

# ICLT Teacher Survey

Information, Communication & Learning Technologies

**Name:** *Confidential*

**Name for  
publication:**

**Age bracket:**

Under 21	<input type="checkbox"/>
21-34	<input type="checkbox"/>
34-55	<input type="checkbox"/>
55+	<input type="checkbox"/>

**Teaching  
experience:**

Less 1 yr	<input type="checkbox"/>
2-5 yrs	<input type="checkbox"/>
6-20 yrs	<input type="checkbox"/>
21+ yrs	<input type="checkbox"/>

**Gender:**

Male	<input type="checkbox"/>
Female	<input type="checkbox"/>

**Position:**

Classroom teacher	<input type="checkbox"/>
H/T or Coordinator	<input type="checkbox"/>
Deputy/Dean	<input type="checkbox"/>
Headmaster/Principal	<input type="checkbox"/>

**School Type:**

State	<input type="checkbox"/>
Private	<input type="checkbox"/>
Catholic	<input type="checkbox"/>

**School:**

*Confidential*

**Faculty:**

**My attitude to  
computers:**

Enthusiastic zealot	<input type="checkbox"/>
Positive and keen	<input type="checkbox"/>
Interested but cautious	<input type="checkbox"/>
Ambivalent and hesitant	<input type="checkbox"/>
Resistant	<input type="checkbox"/>

**My current  
ICLT  
Competency:**

Expert	<input type="checkbox"/>
Advanced	<input type="checkbox"/>
Intermediate	<input type="checkbox"/>
Basic	<input type="checkbox"/>
Minimal	<input type="checkbox"/>

**Comments or suggestion for Integrating ICT Across the curriculum:**

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## ICLT Activity Evaluation

<b>Date:</b>		<b>Evaluator:</b>	
<b>Subject:</b>		<b>Stage:</b>	
<b>Activity Name:</b>			
<b>Objective:</b>			

**The activity is:**

*Strongly*

*Agree*

*Agree*

*Neutral*

Disagree

*Strongly*

*Disagree*

Well aligned with the Geography syllabus.

One students should easily follow.

Well aligned with the ICT competency requirements.

Something a teacher could use.

**The activity needs to be:**

Shorter

*Longer*

*OK as is*

Further training.

In-class  
support  
from an  
ICT  
speciali  
st

Phone  
support  
during  
class  
time

E-mail  
support  
during  
class  
time

No  
support  
needed

**If I was to use this activity I would need:**

**I estimate this activity would need:**

## Lessons on computers

**Comments & suggestions:**

[illegible]

ICLT teacher preferences for: \_\_\_\_\_ (name)

*Information, Communications and Learning Technologies (ICLT) have assumed a focal role in our schools. Teachers are expected to up-skill in these areas.*

Where would you prefer that ICLT professional learning take place?

School ☐ Off-site ☐ University ☐ TAFE ☐ At-home ☐ Other(specify):

What length of learning session would you prefer?

1-2 hr ☐ ½ day ☐ Full day ☐ 1 week ☐ Flexible ☐ Other(specify):

When would you prefer learning be available?

School hours ☐ After school ☐ Evening ☐ Weekend ☐ Holidays ☐ Other(specify):

Who would you prefer construct and conduct the learning?

Self ☐ Expert teacher ☐ Faculty ☐ Institution ☐ DET/AIS ☐ Other(specify):

What level of professional learning do you prefer?

Resources ☐ Workshop ☐ Short course ☐ AQF Certificate ☐ Post-Graduate Diploma ☐ Second Degree ☐ Masters ☐ Other(specify):

Whose responsibility is ICLT professional learning?

Self ☐ Faculty ☐ H/T Coordinator ☐ School Executive ☐ Employer body ☐ Government ☐ Other(specify):

Who has the greatest need for ICLT professional learning?

Commencing teachers ☐ Experienced teachers ☐ Other(specify):

Classroom teachers ☐ School Executive ☐

Male teachers ☐ Female teachers ☐

What ICT skill level should a classroom teacher possess?

Basic ☐ Intermediate ☐ Advanced ☐ Expert ☐ Other(specify):

ICT professional learning should be:

Voluntary ☐ Prescribed ☐ Other(specify):

In your opinion, what is the BEST way to integrate ICT across the curriculum?

Subject teacher ☐ Specialist ICT teacher ☐ Team (Subject/ICT Specialist) ☐ Other(specify):

What form of support is required to support classroom teachers in an ICT classroom?

Training ☐ Specialist ICT teacher ☐ IT expert ☐ Other(specify):

What form of in-classroom support is best? **(Please rank).**

On-call ICT teacher \_\_\_\_ On-call IT expert \_\_\_\_ Telephone support \_\_\_\_ Email support \_\_\_\_ Other(specify):

What form of student activities do you prefer?

Single-lesson ☐ Short (1-3 lesson) ☐ Extended project-based ☐ Other(specify):

What form of teaching/learning best supports ICT lesson?

Teacher Directed ☐ Student-Centred ☐ Combination of teacher/student-centred ☐ Other(specify):

What percentage of time should students spend on learning. **(Total to 100%)**

As individual: \_\_\_\_\_ in pairs: \_\_\_\_\_ small group: \_\_\_\_\_ large groups: \_\_\_\_\_ whole class: \_\_\_\_\_

Other(specify):

[illegible]