Aramaic | <input type="checkbox"/> Macedonian | <input type="checkbox"/> Thai |
| <input type="checkbox"/> Cree | <input type="checkbox"/> Malayalam | <input type="checkbox"/> Tigrinya |
| <input type="checkbox"/> Creole/Patois | <input type="checkbox"/> Mandarin | <input type="checkbox"/> Turkish |
| <input type="checkbox"/> Croatian | <input type="checkbox"/> Nepali | <input type="checkbox"/> Ukrainian |
| <input type="checkbox"/> Dutch | <input type="checkbox"/> Ojibwe | <input type="checkbox"/> Urdu |
| <input type="checkbox"/> English | <input type="checkbox"/> Oji-Cree | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> French | <input type="checkbox"/> Oneida | <input type="checkbox"/> Yoruba |
| <input type="checkbox"/> German | <input type="checkbox"/> Persian (Farsi) | <input type="checkbox"/> Not Listed Here (Please specify) |
| <input type="checkbox"/> Greek | <input type="checkbox"/> Polish | |
| <input type="checkbox"/> Gujarati | <input type="checkbox"/> Portuguese | |
| <input type="checkbox"/> Hebrew | <input type="checkbox"/> Punjabi (Panjabi) | |
| <input type="checkbox"/> Hindi | <input type="checkbox"/> Romanian | <input type="checkbox"/> Not Sure |
| | <input type="checkbox"/> Russian | <input type="checkbox"/> Prefer not to answer |

Do you consider your child a Canadian?

- Yes
- No
- Not Sure
- Prefer not to answer

What is your child's ethnic or cultural origin(s)? (Choose all that apply) Please select one of the options whenever possible before writing in the textbox.

- | | | |
|--------------------------------------|--|--------------------------------------|
| <input type="checkbox"/> African | <input type="checkbox"/> English | <input type="checkbox"/> Macedonian |
| <input type="checkbox"/> Albanian | <input type="checkbox"/> Eritrean | <input type="checkbox"/> Maltese |
| <input type="checkbox"/> American | <input type="checkbox"/> Filipino | <input type="checkbox"/> Metis |
| <input type="checkbox"/> Arab | <input type="checkbox"/> First Nations | <input type="checkbox"/> Mexican |
| <input type="checkbox"/> Austrian | <input type="checkbox"/> French | <input type="checkbox"/> Nigerian |
| <input type="checkbox"/> Belgian | <input type="checkbox"/> Ghanaian | <input type="checkbox"/> Norwegian |
| <input type="checkbox"/> Canadian | <input type="checkbox"/> German | <input type="checkbox"/> Pakistani |
| <input type="checkbox"/> Chaldean | <input type="checkbox"/> Greek | <input type="checkbox"/> Palestinian |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Hungarian | <input type="checkbox"/> Polish |
| <input type="checkbox"/> Colombian | <input type="checkbox"/> Iraqi | <input type="checkbox"/> Portuguese |
| <input type="checkbox"/> Congolese | <input type="checkbox"/> Irish | <input type="checkbox"/> Romanian |
| <input type="checkbox"/> Croatian | <input type="checkbox"/> Italian | <input type="checkbox"/> Scottish |
| <input type="checkbox"/> Danish | <input type="checkbox"/> Jamaican | <input type="checkbox"/> Spanish |
| <input type="checkbox"/> Dutch | <input type="checkbox"/> Korean | <input type="checkbox"/> Swedish |
| <input type="checkbox"/> East Indian | <input type="checkbox"/> Lebanese | <input type="checkbox"/> Sudanese |

- | | | |
|------------------------------------|--|---|
| <input type="checkbox"/> Swiss | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Not Sure |
| <input type="checkbox"/> Syrian | <input type="checkbox"/> Welsh | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> Turkish | <input type="checkbox"/> Not listed here
(Please Specify) | |
| <input type="checkbox"/> Ukrainian | _____ | |

Race

Which race category best describes your child? (Select all that apply).

Note: In our society, people are often described by their race or racial background. For example, some people are considered "White" or "Black" or "East/Southeast Asian," etc. Race is often confused with ethnicity, but there can often be several ethnicities within a racialized group. If your child has multiple racial backgrounds, select as many racial backgrounds as applicable.

- Black (African, Afro-Caribbean, African-Canadian descent)
- East Asian (Chinese, Korean, Japanese, Taiwanese descent)
- Indigenous (First Nations, Metis, Inuit)
- Latino (Non-White Latin American, Hispanic descent)
- Middle Eastern (Arab, Persian, West Asian descent, e.g. Afghan, Egyptian, Iranian, Lebanese, Turkish, Kurdish)
- South-Asian (South-Asian descent, e.g. East Indian, Pakistani, Bangladeshi, Sri Lankan, Indi-Caribbean)
- South-East Asian (Filipino, Vietnamese, Cambodian, Thai, Indonesian, other South-East Asian descent)
- White/European
- Other race category not described above (enter answer _____)
- Not Sure
- Prefer not to answer

Religion or Spiritual Affiliation

What is your child's religion and/or spiritual affiliation?

Note: People can be treated differently based on their religion, or perceived religion, which can lead to negative impacts and unequal outcomes. Islamophobia and anti-semitism are examples of the way religion can be racialized. People can experience racism not only based on skin colour but also other perceived characteristics that are associated with religion.

- | | |
|--|--|
| <input type="checkbox"/> Catholic | <input type="checkbox"/> Atheist |
| <input type="checkbox"/> Christian Non-Catholic | <input type="checkbox"/> Agnostic |
| <input type="checkbox"/> Buddhism | <input type="checkbox"/> Another religion or spiritual belief
(Please specify)
_____ |
| <input type="checkbox"/> Hindu | <input type="checkbox"/> Do not identify with a religion or
spirituality |
| <input type="checkbox"/> Jewish | <input type="checkbox"/> Not Sure |
| <input type="checkbox"/> Muslim | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> Sikh | |
| <input type="checkbox"/> Indigenous Spirituality | |

Gender Identity

What is your child's gender?

Disability

Do you consider your child to be a person with a disability? (Select one answer only)

Note: "Disability" covers a broad range and degree of conditions, some visible and some non-visible. A disability may have been present from birth, caused by an accident, or developed over time. There are physical, mental and learning disabilities, mental disorders, hearing or vision disabilities, epilepsy, mental health disabilities and addictions, environmental sensitivities, and other conditions. (Ontario Human Rights Code). Having a disability is the perception of the individual and is not necessarily linked to official documentation. A person's disability may be diagnosed or not diagnosed. It may be hidden or visible.

- | | |
|------------------------------|---|
| <input type="checkbox"/> Yes | <input type="checkbox"/> Not Sure |
| <input type="checkbox"/> No | <input type="checkbox"/> Prefer not to answer |

Please select the disabilities that apply to your child.

Note: The response(s) you choose will be kept confidential. The data collected in any way cannot be traced back to any student.

- Physical disability
- Mental health disability
- Autism Spectrum Disorder
- Blind or low vision
- Deaf or hard of hearing
- Addiction(s)
- Developmental disability/intellectual/cognitive impairment
- Learning disability/(ies)
- Mobility
- Pain
- Speech/language impairment
- Any disability not listed above (please specify)_____
- Not Sure
- Prefer not to answer

Status in Canada

Was your child born in Canada?

- Yes
- No
- Not Sure
- Prefer not to answer

If no, is your child currently:

- A Canadian Citizen
- An international student (enrolled through a study permit)
- A landed immigrant/permanent resident
- A refugee claimant
- Not Sure
- Prefer not to answer

Socio-economic Status

Answer the next 3 questions considering Parent / Guardian 1 that your child currently lives with most of the time.

- | | |
|---|---|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Foster Parent |
| <input type="checkbox"/> Father | <input type="checkbox"/> Friend(s) |
| <input type="checkbox"/> Stepmother | <input type="checkbox"/> A person not listed above (please specify) _____ |
| <input type="checkbox"/> Stepfather | <input type="checkbox"/> Sibling |
| <input type="checkbox"/> Grandparent | <input type="checkbox"/> Not Sure |
| <input type="checkbox"/> Legal guardian | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> Relative (e.g. Aunt/Uncle) | |

Please check the highest level of education Parent / Guardian 1 completed. (Select one answer only)

- Did not complete any formal education
- Elementary School
- High School

- Apprenticeship
- College
- University
- Not Sure
- Prefer not to answer

What is Parent / Guardian 1's employment status? (Select one answer only)

- Works full-time
- Works part-time
- Self-employed (for example, has own business)
- Looking for work
- Stay-at-home parent/guardian
- Parental leave
- Retired
- Employment status not listed above (Please specify) _____
- Not sure
- Prefer not to answer

Answer the next 3 questions considering Parent / Guardian 2 that your child currently lives with most of the time. (if applicable)

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Stepfather |
| <input type="checkbox"/> Father | <input type="checkbox"/> Grandparent |
| <input type="checkbox"/> Stepmother | <input type="checkbox"/> Legal guardian |

- Relative (e.g. Aunt/Uncle)
- Sibling
- Foster Parent
- Not Sure
- Friend(s)
- Prefer not to answer
- A person not listed above (please specify) _____

Please check the highest level of education Parent / Guardian 2 completed. (Select one answer only)

- Did not complete any formal education
- Elementary School
- High School
- Apprenticeship
- College
- University
- Not Sure
- Prefer not to answer

What is Parent / Guardian 2's employment status? (Select one answer only)

- Works full-time
- Works part-time
- Self-employed (for example, has own business)
- Looking for work
- Stay-at-home parent/guardian
- Parental leave

- Retired
- Employment status not listed above (Please specify)
- Not Sure
- Prefer not to answer

Answer the next 3 questions considering Parent / Guardian 3 that your child currently lives with most of the time. (if applicable)

- | | |
|---|---|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Foster Parent |
| <input type="checkbox"/> Father | <input type="checkbox"/> Friend(s) |
| <input type="checkbox"/> Stepmother | <input type="checkbox"/> A person not listed above (please specify) _____ |
| <input type="checkbox"/> Stepfather | <input type="checkbox"/> Sibling |
| <input type="checkbox"/> Grandparent | <input type="checkbox"/> Not Sure |
| <input type="checkbox"/> Legal guardian | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> Relative (e.g. Aunt/Uncle) | |

Please check the highest level of education Parent / Guardian 3 completed. (Select one answer only)

- Did not complete any formal education
- Elementary School
- High School
- Apprenticeship
- College
- University
- Not Sure

Prefer not to answer

What is Parent / Guardian 3's employment status? (Select one answer only)

- Works full-time
- Works part-time
- Self-employed (for example, has own business)
- Looking for work
- Stay-at-home parent/guardian
- Parental leave
- Retired
- Employment status not listed above (Please specify) _____
- Not sure
- Prefer not to answer

Answer the next 3 questions considering Parent / Guardian 4 that your child currently lives with most of the time. (if applicable)

- | | |
|---|---|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Foster Parent |
| <input type="checkbox"/> Father | <input type="checkbox"/> Friend(s) |
| <input type="checkbox"/> Stepmother | <input type="checkbox"/> A person not listed above (please specify) _____ |
| <input type="checkbox"/> Stepfather | <input type="checkbox"/> Sibling |
| <input type="checkbox"/> Grandparent | <input type="checkbox"/> Not Sure |
| <input type="checkbox"/> Legal guardian | <input type="checkbox"/> Prefer not to answer |
| <input type="checkbox"/> Relative (e.g. Aunt/Uncle) | |

Please check the highest level of education Parent / Guardian 4 completed. (Select one answer only)

- Did not complete any formal education
- Elementary School
- High School
- Apprenticeship
- College
- University
- Not Sure
- Prefer not to answer

What is Parent / Guardian 4's employment status? (Select one answer only)

- Works full-time
- Works part-time
- Self-employed (for example, has own business)
- Looking for work
- Stay-at-home parent/guardian
- Parental leave
- Retired
- Employment status not listed above (Please specify) _____
- Not sure
- Prefer not to answer

Reflection

At your child's school, do you see your child's identity reflected positively in:

	Never	Rarely	Sometimes	Often	Consistently
Pictures, posters or displays of student work					
Materials educators use in class (e.g., books, videos)					
Topics studied in class					
Extra-curricular activities (e.g., sports, arts, activities, clubs)					
Special events and celebrations					

How do you feel about your child's school?

	Strongly disagree	Somewhat disagree	Neither agree not disagree	Somewhat agree	Strongly agree
Your child feels like they belong in the school					
Your child feels accepted by other students in the school					
Your child feels accepted by the adults in the school					
Your child feels the teachers care about them					
Your child gets the help they need to do well					

Please use this space to share with us any information we should know about your child towards enhancing their success and well-being within the Windsor-Essex Catholic District School Board.