



## **PVNC Demographic Survey for Students in Grades K - 6**

Your participation in the Every Student Counts Student Census is important to us in order to better learn about and serve our school board community.

The data we gather provides insights on the diverse backgrounds, experiences, and needs of all our students and school communities. Our goal is to bridge opportunity gaps and to narrow achievement gaps, ensuring every student has the pathway to success.

The higher the completion rate, the more reliable the information will be to help us identify and remove systemic barriers.

This confidential survey will take about 15 minutes to complete and is entirely voluntary.

Please complete one survey for each child in your household who attends a PVNC school in grades K through 6.

PVNC Catholic respects the privacy of our students and families. Data will be collected in a secure manner as directed by applicable privacy legislation and best practices.

Reports will never single out or identify a student or family. Data will only be reported in a summarized way to highlight our community's needs.

Translations have been generated automatically by the system software using Google Translate. If you have a concern with a translation, please contact [census@pvnccdsb.on.ca](mailto:census@pvnccdsb.on.ca)

This survey will remain open from Wednesday, January 15, 2025 to Wednesday, January 29, 2025.

Thank you for your participation.

## Privacy and Collection Notice

The Student Census is confidential and voluntary, but not anonymous. Individual responses, and all personal student and family information will remain strictly confidential, protected under the Municipal Freedom of Information and Protection of Privacy Act. Personal information collected in the PVNC Catholic student census is under the authority of the [Education Act, R.S.O. 1990](#), the [Anti-Racism Act 2017](#), and in accordance with Section [29 \(2\) of the Municipal Freedom of Information and Protection of Privacy Act](#).

PVNC Catholic has entered into agreement with [Qualtrics](#) to distribute our PVNC Catholic Census to students and families online. Data is stored securely with [Qualtrics](#) and on internal PVNC Catholic servers and will only be accessed by a small number of staff in order to analyze the data. Reports will never single out or identify a student or family. Data will only be reported in a summarized way to highlight our community's needs.

**1. What is your email address? Please enter the email that is registered with PVNC's Parent Portal.**

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**2. Please enter the full name of the child for whom you are completing this survey.**

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**3. What grade is your child in?**

- ☐ K
- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6

**4. Which elementary school does your child attend?** \_\_\_\_\_

**5. What is the first language(s) your child learned to speak? Select all that apply.**

*Note: The alphabetical list provided has been adapted from the list of most common languages from the 2016 Canadian Census.*

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

**6. Does your child identify as First Nations, Métis and / or Inuit? Select all that apply.**

*Note: First Nations includes Status and Non-Status.*

- ☐ No
- ☐ Yes, First Nations
- ☐ Yes, Métis
- ☐ Yes, Inuit
- ☐ Yes, not listed here. Please specify: \_\_\_\_\_
- ☐ I prefer not to answer

**7. Does your child consider themselves a Canadian?**

- ☐ Yes
- ☐ No
- ☐ Not sure

**8. What is your child's ethnic or cultural origin(s)? Select all that apply.**

*Ethnic origin refers to a person's ethnic or cultural origins. Ethnic groups have a common identity, heritage, ancestry or historical past, often with identifiable cultural, linguistic and / or religious characteristics. The list provided is based on the most common ethnic origins from the 2016 Canadian Census.*

- |  |                                      |   |
|--|--------------------------------------|---|
| <input type="checkbox"/> American      | <input type="checkbox"/> Greek       | <input type="checkbox"/> Romanian                     |
| <input type="checkbox"/> Arab          | <input type="checkbox"/> Guyanaian   | <input type="checkbox"/> Russian                      |
| <input type="checkbox"/> Austrian      | <input type="checkbox"/> Hungarian   | <input type="checkbox"/> Scottish                     |
| <input type="checkbox"/> Belgian       | <input type="checkbox"/> Inuit       | <input type="checkbox"/> South Indian                 |
| <input type="checkbox"/> Canadian      | <input type="checkbox"/> Iraqi       | <input type="checkbox"/> Spanish                      |
| <input type="checkbox"/> Chinese       | <input type="checkbox"/> Irish       | <input type="checkbox"/> Swedish                      |
| <input type="checkbox"/> Colombian     | <input type="checkbox"/> Italian     | <input type="checkbox"/> Swiss                        |
| <input type="checkbox"/> Croatian      | <input type="checkbox"/> Jamaican    | <input type="checkbox"/> Syrian                       |
| <input type="checkbox"/> Danish        | <input type="checkbox"/> Korean      | <input type="checkbox"/> Trinidadian                  |
| <input type="checkbox"/> Dutch         | <input type="checkbox"/> Lebanese    | <input type="checkbox"/> Ukrainian                    |
| <input type="checkbox"/> East Indian   | <input type="checkbox"/> Maltese     | <input type="checkbox"/> Vietnamese                   |
| <input type="checkbox"/> English       | <input type="checkbox"/> Métis       | <input type="checkbox"/> Welsh                        |
| <input type="checkbox"/> Filipino      | <input type="checkbox"/> Nigerian    | <input type="checkbox"/> West Indian                  |
| <input type="checkbox"/> First Nations | <input type="checkbox"/> Norwegian   | <input type="checkbox"/> Ethnic origin(s) not listed. |
| <input type="checkbox"/> French        | <input type="checkbox"/> Palestinian | Please specify: _____                                 |
| <input type="checkbox"/> German        | <input type="checkbox"/> Polish      | <input type="checkbox"/> I prefer not to answer       |
| <input type="checkbox"/> Ghanaian      | <input type="checkbox"/> Portuguese  |   |

**9. In our society, people are often described by their race or racial background. Which racial group(s) best describes your child? Select all that apply.**

- ☐ Black (African, Afro-Caribbean, African-Canadian descent)
- ☐ East Asian (Chinese, Korean, Japanese, Taiwanese descent)
- ☐ Indigenous (First Nations, Métis, Inuit descent)
- ☐ Latino / Latina / Latinx (Latin American, Hispanic descent)
- ☐ Middle Eastern (Arab, Persian, West Asian descent, e.g. Afghan, Egyptian, Iranian, Lebanese, Turkish, Kurdish, etc.)
- ☐ South Asian (South Asian descent, e.g. East Indian, Pakistani, Bangladeshi, Sri Lankan, Indo-Caribbean, etc.)
- ☐ Southeast Asian (Filipino, Vietnamese, Cambodian, Thai, Indonesian, other Southeast Asian descent)
- ☐ White (European descent)
- ☐ A racial group(s) not listed above. Please specify: \_\_\_\_\_
- ☐ I prefer not to answer

**10. What religion, creed, spirituality and / or belief(s) do your child identify with? Select all that apply.**

*Religion, creed, spirituality and / or belief(s) refer to an individual's self-identification or affiliation with any religious denomination, group, or other religiously-defined community or system of belief and / or spiritual faith practices (modified from the Data Standards for the Identification and Monitoring of Systemic Racism). The list of answer choices has also been adapted from the Data Standards. Additional religions, creeds, spiritualities and beliefs have been added based on answer choices from a variety of other sources.*

- |  |  |
|--|--|
| <input type="checkbox"/> Agnosticism                 | <input type="checkbox"/> Scientology   |
| <input type="checkbox"/> Atheism                     | <input type="checkbox"/> Secular Spirituality  |
| <input type="checkbox"/> Bahá'í                      | <input type="checkbox"/> Sikhism   |
| <input type="checkbox"/> Buddhism                    | <input type="checkbox"/> Unitarian Universalism  |
| <input type="checkbox"/> Christianity - Catholic     | <input type="checkbox"/> Wicca   |
| <input type="checkbox"/> Christianity - non-Catholic | <input type="checkbox"/> Zoroastrianism  |
| <input type="checkbox"/> Church of Christ, Scientist | <input type="checkbox"/> Religion, creed, system of belief or spirituality not listed above. Please specify: _____ |
| <input type="checkbox"/> Hinduism                    | <input type="checkbox"/> My child does not identify with any religion, creed, system of belief or spirituality     |
| <input type="checkbox"/> Humanism                    | <input type="checkbox"/> Not sure  |
| <input type="checkbox"/> Indigenous Spirituality     | <input type="checkbox"/> I do not understand this question   |
| <input type="checkbox"/> Islam                       | <input type="checkbox"/> I prefer not to answer  |
| <input type="checkbox"/> Jainism                     |  |
| <input type="checkbox"/> Judaism                     |  |
| <input type="checkbox"/> Rastafarianism              |  |

11. *Some people identify as having a disability because of a permanent or long-term health condition that makes it difficult for them to function in an environment that is not fully inclusive and accessible.*

*A person's disability may be diagnosed or not diagnosed. It may be hidden or visible. Some students who have disabilities may have a special plan at school to help them (an Individual Education Plan or IEP), but some do not.*

**Does your child consider themselves to be a person with a disability(ies)? Select one answer only.**

- ☐ Yes
- ☐ No
- ☐ Not sure
- ☐ I do not understand this question
- ☐ I prefer not to answer

12. **You indicated that your child considers themselves to be a person with a disability. What is the nature of their disability? Select all that apply.**

- ☐ Addiction(s)
- ☐ ADHD (Attention-deficit / hyperactivity disorder)
- ☐ Autism Spectrum Disorder
- ☐ Blind or low vision (not corrected by glasses)
- ☐ Chronic health condition (e.g., asthma, chronic pain, cystic fibrosis, diabetes, epilepsy, spina bifida)
- ☐ Deaf or hard of hearing
- ☐ Developmental disability(ies)
- ☐ Learning disability(ies) (e.g. dysgraphia, dyslexia, non-verbal, information processing, memory)
- ☐ Mental health disability(ies) (e.g. anxiety, depression, OCD, ODD, PTSD)
- ☐ Mobility (movement)
- ☐ Pain
- ☐ Physical disability(ies) (e.g., cerebral palsy, muscular dystrophy, spinal cord injury)
- ☐ Speech impairment / disability
- ☐ Any disability(ies) not listed above (please specify): \_\_\_\_\_
- ☐ I prefer not to answer

13. **Was your child born in Canada?**

- ☐ Yes
- ☐ No

**14. 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
- ☐ I do not understand this question
- ☐ I prefer not to answer

**15. The next questions are about your child's parent(s) / guardian(s). Please answer to the best of your knowledge.**

**How many adults does your child live with who take care of them?**

- ☐ One
- ☐ Two
- ☐ Three
- ☐ Four
- ☐ I prefer not to answer

**16. Answer the next four questions considering Parent / Guardian 1 that your child currently lives with.**

**Please select your child's relation with this person. Select one answer only.**

- ☐ Mother
- ☐ Father
- ☐ Stepmother
- ☐ Stepfather
- ☐ Grandparent
- ☐ Relative (Aunt / Uncle / Sibling)
- ☐ Guardian
- ☐ Foster Parent
- ☐ Friend
- ☐ A person not listed above (please specify): \_\_\_\_\_

**17. Please select 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

**18. What is Parent / Guardian 1's employment status? Select all that apply.**

- ☐ Works full-time
- ☐ Works part-time
- ☐ Self-employed (for example, has own business)
- ☐ Looking for work
- ☐ Stay-at-home parent / guardian
- ☐ Retired
- ☐ Not Sure

**19. What is Parent / Guardian 1's job or occupation?**

- ☐ Job or Occupation: \_\_\_\_\_
- ☐ Not Sure

**20. Answer the next four questions considering Parent / Guardian 2 that your child currently lives with.**

**Please select your child's relation with this person. Select one answer only.**

- ☐ Mother
- ☐ Father
- ☐ Stepmother
- ☐ Stepfather
- ☐ Grandparent
- ☐ Relative (Aunt / Uncle / Sibling)
- ☐ Guardian
- ☐ Foster Parent
- ☐ Friend
- ☐ A person not listed above (please specify): \_\_\_\_\_

**21. Please select 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



**22. What is Parent / Guardian 2's employment status? Select all that apply.**

- ☐ Works full-time
- ☐ Works part-time
- ☐ Self-employed (for example, has own business)
- ☐ Looking for work
- ☐ Stay-at-home parent / guardian
- ☐ Retired
- ☐ Not Sure

**23. What is Parent / Guardian 2's job or occupation?**

- ☐ Job or Occupation: \_\_\_\_\_
- ☐ Not Sure

**24. Answer the next four questions considering Parent / Guardian 3 that your child currently lives with.**

**Please select your child's relation with this person. Select one answer only.**

- ☐ Mother
- ☐ Father
- ☐ Stepmother
- ☐ Stepfather
- ☐ Grandparent
- ☐ Relative (Aunt / Uncle / Sibling)
- ☐ Guardian
- ☐ Foster Parent
- ☐ Friend
- ☐ A person not listed above (please specify): \_\_\_\_\_

**25. Please select 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

**26. What is Parent / Guardian 3's employment status? Select all that apply.**

- ☐ Works full-time
- ☐ Works part-time
- ☐ Self-employed (for example, has own business)
- ☐ Looking for work
- ☐ Stay-at-home parent / guardian
- ☐ Retired
- ☐ Not Sure

**27. What is Parent / Guardian 3's job or occupation?**

- ☐ Job or Occupation: \_\_\_\_\_
- ☐ Not Sure

**28. Answer the next four questions considering Parent / Guardian 4 that your child currently lives with.**

**Please select your child's relation with this person. Select one answer only.**

- ☐ Mother
- ☐ Father
- ☐ Stepmother
- ☐ Stepfather
- ☐ Grandparent
- ☐ Relative (Aunt / Uncle / Sibling)
- ☐ Guardian
- ☐ Foster Parent
- ☐ Friend
- ☐ A person not listed above (please specify): \_\_\_\_\_

**29. Please select 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

**30. What is Parent / Guardian 4's employment status? Select all that apply.**

- ☐ Works full-time
- ☐ Works part-time
- ☐ Self-employed (for example, has own business)
- ☐ Looking for work
- ☐ Stay-at-home parent / guardian
- ☐ Retired
- ☐ Not Sure

**31. What is Parent / Guardian 4's job or occupation?**

- ☐ Job or Occupation: \_\_\_\_\_
- ☐ Not Sure

**32. How often has your child experienced discrimination at school as a result of:**

	Always	Very Often	Sometimes	Rarely	Never	I do not know
Indigenous identity (First Nations, Métis, and / or Inuit)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Race	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ethnic origin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gender identity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
First Language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Socio-economic status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Religion or spiritual affiliation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Status in Canada (e.g. refugee, landed immigrant)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other reasons (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**33. Has your child experienced any of the following at school? Select all that apply.**

- ☐ Your child's name has been repeatedly mispronounced
- ☐ Your child has been ridiculed about their name
- ☐ Your child has been ridiculed about the way they dress or about their hair
- ☐ Your child has been ridiculed about the food they bring to school
- ☐ Your child has been disciplined more frequently or severely than their peers who have engaged in similar behaviour
- ☐ Your child has been asked to provide their opinion or perspective based on their identity (e.g. race, Indigenous identity)
- ☐ Other, please describe: \_\_\_\_\_
- ☐ My child has not experienced any of these

**34. At school, my child feels that they are able to:**

	Strongly Agree	Agree	Disagree	Strongly Disagree	I do not know	I prefer not to answer
express their identity (e.g. race, gender identity)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
learn about their identity (e.g. race, gender identity)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
learn about other identities (e.g. race, gender identity)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**35. In school, my child sees themselves / their identity reflected positively in:**

	Always	Very Often	Sometimes	Rarely	Never	I do not know
events and celebrations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
extra-curricular activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
images (posters, pictures, murals, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
issues discussed in the classroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
learning materials (books, videos, internet content, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

lessons	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**36. My child has an opportunity to learn about authors, characters, scientists, historical figures at school who have an identity different from their own, such as the following. Select all that apply.**

- ☐ Disability
- ☐ Ethnic origin
- ☐ Gender identity
- ☐ Indigenous identity (First Nations, Métis, and / or Inuit)
- ☐ Race
- ☐ Religion or spiritual affiliation
- ☐ Sexual orientation
- ☐ Socio-economic status
- ☐ Status in Canada (e.g. refugee, landed immigrant)
- ☐ None of the above

**37. In my child's school, I feel comfortable to:**

	Strongly Agree	Agree	Disagree	Strongly Disagree	I do not know	I prefer not to answer
meet with my child's teacher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
meet with my child's principal or vice principal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
participate on school council	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
volunteer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
attend school events for families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your response has been recorded. Thank you!

Responses will be summarized and shared with the PVNC Catholic community for the purpose of identifying and removing systemic barriers.

Reports will never single out or identify a student or family.