

**Job Accommodations Network User Follow-Up Interview
Self-Employment Service Form
Interview Structure**

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Section I. Introduction and Informed Consent

Hello. My name is _____. I am calling to invite you to participate in a research study being conducted by West Virginia University on behalf of the Job Accommodation Network or JAN.

On _____ (date), you contacted JAN, either by phone or electronically to request information about _____. During that consultation you indicated your willingness to participate in a follow-up interview. I have been hired by JAN to do follow-up interviews that will evaluate JAN services.

Have I reached you at an OK time to talk?

If Yes, continue

If No, "What would be a better time?" _____.

As you may be aware, JAN is a free consulting service that provides information about job accommodations, the Americans with Disabilities Act, and the employability of people with disabilities. The purpose of this follow-up is to evaluate JAN's service and to identify ways that it could improve services to its clients.

This follow-up will take about 15 minutes of your time. The information that you provide to us will be kept confidential to the extent permitted by law. Any reports or articles about these follow-ups will describe results in a summarized manner so that you cannot be identified.

Your participation in this interview is voluntary. Your decision whether or not to participate will not affect the services you may receive from JAN. You may choose not to take part at all or you may choose to stop participating at any time, and you won't be penalized or lose the ability to use JAN's services.

There are no foreseeable risks to participating in this research study. There will be no personal benefit to participating in this study.

Do you have any questions at this point?

Do you wish to take part in the follow-up at this time?

If Yes, continue

If No, "Is there a better time in which you wish to take part in the follow-up?" _____

Section II. Outreach

1. How did you know to contact the Self Employment service?

(ALL THAT APPLY); [Interviewers FIELD CODE into the following categories]

- a. Used JAN service before
- b. Previous user of JAN service (specify if another employer)
- c. JAN Website
- d. Other website (not JAN website)
- e. Internet search
- f. Referral from:
 - Organization (list) _____
 - Government Agency (list) _____
 - Company
 - DOL Call Center
 - EARN
 - JANSelf-employment
- g. Friend/co-worker/word of mouth
- h. Personal contact with JAN staff member
- i. Rehabilitation professional
- j. Medical professional
- k. Educational institution
- l. Union
- m. Legal professional
- n. Newspaper/magazine/book/professional journal article
- o. Television (report or advertisement)
- p. Listed in a directory
- q. I&R Service
- r. Conference
- s. JAN Publication or Brochure
- t. JAN presentation
- u. Used JAN self-employment service before
- v. Previous user ofJAN self-employment service
- w. Self-employmentWebsite
- x. Self-employment Publication or Brochure
- y. Other (please specify): _____

2. Before you contacted the Self-employment service, what did you expect the Self-employment service to provide to you?

(Record response verbatim. Query for additional information so that sufficient detail to code into one or more of the following categories.)

a. Information on starting a small business

1. developing a business concept
2. market research
3. writing a business plan
4. obtaining capital
5. loan guarantees

b. Managing a Business

1. technical assistance resources
2. growing a business
3. personnel management
4. financial management
5. developing a marketing plan

c. Disability Issues

1. Social Security
2. PASS plans
3. health care
4. working at home

d. Other. Please specify: _____

Section III. Self-employment Interaction Outcomes

1. Self-Employment Information:

Where are you now in the process of self-employment?

[Interviewers to read information in parentheses only if asked] SELECT ONLY ONE RESPONSE

- a. [Are you] Considering the idea of self-employment
- b. Planning stages (Writing the business plan, exploring opportunities and ways agencies and organizations can help with a variety of issues in the planning process)
- c. Initial start up stages (Submitting the business plan, organizing work incentive options, approval from VR or other micro enterprise or funding source, licensing, zoning and tax issues in place)
- d. Near operation (Funding and operation is in place and business is about to open its doors)
- e. Business established
- f. Business expansion
- e. Hiring other employees
- f. DK
- g. RF

2. Did the information you received from the Self-employment service help you to get in touch with local resources?

- a. Yes (If Yes, Continue to question 3)
- b. No (Go to Section IV)
- c. DK (Go to Section IV)
- d. RF (Go to Section IV)

3. Which of the following resources did you contact based on your consultation with the Self-employment service (YES/NO to each)

- a. Financing, economic development, and/or microenterprise programs Yes No
- b. Business planning and technical assistance organizations (includes business incubators, nonprofit organizations, local business development offices, community development offices, women's business councils etc.) Yes No
- c. State vocational rehabilitation (VR) program (includes programs providing small business development assistance within VR) Yes No
- d. Small Business Administration (SBA) office (includes Small Business Development Centers, Women's Business Centers, Service Corps of Retired Executives (SCORE) or other affiliated programs) Yes No
- e. Veteran's Business Development programs (includes SBA Veteran's programs, Dept. of Veteran's Affairs) Yes No
- f. Social Security Administration and related programs (includes organizations that provide information on work incentive and benefits counseling) Yes No
- g. Federal government business resources (includes IRS, Department of Commerce, Dept. of Housing and Urban Development) Yes No
- h. Credit or personal financial counseling services Yes No
- i. Health Insurance resources Yes No
- j. Other _____

