

Longitudinal Study of AmeriCorps Phase III

AmeriCorps Comparison Survey

Hello. My name is _____. I'm calling on behalf of AmeriCorps. When you inquired about AmeriCorps, you became part of an important long-term study of AmeriCorps. This study will help us understand what happens to people after their involvement in AmeriCorps. You may remember filling out a questionnaire from Abt Associates, a research firm in Cambridge MA, when you started the program. We have contacted you several times since then. We would like to find out what has happened to you more recently. Although participation in the interview is voluntary, your opinion is very important to us. What you tell us will be kept confidential. The interview will take about 45 minutes, and we will send you a check for \$35 as a token of our appreciation for completing the interview. May we continue with the interview?

Interview Log Response

- Yes
- No

Part I: Phase III Survey

PRIME: I would like to begin by asking you about your current experiences.

1. How do you spend most of your time now? (READ LIST, CODE ALL THAT APPLY)

	Yes	No	ENTER CODE FOR OCCUPA TION (1a)	ENTER CODE FOR FIELD (1b)	What year did you begin this activity? (1c)
a. Working	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
IF YES: Is this full-time or- part time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time			
IF NO: Are you looking for work?	<input type="checkbox"/>	<input type="checkbox"/>			
b. Enlisted in military service	<input type="checkbox"/>	<input type="checkbox"/>			_____
c. Enlisted in National Guard/Reserve	<input type="checkbox"/>	<input type="checkbox"/>			_____
IF YES: Is this full-time or- part time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time			
d. Participating in AmeriCorps?	<input type="checkbox"/>	<input type="checkbox"/>		_____	_____
IF YES: Is this full-time or- part time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time			
e. Participating in national service or volunteer work, for example Peace Corps, faith-based volunteer service, etc.	<input type="checkbox"/>	<input type="checkbox"/>		_____	_____
IF YES: is this full-time or part-time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time			
f. Attending school	<input type="checkbox"/>	<input type="checkbox"/>		_____	_____
IF YES: Is this full-time or part-time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time			
What type of school are you attending:					
Two-year community college	<input type="checkbox"/>	<input type="checkbox"/>			
Technical school or apprenticeship program	<input type="checkbox"/>	<input type="checkbox"/>			
A four-year college	<input type="checkbox"/>	<input type="checkbox"/>			
A graduate or professional school	<input type="checkbox"/>	<input type="checkbox"/>			
g. Taking care of my children/parents at home	<input type="checkbox"/>	<input type="checkbox"/>			_____
IF YES: Is this full-time or part-time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time			
h. Retired	<input type="checkbox"/>	<input type="checkbox"/>			_____
i. Dealing with personal health problems	<input type="checkbox"/>	<input type="checkbox"/>			_____
j. Other (SPECIFY)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

- 1a. IF WORKING: What do you do? PROBE: What occupation is it? (IF NECESSARY, PROBE BY READING LIST BELOW. ENTER CORRESPONDING CODE FOR OCCUPATION)

CODES FOR 1a (Occupation):

1. Management Occupations
2. Business and Financial Operations Occupations
3. Computer and Mathematical Occupations
4. Architecture and Engineering Occupations
5. Life, Physical, and Social Science Occupations
6. Community and Social Services Occupations
7. Legal Occupations
8. Education, Training, and Library Occupations
9. Arts, Design, Entertainment, Sports, and Media Occupations
10. Healthcare Practitioners and Technical Occupations
11. Healthcare Support Occupations
12. Protective Service Occupations
13. Food Preparation and Serving Related Occupations
14. Building and Grounds Cleaning and Maintenance Occupations
15. Personal Care and Service Occupations
16. Sales and Related Occupations
17. Office and Administrative Support Occupations
18. Farming, Fishing, and Forestry Occupations
19. Construction and Extraction Occupations
20. Installation, Maintenance, and Repair Occupations
21. Production Occupations
22. Transportation and Material Moving Occupations
23. Military Specific Occupations

- 1b. FOR EACH ACTIVITY CODED “YES,” ASK: In what field? (IF NECESSARY, PROBE BY READING LIST BELOW. ENTER CORRESPONDING CODE FOR FIELD FOR EACH ACTIVITY in Q.1)

CODES FOR 1b (Field):

- | | |
|------------------------------------------|------------------------------------------------------|
| 1. Accounting | 27. Legal admin |
| 2. Administrative/clerical | 28. Manufacturing |
| 3. Agriculture/farming | 29. Marketing |
| 4. Arts (visual dance music performance) | 30. Media/journalism/newspaper |
| 5. Athletics | 31. Military |
| 6. Automotive | 32. Nonprofit social services |
| 7. Banking/finance | 33. Nurse |
| 8. Biotech/science | 34. Pharmaceutical |
| 9. Business | 35. Professional services |
| 10. Computer/technical/scientific | 36. Public safety/law enforcement |
| 11. Construction | 37. Purchasing/procurement |
| 12. Culinary arts/food service | 38. Real estate |
| 13. Customer service | 39. Religious activities |
| 14. Design | 40. Research |
| 15. Distribution/shipping | 41. Restaurant/food service |
| 16. Engineering | 42. Retail |
| 17. Environmental | 43. Sales |
| 18. Facilities | 44. Skilled trades (masonry, carpentry, electrician) |
| 19. Grocery | 45. Social/community work |
| 20. Health care | 46. Strategy/planning |
| 21. Hospitality/hotel | 47. Teaching children/adults |
| 22. Human resources | 48. Telecommunications |
| 23. Information technology | 49. Training |
| 24. Installation/maintenance/repair | 50. Transportation |
| 25. Insurance | 51. Warehouse |
| 26. Legal | |

1c. What year did you begin this activity?

_____ YEAR

1d. IF WORKING FULL- OR PART-TIME IN Q.1: Is this in the (READ) sector?

Government/public sector

IF YES: Was this in the:

Federal government

State government

Local government

International government

For-profit/Private sector

Non-profit organization (tax-exempt, charitable organization)

Self-employed

IF YES: Was this in the:

Private sector

Non-profit sector

2. In addition to what you are doing now, what else have you been doing since 2000? (CODE ALL THAT APPLY)

	Yes	No	ENTER CODE FOR OCCUPA TION (2a)	ENTER CODE FOR FIELD (2b)	YEARS ACTIVITY TOOK PLACE (2c)
a. Working	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____
IF YES: Is this full-time or- part time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time			
IF NO: Are you looking for work?	<input type="checkbox"/>	<input type="checkbox"/>			
b. Enlisted in military service	<input type="checkbox"/>	<input type="checkbox"/>			_____
c. Enlisted in National Guard/Reserve	<input type="checkbox"/>	<input type="checkbox"/>			_____
If YES: Is this full-time or- part time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time			
d. Participating in AmeriCorps?	<input type="checkbox"/>	<input type="checkbox"/>		_____	_____
If YES: Is this full-time or- part time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time			
e. Participating in national service or volunteer work, for example Peace Corps, faith-based volunteer service, etc.	<input type="checkbox"/>	<input type="checkbox"/>		_____	_____
IF YES: is this full-time or part-time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time			
f. Attending school	<input type="checkbox"/>	<input type="checkbox"/>		_____	_____
If YES: Is this full-time or part-time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time			
What type of school are you attending:					
Two-year community college	<input type="checkbox"/>	<input type="checkbox"/>			
Technical school or apprenticeship program	<input type="checkbox"/>	<input type="checkbox"/>			
A four-year college	<input type="checkbox"/>	<input type="checkbox"/>			
A graduate or professional school	<input type="checkbox"/>	<input type="checkbox"/>			
g. Taking care of my children/parents at home	<input type="checkbox"/>	<input type="checkbox"/>			_____
IF YES: Is this full-time or part-time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time			
h. Retired	<input type="checkbox"/>	<input type="checkbox"/>			_____
i. Dealing with personal health problems	<input type="checkbox"/>	<input type="checkbox"/>			_____
j. Other (SPECIFY)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____

2a. IF WORKING: What did you do? PROBE: What occupation was it? (IF NECESSARY, PROBE BY READING LIST BELOW. ENTER CORRESPONDING CODE FOR OCCUPATION)

CODES FOR 2a (Occupation):

1. Management Occupations
2. Business and Financial Operations Occupations
3. Computer and Mathematical Occupations
4. Architecture and Engineering Occupations
5. Life, Physical, and Social Science Occupations
6. Community and Social Services Occupations
7. Legal Occupations
8. Education, Training, and Library Occupations
9. Arts, Design, Entertainment, Sports, and Media Occupations
10. Healthcare Practitioners and Technical Occupations
11. Healthcare Support Occupations
12. Protective Service Occupations
13. Food Preparation and Serving Related Occupations
14. Building and Grounds Cleaning and Maintenance Occupations
15. Personal Care and Service Occupations
16. Sales and Related Occupations
17. Office and Administrative Support Occupations
18. Farming, Fishing, and Forestry Occupations
19. Construction and Extraction Occupations
20. Installation, Maintenance, and Repair Occupations
21. Production Occupations
22. Transportation and Material Moving Occupations
23. Military Specific Occupations

- 2b. FOR EACH ACTIVITY CODED “YES,” ASK: In what field? (IF NECESSARY, PROBE BY READING LIST BELOW. ENTER CORRESPONDING CODE FOR FIELD FOR EACH ACTIVITY in Q.2)

CODES FOR 2b (Field):

- | | |
|------------------------------------------|------------------------------------------------------|
| 1. Accounting | 27. Legal admin |
| 2. Administrative/clerical | 28. Manufacturing |
| 3. Agriculture/farming | 29. Marketing |
| 4. Arts (visual dance music performance) | 30. Media/journalism/newspaper |
| 5. Athletics | 31. Military |
| 6. Automotive | 32. Nonprofit social services |
| 7. Banking/finance | 33. Nurse |
| 8. Biotech/science | 34. Pharmaceutical |
| 9. Business | 35. Professional services |
| 10. Computer/technical/scientific | 36. Public safety/law enforcement |
| 11. Construction | 37. Purchasing/procurement |
| 12. Culinary arts/food service | 38. Real estate |
| 13. Customer service | 39. Religious activities |
| 14. Design | 40. Research |
| 15. Distribution/shipping | 41. Restaurant/food service |
| 16. Engineering | 42. Retail |
| 17. Environmental | 43. Sales |
| 18. Facilities | 44. Skilled trades (masonry, carpentry, electrician) |
| 19. Grocery | 45. Social/community work |
| 20. Health care | 46. Strategy/planning |
| 21. Hospitality/hotel | 47. Teaching children/adults |
| 22. Human resources | 48. Telecommunications |
| 23. Information technology | 49. Training |
| 24. Installation/maintenance/repair | 50. Transportation |
| 25. Insurance | 51. Warehouse |
| 26. Legal | |
- 2c. FOR EACH ACTIVITY CODED “YES,” ASK: During what years were you doing (ACTIVITY)? (MULTIPLE RESPONSES ALLOWED. Column C allows for multiple stints in nonconsecutive time periods. Probe if necessary.)
- 2d. IF WORKING FULL- OR PART-TIME IN Q.2: Was this in the (READ) sector?

- Government/public sector
IF YES: Was this in the:
 - Federal government
 - State government
 - Local government
 - International government
- For-profit/Private sector
- Non-profit organization (tax-exempt, charitable organization)
- Self-employed
IF YES: Was this in the:
 - Private sector
 - Non-profit sector

3. In 1999 you inquired about an AmeriCorps program. Do you remember how you inquired? (READ LIST IF NECESSARY. CODE ALL THAT APPLY.)

- Contacted program directly
- Went through National AmeriCorps website
- Went through state, local, or program AmeriCorps website
- Called the National AmeriCorps toll-free number
- Learned about it on college campus
- Learned about it at a job fair
- Don't remember
- Other (SPECIFY) _____

4. In 1999 you inquired about an AmeriCorps program. Why didn't you enroll in this program? (CODE ALL THAT APPLY)

- Not interested (GO TO Q4a)
- Wasn't accepted
- Program was full
- My family didn't support it
- I don't remember

4a. IF NOT INTERESTED: Why weren't you interested? (CHECK ALL THAT APPLY)

- Stipend too low
- Application too complicated
- Couldn't make the time commitment
- Not interested in this volunteer service
- Didn't want to move
- Commute too long/ Program was too far away
- Relationship/ family responsibility
- Transportation (Didn't have a car for the AC requirement)
- Took better opportunity
- Did not fit with long-term goals

5. What did you do instead of AmeriCorps? (DO NOT READ LIST. CODE ALL THAT APPLY.)

	Yes	No	ENTER CODE FOR OCCUPATI ON (5a)	ENTER CODE FOR FIELD (5b)
a. Working	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
IF YES: Is this full-time or- part time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time		
IF NO: Looking for work?	<input type="checkbox"/>	<input type="checkbox"/>		
b. Enlisted in military service	<input type="checkbox"/>	<input type="checkbox"/>		
c. Enlisted in National Guard/Reserve	<input type="checkbox"/>	<input type="checkbox"/>		
If YES: Is this full-time or- part time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time		
d. Participated in national service or volunteer work, for example Peace Corps, faith-based volunteer service, etc.	<input type="checkbox"/>	<input type="checkbox"/>		_____
IF YES: Was this full-time or part-time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time		
e. Attending school	<input type="checkbox"/>	<input type="checkbox"/>		_____
If YES: Was this full-time or part-time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time		
What type of school were you attending:				
Two-year community college	<input type="checkbox"/>	<input type="checkbox"/>		
Technical school or apprenticeship program	<input type="checkbox"/>	<input type="checkbox"/>		
A four-year college	<input type="checkbox"/>	<input type="checkbox"/>		
A graduate or professional school	<input type="checkbox"/>	<input type="checkbox"/>		
f. Taking care of my children/parents at home	<input type="checkbox"/>	<input type="checkbox"/>		
IF YES: Was this full-time or part-time?	<input type="checkbox"/> Full-time	<input type="checkbox"/> Part-time		
g. Retired	<input type="checkbox"/>	<input type="checkbox"/>		
h. Dealing with personal health problems	<input type="checkbox"/>	<input type="checkbox"/>		
i. Other (SPECIFY) _____	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

5a. IF WORKING: What did you do? PROBE: What occupation was it? (IF NECESSARY, PROBE BY READING LIST BELOW. ENTER CORRESPONDING CODE FOR OCCUPATION)

CODES FOR 5a (Occupation):

1. Management Occupations
2. Business and Financial Operations Occupations
3. Computer and Mathematical Occupations
4. Architecture and Engineering Occupations
5. Life, Physical, and Social Science Occupations
6. Community and Social Services Occupations
7. Legal Occupations
8. Education, Training, and Library Occupations
9. Arts, Design, Entertainment, Sports, and Media Occupations
10. Healthcare Practitioners and Technical Occupations
11. Healthcare Support Occupations
12. Protective Service Occupations
13. Food Preparation and Serving Related Occupations
14. Building and Grounds Cleaning and Maintenance Occupations
15. Personal Care and Service Occupations
16. Sales and Related Occupations
17. Office and Administrative Support Occupations
18. Farming, Fishing, and Forestry Occupations
19. Construction and Extraction Occupations
20. Installation, Maintenance, and Repair Occupations
21. Production Occupations
22. Transportation and Material Moving Occupations
23. Military Specific Occupations

- 5b. FOR EACH ACTIVITY CODED “YES,” ASK: In what field? (IF NECESSARY, PROBE BY READING LIST BELOW. ENTER CORRESPONDING CODE FOR FIELD FOR EACH ACTIVITY in Q.5)

CODES FOR 5b (Field):

- | | |
|------------------------------------------|------------------------------------------------------|
| 1. Accounting | 27. Legal admin |
| 2. Administrative/clerical | 28. Manufacturing |
| 3. Agriculture/farming | 29. Marketing |
| 4. Arts (visual dance music performance) | 30. Media/journalism/newspaper |
| 5. Athletics | 31. Military |
| 6. Automotive | 32. Nonprofit social services |
| 7. Banking/finance | 33. Nurse |
| 8. Biotech/science | 34. Pharmaceutical |
| 9. Business | 35. Professional services |
| 10. Computer/technical/scientific | 36. Public safety/law enforcement |
| 11. Construction | 37. Purchasing/procurement |
| 12. Culinary arts/food service | 38. Real estate |
| 13. Customer service | 39. Religious activities |
| 14. Design | 40. Research |
| 15. Distribution/shipping | 41. Restaurant/food service |
| 16. Engineering | 42. Retail |
| 17. Environmental | 43. Sales |
| 18. Facilities | 44. Skilled trades (masonry, carpentry, electrician) |
| 19. Grocery | 45. Social/community work |
| 20. Health care | 46. Strategy/planning |
| 21. Hospitality/hotel | 47. Teaching children/adults |
| 22. Human resources | 48. Telecommunications |
| 23. Information technology | 49. Training |
| 24. Installation/maintenance/repair | 50. Transportation |
| 25. Insurance | 51. Warehouse |
| 26. Legal | |

PRIME: We are interested in volunteer activities, that is, activities for which people are not paid, except perhaps expenses. We only want you to include volunteer activities that you did through or for an organization, even if you only did them once in a while.

6. In the last 12 months, have you done any volunteer activities through or for an organization?

- Yes (GO TO Q7)
 No

- 6a. IF NO: Sometimes people don't think of activities they do infrequently or activities they do for children's schools or youth organizations as volunteer activities. In the last 12 months have you done any of these types of volunteer activities?

- Yes (GO TO Q7)
 No

- 6b. IF NO: Sometimes people don't think of activities they do through religious organizations as volunteer activities. In the last 12 months have you done any of this type of volunteer activity?

- Yes (GO TO Q7)
 No

6c. IF NO VOLUNTEERING IN PAST 12 MONTHS, INCLUDING FOR SCHOOL OR RELIGIOUS PURPOSES Q.6, Q.6a, and Q6b: In talking to people about volunteering, we often find that a lot of people were not able to volunteer because they did not know how to get involved, or they were sick, or they just didn't have the time. What single most important reason best describes why you haven't performed volunteer service in the last 12 months? (CODE ONE)

- Gave money to donations instead of volunteering time
- Personal schedule too full

- Unable to honor volunteer commitment
- Health problems, physically unable
- No interest
- Took a second job/ need to work more hours
- I already volunteer as much as I can
- My age
- Don't have necessary skills
- Don't have transportation
- People should be paid for their work
- Don't know how to become involved
- No one I know personally asked me
- No organization contacted me and asked me to volunteer
- I've volunteered enough in the past
- My past volunteering experience
- My AmeriCorps experience
- Other (SPECIFY) _____

6d. IF NO VOLUNTEERING IN PAST 12 MONTHS, INCLUDING FOR SCHOOL OR RELIGIOUS PURPOSES Q.6, Q.6a, and Q6b: Were you asked to volunteer?

- Yes, I was asked to volunteer
IF YES: Who asked you to become a volunteer for this organization?
 - Friend
 - Relative
 - Co-worker
 - Someone in the organization/school
 - Boss or employer
 - Someone else (SPECIFY) _____
- No, I was not asked to volunteer

7. How many different organizations have you volunteered through or for in the last 12 months?

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- More than 7 organizations

7a. What is the organization you volunteer for the most?

What organization is it? _____

IF NECESSARY ASK: What type of organization is that? (CODE FROM LIST BELOW.) _____

7b. (ASK IF NECESSARY. DO NOT READ CATEGORIES ALOUD). What type of organization is that? (CODE FROM LIST.)

1. RELIGIOUS ORGANIZATION
 2. CHILDREN'S EDUCATION, SPORTS, OR RECREATIONAL GROUP
 3. OTHER EDUCATIONAL GROUP
 4. SOCIAL AND COMMUNITY SERVICE GROUP
 5. CIVIC ORGANIZATION
 6. CULTURAL OR ARTS ORGANIZATION
 7. ENVIRONMENTAL OR ANIMAL CARE ORGANIZATION
 8. HEALTH RESEARCH OR HEALTH EDUCATION ORGANIZATION
 9. HOSPITAL CLINIC OR HEALTHCARE ORGANIZATION
 10. IMMIGRANT/REFUGEE ASSISTANCE
 11. INTERNATIONAL ORGANIZATION
 12. LABOR UNION, BUSINESS OR PROFESSIONAL ORGANIZATION
 13. POLITICAL PARTY OR ADVOCACY GROUP
 14. PUBLIC SAFETY ORGANIZATION
 15. SPORTS OR HOBBY GROUP
 16. YOUTH SERVICES ORGANIZATION
 17. SOME OTHER TYPE OF ORGANIZATION (ENTER VERBATIM RESPONSE)
-

PRIME: I'm going to ask you some questions about (ORGANIZATION).

8. During how many weeks in the last year did you do volunteer activities for (ORGANIZATION)? (ENTER NUMBER OF WEEKS, 1-52)

Less than one week (GO TO Q10)

_____ # weeks

9. IF MORE THAN ONE WEEK: In those (ENTER NUMBER FROM ABOVE) weeks that you volunteered for (ORGANIZATION), how many hours per week did you do volunteer activities?

Varies

_____ # Hours (1-168)

10. How many hours did you do volunteer activities for (ORGANIZATION) in the last year?

_____ # Hours (1-8736)

11. Now I'm going to ask you about activities you might have done for (ORGANIZATION) in the last year. For each activity that I mention, please tell me—yes or no—whether you did that activity for that organization in the last year. In the last 12 months did you... (IF HELP IS REQUESTED, READ EXAMPLES.)

	Yes	No
a. Coach, referee, or supervise sports teams?	<input type="checkbox"/>	<input type="checkbox"/>
b. Tutor or teach (includes reading to children or adults, assisting teachers, helping with homework or school projects)	<input type="checkbox"/>	<input type="checkbox"/>
c. Mentor youth (includes being a Boy Scout/Girl Scout Leader, Big Brother/Big Sister, or engaging in other mentoring activities)	<input type="checkbox"/>	<input type="checkbox"/>
d. Be an usher, greeter, or minister (includes showing people to their seats, giving directions, handing out programs and other materials)	<input type="checkbox"/>	<input type="checkbox"/>
e. Collect, prepare, distribute, or serve food (includes serving meals in shelters, packaging meals for distribution)	<input type="checkbox"/>	<input type="checkbox"/>
f. Collect, make or distribute clothing, crafts, goods other than food (includes gathering clothes for a clothing drive, producing handmade items such as quilts, collecting furniture)	<input type="checkbox"/>	<input type="checkbox"/>
g. Fundraise or sell items to raise money (includes manning concession booths, working in thrift stores, or at events for which the purpose is to raise money)	<input type="checkbox"/>	<input type="checkbox"/>
h. Provide counseling, medical care, fire/EMS, or protective services?	<input type="checkbox"/>	<input type="checkbox"/>
i. Provide general office services (includes clerical, administrative activities, running errands, manning information booths)	<input type="checkbox"/>	<input type="checkbox"/>
j. Provide professional or management assistance including serving on a board or committee (DOES NOT INCLUDE MEDICAL OR EMERGENCY CARE BUT INCLUDES PROVIDING LEGAL, COMPUTER, OR ACCOUNTING SERVICES)	<input type="checkbox"/>	<input type="checkbox"/>
k. Engage in music, performance, or other artistic activities (includes choir, musical, dance, theatrical performances, fine arts)	<input type="checkbox"/>	<input type="checkbox"/>
l. Engage in general labor; supply transportation for people (includes building, repairing, or cleaning indoors or outdoors, driving school teams to games or practices, driving people to a political rally)	<input type="checkbox"/>	<input type="checkbox"/>
m. Other (SPECIFY) (includes campaigning, registering people to vote, political activities, and any other activities which do not belong in one of the above categories)	<input type="checkbox"/>	<input type="checkbox"/>

12. Which of the activities that you performed did you spend the most time doing for (ORGANIZATION) last year? (INTERVIEWER CAN RE-READ LIST IF NECESSARY.) (CODE FROM ABOVE.)

13. Did you live in the community where you did most of your volunteer activity for (ORGANIZATION)? (CODE ONE)

- Yes, for all of the volunteer activities
- Yes, for most of the volunteer activities
- Yes, for some of the volunteer activities
- No

14. Now I'd like to ask you how you first became a volunteer for (ORGANIZATION). Did you approach the organization yourself, did someone ask you, or did you become involved in some other way?

- Approached the organization
- Was asked
 - IF YES: Who asked you to become a volunteer for this organization?
 - Friend
 - Relative
 - Co-worker
 - Someone in the organization/school
 - Boss or employer
 - Someone else (SPECIFY) _____

- Some other way
 - IF YES: Please describe how you became involved with this organization. (READ LIST IF NECESSARY.)
 - Court-ordered community service
 - Family member's involvement in the organization
 - Friend's, co-worker's, or roommate's involvement in the organization
 - Own involvement in organization/school
 - Public housing requirement
 - Referred to by volunteer organization
 - Responded to public appeal in newspaper/radio/TV/flyer/Internet
 - School requirement
 - Other (SPECIFY) _____ (ENTER VERBATIM RESPONSE)

15.

16.	17.	
18.		
	19.	
	20.	
	21.	
	22.	23.
	24.	
	25.	
26.	27.	
28.	29.	
	30.	
	31.	

32. Which of the activities that you performed did you spend the most time doing for (ORGANIZATION B) last year? (INTERVIEWER CAN RE-READ Are you satisfied with the amount of volunteering you did in the last 12 months?

- Yes (GO TO Q16)
- No

15a. IF NO: What single most important reason best describes why you haven't performed more volunteer service in the last 12 months? (CODE ONE)

- Personal schedule too full
- Unable to honor volunteer commitment
- Health problems, physically unable
- No interest
- Took a second job/ need to work more hours
- Don't know how to become involved
- I already volunteer as much as I can
- My age
- Don't have necessary skills
- Don't have transportation
- People should be paid for their work
- No one I know personally asked me
- No organization contacted me and asked me to volunteer
- I've volunteered enough in the past
- My past volunteering experience
- My AmeriCorps experience
- Other (SPECIFY) _____

33. How likely is it that you will volunteer in the future? Would you say you will... (READ LIST)

34. Definitely be involved in volunteer activities
- Probably be involved in volunteer activities
 - Probably not be involved in volunteer activities
35. In the last 12 months, have you asked your friends, parents, children, or other family members to volunteer with you in any activities? (CODE ONE)
- YES
 - NO (GO TO Q18)
- 17a. IF YES: Have your friends, parents, children, or other family members volunteered with you in any activities because you asked? (CODE ONE)
- YES
 - NO
36. Have you in the last 12 months attended any public meeting in which there was discussion of community affairs? (CODE ONE)
- YES
 - NO (GO TO Q19)
- 18a. IF YES: About how many times in the past twelve months did you do this?
- _____ Number of times
37. Have you in the last 12 months worked with other people in your neighborhood to fix or improve something? (CODE ONE)
- YES
 - NO (GO TO Q20)
- 19a. IF YES: About how many times in the past twelve months did you do this?
- _____ Number
38. Generally speaking, would you say that most people can be trusted or that you can't be too careful in dealing with people?
- Most people can be trusted
 - You can't be too careful in dealing with people

PRIME: Now think about any organizations you have made a donation to in the last 12 months. Charitable organizations include religious or non-profit organizations that help those in need or that serve and support the public interests. They range in size from national organizations like the United Way and the American Red Cross down to local community organizations. They serve a variety of purposes such as religious activity, helping people in need, health care and medical research, education arts, environment, and international aid.

Donations include any gifts of money, assets, or property made directly to the organizations, through payroll deduction, or collected by other means on behalf of the charity. This interview is limited to donations made during the last 12 months.

39. In the last 12 months, did you or anyone in your family donate money, assets, or property with a combined value of more than \$25 to religious or charitable organization? (CODE ONE)
- YES

NO (GO TO Q22)

21a. IF YES: (READ LIST) Please note that some organizations address multiple issues. Please choose only one organization for each donation.

21b. FOR EACH ORGANIZATION DONATED TO: How much did you give to that organization?

a. CODE ALL THAT APPLY.	b. TOTAL DONATION AMOUNT
<input type="checkbox"/> Religious organizations/ purposes	\$
<input type="checkbox"/> Hospital, clinic, healthcare organization, or medical research organizations	\$
<input type="checkbox"/> Children's education, sports, or recreational group	\$
<input type="checkbox"/> Youth and family services	\$
<input type="checkbox"/> Arts, culture, and ethnic awareness	\$
<input type="checkbox"/> International aid or world peace	\$
<input type="checkbox"/> Environmental, conservation, or wildlife conservation	\$
<input type="checkbox"/> Labor union, business, or professional organization	\$
<input type="checkbox"/> Political party, political candidate or advocacy group	\$
<input type="checkbox"/> Public safety organization	\$
<input type="checkbox"/> Social organization	\$
<input type="checkbox"/> Disaster relief	\$
<input type="checkbox"/> Other (SPECIFY) _____	\$

40. In response to Hurricane Katrina, did you donate any of the following to a charity or nonprofit organization? (READ LIST)

	Yes	No
a. Money	<input type="checkbox"/>	<input type="checkbox"/>
b. Blood	<input type="checkbox"/>	<input type="checkbox"/>
c. Time	<input type="checkbox"/>	<input type="checkbox"/>
d. Clothing, food, water or similar supplies	<input type="checkbox"/>	<input type="checkbox"/>
e. Your professional skills (e.g. work with evacuees)	<input type="checkbox"/>	<input type="checkbox"/>
f. Other contribution (SPECIFY)	<input type="checkbox"/>	<input type="checkbox"/>

41. Did you donate any of the following items to a charity or non-profit organization for national or international disaster in the past 12 months? (READ LIST)

	Yes	No
a. Money	<input type="checkbox"/>	<input type="checkbox"/>
b. Blood	<input type="checkbox"/>	<input type="checkbox"/>
c. Time	<input type="checkbox"/>	<input type="checkbox"/>
d. Clothing, food, water or similar supplies	<input type="checkbox"/>	<input type="checkbox"/>
e. Your professional skills	<input type="checkbox"/>	<input type="checkbox"/>
f. Other contribution (SPECIFY)	<input type="checkbox"/>	<input type="checkbox"/>

PRIME: Now I'm going to ask you about voting.

42. Are you currently registered to vote?

- YES
- NO

43. Did you vote in the most recent 2006 state and/or local elections (e.g. November 2006)? (CODE ONE)

- I voted (GO TO Q26)
- I did not vote
- No state/local election (GO TO Q26)

25a. IF NO: In talking to people about elections, we often find that a lot of people were not able to vote because they weren't registered, or they were sick, or they just didn't have the time. Which of the following statements best describe why you did not vote in the 2006 state and/or local elections? (READ LIST. CODE ALL THAT APPLY.)

- Not registered (although 18 years or older)
- I thought about voting, but didn't
- Out of country/state
- I was new to the area/ I just moved
- Elections don't affect me
- Feel vote won't make a difference
- Inconvenient
- Not interested in participating in State/local elections
- My party was not represented
- Other (SPECIFY) _____

44. Did you vote in the 2004 presidential election?

- YES (GO TO Q27)
- NO

26a. IF NO: Which of the following statements best describe why you did not vote in the 2004 presidential election? (READ LIST. CODE ALL THAT APPLY.)

- Not registered (although 18 years or older)
- I thought about voting, but didn't
- Out of country/state
- I was new to the area/ I just moved
- Elections don't affect me
- Feel vote won't make a difference
- Inconvenient
- Not interested in participating in national elections
- My party was not represented
- Other (SPECIFY) _____

PRIME: Now I'm going to ask you HOW OFTEN you do certain things. Please answer if you do these things **never, not very often, sometimes, very often, or always.**

45. How often do you do each of the following? (READ ITEM) Would you say you do this never, not very often, sometimes, very often, or always?

	Never	Not Very Often	Some-Times	Very Often	Always
a. Participate in events such as community meetings, celebrations, or activities in your community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Join organizations that support issues that are important to you.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Write or e-mail newspapers or organizations to voice your views on an issue.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Vote in local elections.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Try to learn as much as you can about candidates or ballot questions before voting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Keep informed about local or national news	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

46. In the last 12 months how often have you ...

	Never	Not very Often	Some-times	Very Often	Always
a. Expressed your opinions using the Internet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Expressed your opinions through radio call-ins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Talked to other people to persuade them to vote for a particular party or candidate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Contacted a government official to express your opinion on a local or national issue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Worked as a volunteer for a political party or candidate running for national, state, or local office	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

28a. In general, how much influence did your (INSERT EXPERIENCE 1999-2000) experience have on your decision to participate in activities like the ones we just discussed? (CODE ONE)

No Influence

A little bit of influence

Some Influence

Quite a bit of influence

A Lot of Influence

47. How often have you been in a group situation with others where you have done the following things? (READ ITEM) Would you say you never do this, do this not very often, sometimes, very often, or always?

	Never	Not Very Often	Sometimes	Very Often	Always
a. You discuss issues and problems and share your ideas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. You involve everyone and avoid favoritism.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. You can disagree and be different from others without fear.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. You take time to work out any conflicts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

48. Please answer how often you do the following. (READ ITEM) Would you say you ... never do this, do this not very often, sometimes, very often, or always?

	Never	Not Very Often	Sometimes	Very Often	Always
a. You try to understand other team members' ideas and opinions before arguing or stating your own.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. You try to present your ideas without criticizing the ideas of others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. You encourage different points of view without worrying about agreement.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. You try to consider all points of view or possible options before forming an opinion or making a decision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. You encourage the participation of other team members and support their right to be heard.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. You help find solutions when unexpected problems arise.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PRIME: Now we are going to switch gears, where I am going to read you some statements. Please answer whether you **strongly disagree, disagree, neither agree nor disagree, agree, or strongly agree.**

49. Thinking of all your voluntary community service or volunteer activities over the past 12 months, please indicate how much you agree with the following statements. (READ ITEM) Would you say you strongly disagree, disagree, neither agree nor disagree, agree, or strongly agree?

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
a. You felt that you made a contribution to the community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. You re-examined your beliefs and attitudes about yourself.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. You were exposed to new ideas and ways of seeing the world.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. You felt like part of a community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. You learned more about the “real” world.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. You felt you made a difference in the life of at least one person.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. You did things you never thought you could do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. You changed some of your beliefs and attitudes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

50. Please indicate how strongly you agree with each of the following statements about your community. (READ ITEM.) Would you say you strongly disagree, disagree, neither agree nor disagree, agree, or strongly agree?

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
a. You have a strong attachment to your community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. You often discuss and think about how larger political and social issues affect your community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. You are aware of what can be done to meet the important needs in your community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. You feel you have the ability to make a difference in your community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. You try to find the time or a way to make a positive difference in your community.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. If people from different backgrounds took the time to understand each other, there wouldn't be so many social problems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Some of your friends are of different backgrounds from you: racial, cultural, ethnic, or language.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Racism affects everyone.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
i. You feel comfortable belonging to groups where people are different from you.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Diverse viewpoints bring creativity and energy to a work group.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Multicultural teams can be stimulating and fun.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. People are more motivated and productive when they feel they are accepted for who they are.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Diversity improves the work of organizations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Diversity brings many perspectives to problem-solving.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. You are comfortable interacting with people from a different racial or ethnic background.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

51. Thinking about your (INSERT EXPERIENCE 1999-2000) experience, please indicate how much you agree with each of the following statements. Would you say you strongly disagree, disagree, neither agree nor disagree, agree, or strongly agree?

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
a. (INSERT EXPERIENCE 1999-2000) had an influence on my commitment to volunteer service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. (INSERT EXPERIENCE 1999-2000) had an influence on my personal and family life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. (INSERT EXPERIENCE 1999-2000) had an influence on my interest in current events and issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

52. On a scale of 1 to 5 where 1 = not very interested and 5 = very interested, how would you describe your **interest** in forming friendships with people who come from a different race or ethnicity from you? (CONFIRM RESPONSE)

Not very interested						Very interested
1	2	3	4	5		

PRIME: Now we are going to ask you a few questions on how satisfied you are. Please rate on the following scale: **not at all satisfied, not too satisfied, somewhat satisfied, and very satisfied.**

53. Please tell me overall, how satisfied you are with each of the following areas of your life. Are you very satisfied, somewhat satisfied, not too satisfied or not at all satisfied with your...

	Not at all Satisfied	Not too satisfied	Somewhat satisfied	Very satisfied
a. Work or career overall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Personal financial situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Physical health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Personal relationships with family and friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Religious or spiritual life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Leisure activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PRIME: Now I'm going to ask you about your current regular job(s) in more detail.

54. IF YES TO Q.1 WORKING: Thinking about all your current regular jobs, how many hours in total do you work in a typical week?

_____ # Hours per week

55. IF YES TO Q.1 WORKING: To what extent do all your current regular jobs allow you to: (READ ITEM) (CODE RESPONSE)

	Never	Not very often	Some times	Very often	Always
a. Work to correct social and economic inequalities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Work with other people as part of a team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Provide direct service to people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Make a difference in the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

56. How has your experience in (INSERT EXPERIENCE 1999-2000) influenced your career choices? (READ LIST. CODE ALL THAT APPLY)

- (INSERT EXPERIENCE 1999-2000) affected the career I chose
- (INSERT EXPERIENCE 1999-2000) gave me exposure to new career options
- My priorities in what I wanted in a job changed
 - If YES to this option: How did your priorities change?
 - I wanted financial security
 - I decided to devote my career to a cause/issue I became passionate about through (INSERT EXPERIENCE 1999-2000)
 - I realized I could be more effective in making change by doing a different kind of work.
 - I decided I wasn't interested in the career I thought I wanted
 - I became more realistic about my career choices
- My (INSERT EXPERIENCE 1999-2000) affiliation gave me connections that helped me get a job
- My time in (INSERT EXPERIENCE 1999-2000) put me at an advantage when trying to find a job
- No effect on my career choices
- Other (SPECIFY) _____

PRIME: We are almost done. Now I just need to ask you some background information, like your education.

57. What is the highest degree, or level of school, you have completed? (READ LIST IF NECESSARY. CODE ONE.)

- 8th grade or less
- Some high school, no diploma
- High school diploma
- High school equivalency, or GED
- Vocational, trade, or business school after high school (not for a BA for MBA)
- Some college credit, but less than 1 year
- One or more years of college, no degree
- Associate degree
- Bachelor's degree
- Master's degree
- Ph.D., M.D., or other professional degree

58. What is the highest level of education you expect to complete? (READ LIST IF NECESSARY. CODE ONE.)

- Some high school, no diploma
- High school diploma
- High school equivalency, or GED
- Vocational, trade, or business school after high school, not for a BA or MBA
- Two years or less of college
- Two or more years of college, including 2-year degree
- College degree, 4- or 5-year degree
- Master's degree or equivalent
- Ph.D., M.D., or other professional degree

59. How has your (INSERT EXPERIENCE 1999-2000) experience shaped your education choices? (READ LIST. CODE ALL THAT APPLY.)

- (INSERT EXPERIENCE 1999-2000) affected the degree/major I chose
IF YES: How did your (INSERT EXPERIENCE 1999-2000) experience affect the degree/major you chose? (ENTER VERBATIM. CODE AFTER FIRST 100 RESPONSES.)
- (INSERT EXPERIENCE 1999-2000) affected the concentration/focus I chose
IF YES: How did your (INSERT EXPERIENCE 1999-2000) experience affect the concentration/focus you chose? (ENTER VERBATIM. CODE AFTER FIRST 100 RESPONSES.)
- (INSERT EXPERIENCE 1999-2000) made me more interested in the topic I pursued in school
- (INSERT EXPERIENCE 1999-2000) helped me see the importance of education
- My personal goals for educational attainment increased
- I decided not to pursue further education
- The money I made while doing (INSERT EXPERIENCE 1999-2000) made continuing my education possible
- No effect on my education
- Other (SPECIFY) _____

PRIME: Now I want you to think back to when you first accomplished some major milestones in your life. Please remember the best you can the year.

60. IF NOT CURRENTLY IN SCHOOL FULL-TIME IN Q.1: When was the last time you were in school full-time?

_____ YEAR

61. When was the first time you were employed full-time?

_____ YEAR

62. What is your current marital status? (READ LIST. CODE ONE.)

- Single, never married
- Married
- In a committed long-term relationship
IF YES: Have you ever been married?
 - YES (GO TO Q44a)
 - NO
- Widowed
- Divorced
- Separated

44a. IF EVER MARRIED: When did you first get married?

_____ YEAR

63. Do you have any children?

- YES
- NO (GO TO Q46)

45a. IF YES: How many children do you have? _____

45b. IF YES: What age is your oldest child? _____

64. How many years have you lived in your present community?

- Less than 1 year
- 1 to 2 years
- 3 to 4 years
- 5 or more years

65. Do you or anyone else in your household (READ ITEM)?

	Yes	No
a. Live in public housing or projects	<input type="checkbox"/>	<input type="checkbox"/>
b. Receive public assistance, welfare, food stamps, or WIC	<input type="checkbox"/>	<input type="checkbox"/>
c. Receive other housing assistance, such as Section 8, housing vouchers, or other subsidies	<input type="checkbox"/>	<input type="checkbox"/>

66. What kind of jobs did your parents have growing up? (USE OCCUPATION CODES FROM Q.1)

48a. Mother's Occupation _____

48b. Father's Occupation _____

67. How often do you attend religious services, excluding weddings and funerals?

- Never
- Rarely
- Once or twice a month
- Once a week or more

68. How important is religion in your life?

- Not important
- A little important
- Pretty important
- Very important

69. 51a. Which of the following best represents the total annual income in 2005 for you **before taxes**. Please include wages, salaries, interest, dividends, social security, and other forms of income. (READ LIST. CODE ONE.)

51b. Which of the following best represents the total annual income in 2005 for your immediate family living in your household **before taxes**. Please include wages, salaries, interest, dividends, social security, and other forms of income. (READ LIST. CODE ONE.)

51a. Your own 2005 income (before taxes)	51b. Total for the family in your household (before taxes)
<input type="checkbox"/> Under \$5,000 <input type="checkbox"/> \$5,000 – less than \$10,000 <input type="checkbox"/> \$10,000 – less than \$15,000 <input type="checkbox"/> \$15,000 – less than \$20,000 <input type="checkbox"/> \$20,000 – less than \$25,000 <input type="checkbox"/> \$25,000 – less than \$30,000 <input type="checkbox"/> \$30,000 – less than \$40,000 <input type="checkbox"/> \$40,000 – less than \$50,000 <input type="checkbox"/> \$50,000 – less than \$60,000 <input type="checkbox"/> \$60,000 – less than \$70,000 <input type="checkbox"/> \$70,000 – less than \$80,000 <input type="checkbox"/> \$80,000 – less than \$90,000 <input type="checkbox"/> \$90,000 – less than \$100,000 <input type="checkbox"/> \$100,000 or more <input type="checkbox"/> Don't Know	<input type="checkbox"/> Under \$5,000 <input type="checkbox"/> \$5,000 – less than \$10,000 <input type="checkbox"/> \$10,000 – less than \$15,000 <input type="checkbox"/> \$15,000 – less than \$20,000 <input type="checkbox"/> \$20,000 – less than \$25,000 <input type="checkbox"/> \$25,000 – less than \$30,000 <input type="checkbox"/> \$30,000 – less than \$40,000 <input type="checkbox"/> \$40,000 – less than \$50,000 <input type="checkbox"/> \$50,000 – less than \$60,000 <input type="checkbox"/> \$60,000 – less than \$70,000 <input type="checkbox"/> \$70,000 – less than \$80,000 <input type="checkbox"/> \$80,000 – less than \$90,000 <input type="checkbox"/> \$90,000 – less than \$100,000 <input type="checkbox"/> \$100,000 or more <input type="checkbox"/> Don't Know

Part II: Ask only if missing from prior waves of the survey

NOTE TO CATI/ INTERVIEWER: Questions in this section marked ASK ONLY IF MISSING are asked only if respondents did not answer at baseline 1999 or post-program supplemental 2003. CATI to flag missing variables.

70. ASK ONLY IF MISSING: What is your race? Are you: (READ LIST. MULTIPLE RESPONSES ALLOWED.)

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian or other Pacific Islander
- White
- Other (SPECIFY) _____

71. ASK ONLY IF MISSING: Are you Hispanic or Latino?

- YES
- NO

72. ASK ONLY IF MISSING: What is your gender?

- Male
- Female

73. ASK ONLY IF MISSING: What is your date of birth?

____ / ____ / 19__
 Month Day

PRIME: Now I'm going to ask you how important things are to you. Please answer whether they are **not important, somewhat important, or very important.**

74. ASK ONLY IF MISSING: (READ ITEM) Would you say this is very important, somewhat important, or not important to you?

	Not Important	Somewhat Important	Very Important
a. Working to correct social and economic inequalities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Having a job that involves working with other people as part of a team	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Working in a job where you are of direct service to people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Making a difference in the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PRIME: The next set of questions asks you about your experiences while growing up, your motivation for inquiring about AmeriCorps, your experiences since then. We'll start with some questions about your youth. By "youth," I mean the experiences you had before the age of 18. I will use the terms "youth" and "growing up" interchangeably.

75. ASK ONLY IF MISSING: Which of these categories indicates the kind of place or places where you spent most of your youth?

	Yes	No	RF	DK
Rural areas	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Urban areas	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4
Suburban areas	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4

76. ASK ONLY IF MISSING: Before the age of 18, how many times did you move to a new house or apartment?

_____ Times

- REFUSED
- DON'T KNOW

77. ASK ONLY IF MISSING: During your youth, what language did you usually speak at home—English or something else?

- English
- English and a different language
- A different language
- REFUSED
- DON'T KNOW

78. ASK ONLY IF MISSING: We would like to address information about where you lived during high school. Please give me the street address, city, state, zip code, and country for an address at which you lived while you were in high school. (PROBE FOR CROSS STREETS IF NECESSARY). This information will be kept confidential.

STREET: _____

CITY: _____

ZIP CODE: _____ COUNTRY: _____

79. ASK ONLY IF MISSING: Please give me the name, city, state, and country of the high school that you attended at this time.

HIGH SCHOOL: _____

CITY: _____ STATE: _____

COUNTRY: _____

80. ASK ONLY IF MISSING: Was this high school located in the neighborhood that you were living in at the time?

- YES
- NO
- REFUSED
- DON'T KNOW

81. ASK ONLY IF MISSING: Did you do any of the following things when you were younger?

- | | Yes | No |
|---------------------------------------------------------------------------|----------------------------|----------------------------|
| a. Saw someone in your family help others | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |
| b. Personally saw someone you admire (not a family member) helping others | <input type="checkbox"/> 1 | <input type="checkbox"/> 2 |

PRIME: Now I'd like to ask you some questions about your primary caretakers and the community in which you lived while you were growing up. By primary caretakers, I mean your parents or another person or people who provided you with substantial emotional and/or financial support.

82. ASK ONLY IF MISSING: During your youth, which primary caretakers contributed most to your upbringing? (CODE ALL THAT APPLY.)

- Mother
- Father
- Stepmother/father's partner
- Stepfather/mother's partner
- Grandmother
- Grandfather
- Aunt
- Uncle
- Other (SPECIFY AS MANY AS NECESSARY:) _____
- REFUSED
- DON'T KNOW

83. ASK ONLY IF MISSING: Which of the following categories best describe the highest educational level that your (PRIMARY CARETAKER 1) has currently completed?

- Less than a high school graduate, diploma, or the equivalent
- High school graduate
- High school diploma or the equivalent, for example, GED
- Some college, no degree
- Associate's or Bachelor's degree
- Master's degree
- Ph.D., M.D., or other professional graduate degree
- REFUSED
- DON'T KNOW

84. ASK ONLY IF MISSING: During your youth, how many people in your neighborhood would you or your family members have felt comfortable (READ ITEM). Would you say no one, some neighbors, many neighbors, or almost all neighbors?

	No one	Some neighbors	Many neighbors	Almost all neighbors	RF	DK
a. borrowing a cup of milk, sugar, or similar items?	1	2	3	4	7	8
b. using their phone?	1	2	3	4	7	8
c. asking for a ride or other assistance getting somewhere?	1	2	3	4	7	8
d. asking for help in an emergency?	1	2	3	4	7	8
e. asking to stay at their house if you were alone?	1	2	3	4	7	8

85. ASK ONLY IF MISSING: During your youth, how strongly connected do you believe your family was to (READ ITEM). Would you say not at all connected, somewhat casually connected, or very strongly connected?

	Not at all connected	Somewhat casually connected	Very strongly connected	RF	DK
a. your neighborhood?	1	2	3	7	8
b. colleagues from your parents' or primary caretakers' workplace?	1	2	3	7	8
c. the schools that you and/or your siblings attended?	1	2	3	7	8
d. a religious organization?	1	2	3	7	8
e. other organizations or social networks in your community?	1	2	3	7	8
f. your community as a whole?	1	2	3	7	8

86. ASK ONLY IF MISSING: During your youth, did you or anyone else in your household receive (READ ITEM)?

	Yes	No	RF	DK
a. Receive public assistance, such as welfare, food stamps, or WIC	1	2	7	8
b. Live in public housing or projects	1	2	7	8
c. Receive other housing assistance, such as Section 8 or housing vouchers	1	2	7	8

PRIME: Now I'm going to ask you what you were doing **before** you started (INSERT EXPERIENCE 1999-2000). This would be prior to your inquiring about AmeriCorps and (INSERT EXPERIENCE 1999-2000) in 1999.

87. ASK ONLY IF MISSING: In the twelve months before your (INSERT EXPERIENCE 1999-2000), what were you doing? (CODE ALL THAT APPLY.)

- Working outside the home
- Attending school
- Taking care of my children at home
- Looking for a job
- Volunteering/voluntary community service
- Other (SPECIFY)_____

88. ASK ONLY IF MISSING: Before you started (INSERT EXPERIENCE 1999-2000), had you **ever** participated in voluntary community service or a volunteer activity?

- Yes
- No

PRIME: Now I'd like to ask a question about your reasons for inquiring about AmeriCorps and your alternatives to AmeriCorps.

89. ASK ONLY IF MISSING: What other options did you seriously consider when you inquired about AmeriCorps? (CODE ALL THAT APPLY.)

- HIGH SCHOOL/GED
- COLLEGE
- VOCATIONAL SCHOOL/JOB TRAINING
- GRADUATE OR PROFESSIONAL SCHOOL
- JOB IN PRIVATE SECTOR
- JOB IN PUBLIC OR NON-PROFIT SECTOR
- MILITARY SERVICE
- OTHER FULL-TIME SERVICE ACTIVITY
- TRAVEL
- DID NOT CONSIDER OTHER AVAILABLE OPTIONS0
- NO OTHER OPTIONS AVAILABLE
- OTHER (SPECIFY) _____
- REFUSED
- DON'T KNOW

Part III: Contact Information

PRIME: We are done with the survey part. Now we just want to make sure we have the correct contact information. We may want to talk with you again in the future. The following information is needed so that we can reach you in the future and so that we can send you your check. This information will be kept confidential.

- 1. Your full name: _____
- 2. Your current address: _____
City State ZIP
- 3. Your current telephone number: (_____) _____ - _____
(area code)
- 4. Your permanent address: _____
City State ZIP
- 5. Your permanent telephone number: (_____) _____ - _____
(area code)
- 6. Your e-mail address _____

Additional Contact and Tracking Information

In case we lose touch with you, please provide the names and contact information for three relatives or friends who do not live with you and who are most likely to know where to contact you in the future. Please include 2 people at different addresses.

- 1. Name: _____
Relationship to you: _____
Current address: _____
City State ZIP
Home telephone number: (_____) _____ - _____
(area code)
Name that number is listed under: _____
Work telephone number (_____) _____ - _____
(area code)
Name of organization that number is listed under: _____

2. Name: _____

Relationship to you: _____

Current address: _____
City State ZIP

Home telephone number: (_____) _____ - _____
(area code)

Name that number is listed under: _____

Work telephone number (_____) _____ - _____
(area code)

Name of organization that number is listed under: _____

ASK ONLY IF NOT COLLECTED: As I previously mentioned, we will want to interview you again in future years and because of that we may need your social security number in case we lose touch with you. What is your Social Security Number?

_____ - _____ - _____

AmeriCorps is interested in continuing to follow AmeriCorps members over time, and may hire a different contractor for future follow-up studies. If this happens, will you allow your past survey responses and contact information to be transferred to another contractor?

- Yes
- No

Thank you, that is the end of my questions. We really appreciate your continued participation in this important evaluation of AmeriCorps and will be in touch with you again in a couple of years. If you have any questions about the study or its legitimacy, please feel free to contact the study team at servicestudy@abtassoc.com or 1-888-735-8598.

ONLY IF NECESSARY: This is a federally-approved study and is governed by the Federal Privacy Act. The information in this survey is to be used solely for research and for statistical purposes to help meet the requirements of federal law. No other uses will be made of this information.

ONLY IF NECESSARY: If the respondent feels they need to speak with someone at CNCS, they can contact Lillian Dote at 202-606-6984. If respondent asks about the education award, provide the phone number to the National Service Trust at 1-888-507-5962.