



Group Work Questionnaire

You are being asked to participate in this group work evaluation study, the purpose of which is to identify some important factors that affect group work effectiveness. Each student enrolled in the course, Biomimicry: Innovation Inspired by Nature, is being requested to complete this questionnaire. The questionnaire requests specific information concerning your involvement in group work for this course.

While your participation is completely voluntary and **WILL NOT INFLUENCE YOUR GRADE** for this course, it will be of great value to my understanding of group dynamics and for the evolution of group work exercises used in future offerings of this course. Your feedback and insights are important to me. Please read each question carefully, and respond as accurately and candidly as you can. All responses will be held in the **strictest confidence**. No information regarding the specific responses of group members or individual groups will be reported or otherwise disseminated.

To help ensure confidentiality, please do **NOT** write your name on the questionnaire. When you have completed the questionnaire, please **seal it** in the envelope provided and return it to me. If you elect not to participate, please seal the questionnaire in the envelope and return it to me. The questionnaire should take no more than 15 minutes.

Thank you for filling out this questionnaire.

Cindy Gilbert

1. How were decisions made in your group? Please **check all of the statements with which you agree.**

vote

one person usually made the decision and the others agreed to it.

decision making tool (i.e., coin toss, rocks-paper-scissors, etc).

other (please describe: _____)

2. Prior to taking this class, how many significant group projects (worth 25% of your final grade or more) do you estimate that you have participated in (only include academic classroom coursework; not clubs, sports, etc.)?

0-2

3-5

6-9

10-14

more than 14

3. Prior to taking this class, how many oral presentations have you made (only include academic classroom coursework; not clubs, sports, etc.)?

0-2

3-5

6-9

10-14

more than 14

4. I participate in group/team work outside of academic classes (e.g., sports, committees). (Circle your answer)

Yes

No

5. College classes should require significant group projects (worth 25% of final grade or more). (Circle your answer).

1) Strongly agree

2) Agree

3) Neither agree nor disagree

4) Disagree

5) Strongly disagree

6. Please indicate your comfort level with the following learning/Instruction styles.

Preferred learning styles	Not at all comfortable	Somewhat comfortable	Mostly comfortable	Completely comfortable
Team-based research projects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independent research projects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning independently by reading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning by constructing models	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Examining/evaluating case studies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning by listening to a lecture	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning through "hands-on" experiences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Project-based learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer coaching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Journaling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
One-on-one mentoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working on a research project designed by someone else	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please specify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Please check the appropriate box to indicate the level of skill or experience you have with each of the following compared with your peers.

Topic	Current skill level				
	None	Less than average	Average	Slightly above average	Well above average
Communicating about science to an audience of peers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Translating scientific articles for a non-scientific audience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communicating your ideas visually (art, photography, drawing, painting, graphics, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Making oral presentations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leading discussions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working on interdisciplinary research teams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conducting literature-based research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conducting internet-based research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Listening to others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Brainstorming ideas with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Monitoring group participation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Working in cooperative learning groups or student teams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Because of my skills and experience, I am good at group work. (Circle your answer).

- 1) Strongly agree
- 2) Agree
- 3) Neither agree nor disagree
- 4) Disagree
- 5) Strongly disagree

9. Below, I have listed 7 statements reflecting attitudes about working in groups or behaviors that reflect such attitudes. In the blank beside the statement, please **enter the number from the scale below that best represents how strongly you agree.**

1-----2-----3-----4-----5

strongly disagree

strongly agree

_____ In group discussions, I always tried to participate.

_____ I feel that I would be able to work well in any group.

_____ Cooperation among all group members was necessary for us to accomplish our objectives.

_____ In our group, my contributions were taken seriously.

_____ I was expected to make an equal effort toward our group project as all other group members.

_____ I took on the role of facilitator to move ideas forward or to relieve frustrations.

_____ At times, I purposefully did not participate in group discussions.

10. In your opinion, how do the following behaviors influence a team's ability to be productive? In the blank beside each statement, please **rank the order of influence (1=highest; 7=lowest).**

_____ Members that express their ideas clearly and listen well.

_____ Members that have strong leaders.

_____ Groups that are good at brainstorming.

_____ Members that do what they are told to do.

_____ Groups that divide the work and members work by themselves.

_____ Members that are creative.

_____ Groups that get along well.

11. How has your participation in this final group project affected you personally and academically? Please **circle the point on each scale that best represents how strongly you agree.**

a. I have gained a great deal of satisfaction from participating in group activities.

1-----2-----3-----4-----5

strongly disagree

strongly agree

b. My participation in group activities throughout this course has had a positive impact on my education.

1-----2-----3-----4-----5

strongly disagree

strongly agree

12. Given the option, I would prefer to work on a project independently rather than in a group.
(Circle your answer).

Yes

No

Now, please answer a few questions about yourself. Again, your responses to these and all other questions on this survey will remain confidential.

13. Are you: _____ Female _____ Male

14. Please **check the blank beside the statement that best approximates your level of education:**

_____ non-degree

_____ sophomore

_____ junior

_____ senior

_____ graduate – 1st year

_____ graduate – 2nd year

_____ graduate – 3rd year

15. What is your age in years as of your last birthday? _____ Years.

Thank you for participating in this survey.

Please seal the questionnaire in the envelope provided and return it to Cindy Gilbert.