

WEATHERIZATION STAFF SURVEY

This data is being collected to evaluate weatherization staff training and other workforce issues. Public reporting burden for this collection of information is estimated to average thirty minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Office of the Chief Information Officer, Records Management Division, IM-11, Paperwork Reduction Project (1910-5151), U.S. Department of Energy, 1000 Independence Ave SW, Washington, DC, 20585-1290; and to the Office of Management and Budget (OMB), OIRA, Paperwork Reduction Project (1910-5151), Washington, DC 20503.

Part I. National Weatherization Staff

Introduction: Thank you for agreeing to complete the Weatherization Staff Survey being conducted as part of the national evaluation of the Weatherization Assistance Program. In the first part of the survey, I'll be asking you questions to collect information on demographics and training histories, and to obtain your feedback on the effectiveness of the training that you have received. All of the information that we obtain from this survey will remain confidential and will be analyzed in such a way that your answers cannot be associated with your name. Your answers will not be shared with or reported back to anyone within your agency or state.

1. For whom do you work?
 - a. Local weatherization agency
 - b. Private weatherization contractor
 - c. Other _____

2. What is your primary weatherization job title?
 - a. Administrator (End survey)
 - b. Auditor
 - c. Inspector
 - d. Crew leader/foreman
 - e. Crew member
 - f. Day laborer (End survey)
 - g. Other _____ (End survey)

3. How long have you been working for your current weatherization employer? _____
(Years) _____ (months)

4. How long have you been working in low-income weatherization? _____ (Years)
_____ (months)

5. How long have you had your current job title? _____ (Years) _____
(months)
6. Including your weatherization employer, how many employers do you have?
- One (go to Q8)
 - Two
 - More than two
7. Is working for your current weatherization employer your main job?
- Yes
 - No
8. Considering all your employers, do you work full-time or part-time?
- Full-time
 - Part-time
 - More than full-time
9. How many different employers of all kinds have you had in the last five years? _____
10. How many hours per week do you or the primary wage earner usually work at all of your jobs?

Enter _____ hrs

11. Do you have health insurance?
- Yes
 - No (go to Question 12)
- 11a. Who provides your health insurance?
- Your current weatherization employer
 - A non-weatherization employer
 - Your state
 - You purchase your own insurance
 - You have insurance through a family member
 - Other _____
12. What is your annual income from your weatherization job?
- \$0-\$10,000
 - \$10,001 - \$15,000
 - \$15,001 - \$20,000
 - \$20,001 - \$25,000
 - \$25,001 - \$30,000
 - \$30,001 - \$40,000
 - \$40,001 - \$50,000
 - \$50,001 - \$75,000
 - \$75,001 and over

13. How likely would it be that you would be unemployed if you did not have a job with your current weatherization employer?

- a. Very likely
- b. Likely
- c. Neither likely or unlikely
- d. Unlikely
- e. Very unlikely

14. How satisfactory are these aspects of your job weatherizing low-income homes?

	Very satisfactory	Satisfactory	Neither satisfactory nor unsatisfactory	Unsatisfactory	Very unsatisfactory
a. Pay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Health benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Steady work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Boss/supervisor(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Co-workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Interactions with clients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Flexibility of work schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Dress code	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Paid time off policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Retirement benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Job safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. Do you view your current employment in low-income weatherization as a career or just another job?

- a. Definitely a career
- b. Mostly a career
- c. Mostly just a job
- d. Definitely just a job

16. What share of the weatherization skills you apply in your job did you learn...

	None	Some	A Lot	Most / All
a. prior to entering the weatherization field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. through on-the-job training & experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. formal weatherization training (classes, workshops, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. How much structured weatherization-related 'on-the-job' training or mentoring have you had during the past five years?

- a. A great deal
- b. Quite a bit
- c. Some
- d. Not much
- e. None at all

18. Which of the following types of formal training have you attended in the last five years?
(Select all that apply)

- a. National Weatherization Training Conference
- b. Affordable Comfort Conference
- c. Regional weatherization conference
- d. Your state's weatherization conference
- e. Classroom training at a training center
- f. Classroom training at your agency
- g. Web cast
- h. Other (please specify)_____

19. What is the most valuable weatherization training experience you have had in the last five years? _____

20. On which weatherization topics have you received formal training in the past five years?
(Select all that apply)

- a. Diagnostic testing and assessment procedures
- b. Insulation for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- c. Space heating, ventilation, air conditioning for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- d. Infiltration/air sealing measures for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- e. Doors and window installation/repair for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- f. Hot water heating for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- g. Base loads (e.g., lighting, refrigerators) for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes

21. On which topics have you had professional development training in the past five years that could take you to the next level in your weatherization career? (Select all that apply)

- a. Management

- b. Client education
- c. Auditing/estimating for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- d. Monitoring/quality control
- e. Financial topics
- f. Outreach and communications
- g. Other (please specify)_____

22. On which health and safety topics have you received training in the past five years? (Select all that apply)

- a. Lead
- b. Indoor air quality
- c. Mold and mildew
- d. Fire safety
- e. Asbestos
- f. General crew safety
- g. Other health and safety (please specify)_____

23. Is there training you think you need in your current job, but have not been able to get?

- a. Yes
- b. No (go to Q25)

24a. In what areas do you feel more training would be useful in your current weatherization job? (Select all that apply)

- a. Diagnostic testing and assessment procedures
- b. Insulation for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- c. Space heating, ventilation, air conditioning for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- d. Infiltration/air sealing measures for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- e. Door window installation/repair for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- f. Hot water heating for:
 - i. single family dwellings
 - ii. multifamily dwellings

- iii. mobile homes
- g. Baseloads (e.g., lighting, refrigerators) for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- h. Client education
- i. Auditing/estimating for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- j. Monitoring/quality control
- k. Lead
- l. Indoor air quality
- m. Mold and mildew
- n. Fire safety
- o. Asbestos
- p. General crew safety
- q. Other (please specify) _____

24b. What has kept your training needs from being met in the last five years? (Select all that apply)

- a. Lack of training funds
- b. Not senior enough
- c. Training not available at the right times
- d. Training not available at the right places
- e. Available training is poor in quality
- f. Not aware of training opportunities that meet training needs
- g. Haven't asked for the training
- h. I have to pay for my own training
- i. Don't know
- j. None of these
- k. Other (please specify) _____

25a. What national professional certifications do you have? (Select all that apply)

- a. BPI Building Analyst
- b. BPI Envelope
- c. BPI Residential Building Envelope Accessible Areas Air Leakage Control Installer
- d. Residential Building Envelope Whole House Air Leakage Control Crew Chief
- e. BPI Manufactured Housing
- f. BPI Heating
- g. BPI Air Conditioning and Heat Pump
- h. BPI Multifamily
- i. HERS
- j. LEED
- k. Lead Safe Weatherization
- l. Lead Certified Renovator

m. NAHB Green Building

25b. What other certification do you have? (Please fill in the table below as appropriate)

Organization providing certification	Subject of certification

26a. Have you gained training and/or experience from your current low-income weatherization job that could be useful if you had to find a new job?

- a. Yes
- b. No (skip Q26b)

26b. How useful could your training and/or experience from your current weatherization job be for a job in these fields and job types?

	Extremely Useful	Very Useful	Useful	Not Very Useful	Not at all Useful
a. Non-low-income residential weatherization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. General residential construction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. General commercial and industrial retrofit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Supervisory positions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Running your own business	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Skip Pattern: For auditors, please go to question 27. For crew chiefs, please go to question 47. For crew members, please go to question 63.

Auditor Questions

27. Does your state or weatherization agency have a standard walk-away or deferral policy written in a program manual or field guide?

- a. Yes
- b. No
- c. Don't Know

28. How often do you recommend walking away from homes or deferring services?

- a. Never
- b. 1-5% of time
- c. 6-10% of time
- d. 11-20% of time
- e. 21-30% of time
- f. 31% or more of time

29. How frequently do you walk-away or defer services for the reasons listed below?

	Very frequently	Frequently	Infrequently	Very infrequently	Not at all
a.Client Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.Client uncooperative or threatening behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.Unsanitary Conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d.Excessive Mold/Moisture	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e.Extent/Condition of Lead-Based Paint	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.Illegal activities or drug abuse in the home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g.Structurally unsound or dilapidated unit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h.Unsafe electrical, plumbing or mechanical equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i.Excessive CO levels	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j.Friable asbestos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k.Other unsafe IAQ issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l.Infestation of rodents, insects or other vermin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m.Unsecured pets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n.Excessive repair that is cost-prohibitive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o.Improperly stored hazardous materials	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Other reason(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please specify other reasons for walking away or deferring services: _____

30. How do you communicate to the clients when you conclude the audit that the home will not be weatherized? CHECK ALL THAT APPLY

- a. Verbal communication in person after the inspection
- b. Verbal communication after the inspection by phone
- c. Written communication in letter form
- d. Standard deferral form
- e. A different agency person communicates the decision to the client
- f. I have never had to walk away from a home or defer services
- g. Other method. Please Explain. _____

31. Does your agency refer walk-away households to other community service providers?

- a. Yes
- b. No
- c. Don't know

32. For those homes you audited and walked away from or deferred services, what percent of time do you come back to re-audit walk-way homes?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

33. Does your agency use priority lists or computer audits or both?

- a. priority lists
- b. computer audits
- c. both

34. What do you see as the advantages of (priority lists/computer audits)?

35. What do you see as the disadvantages of (priority lists/computer audits)?

36. Are there any measures that you are reluctant to include in job orders because crews have difficulty installing them?

- a. yes
- b. no

36a. If yes, what measures? _____

37. How much influence does the client usually have on the final set of measures included in the weatherization job order?

- a. total influence
- b. a great deal of influence
- c. some influence
- d. little influence
- e. no influence

38. In what percentage of homes do you encounter language barriers with clients?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

39. What do you do when you encounter a language barrier with clients? _____

40. What are the most frequently asked questions you get from clients? _____

41. In what percentage of homes does client interaction impede your ability to do your job?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

41a. What do you do when client interaction impedes your ability to do your job?

42. Is it standard practice for your local agency to provide you with information about possible client physical disabilities or serious health conditions before you visit a home to conduct an audit?

- a. yes
- b. no

43. How much informal energy education involving the client, in addition to any formal energy education you must conduct, goes on during the usual audit?

- a. a great deal
- b. some
- c. little
- d. none

44. In what percentage of homes do you directly interact with the client's extended family during your audit?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

45. In what percentage of homes do you directly interact with the client's neighbors during your audit?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

46. How much informal energy education, in addition to any formal energy education you must conduct, goes on during the usual audit involving the extended family and/or neighbors if they are present during an audit?

- a. a great deal
- b. some
- c. little
- d. none

47. What percentage of homes do you feel unsafe entering to do audits?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

47a. What situations typically make you feel unsafe? _____

Go to Question 77.

Crew Chief Questions

48. How much of a hindrance are the following to your ability to carry out your crew chief responsibilities?

	Extremely Great	Very Great	Great	Some	None at all
a. language barriers with crew	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. lack of training of crew members	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. crew tardiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. interpersonal problems amongst crew members	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. getting crews to finish jobs on time and within budget	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

49. In what share of homes do you encounter situations where installation of measures requires solutions that go beyond standard best practices?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

49a. Please describe the last instance you faced that went beyond best practices and how you and your crew solved the problem. _____

50. How frequently do you need to seek clarification or interpret instructions from auditors contained in the job orders?

- a. all the time
- b. very often
- c. often
- d. seldom
- e. never

51. In what percentage of weatherization jobs does your crew install measures not originally contained in the job orders?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

51a. What measures typically get added? _____

52. In what percentage of weatherization jobs does your crew not install measures that were originally contained in the job orders?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

52a. What measures typically get dropped? _____

53. How much influence does the client usually have on the final set of measures installed in the home?

- a. total influence
- b. a great deal of influence
- c. some influence
- d. little influence
- e. no influence

54. In what percentage of homes do you encounter language barriers with clients?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%

- d. 26-50%
- e. 51-75%
- f. 76-100%

55. What do you do when you encounter a language barrier with clients? _____

56. What are the most frequently asked questions you get from clients? _____

57. In what percentage of homes do you encounter difficult clients?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

57a. What do you do when you encounter a difficult client? _____

58. Is it standard practice for your local agency to provide you with information about possible client physical disabilities or serious health conditions before you visit a home to install measures?

- a. yes
- b. no

59. How much informal energy education involving the client, in addition to any formal energy education you must conduct, goes on during the usual weatherization job?

- a. a great deal
- b. some
- c. little
- d. none

60. In what percentage of homes do you directly interact with the client's extended family during weatherization jobs?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

61. In what percentage of homes do you directly interact with the client's neighbors during weatherization jobs?

- a. 0%

- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

62. How much informal energy education, in addition to any formal energy education you must conduct, goes on during the usual weatherization job involving the extended family and/or neighbors if they are present during the job?

- a. a great deal
- b. some
- c. little
- d. none

63. What percentage of homes do you feel unsafe entering to do weatherization jobs?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

63a. What situations typically make you feel unsafe? _____

Go to Question 71.

Crew Member Questions

64. How much of a hindrance are any language barriers with those on your crew in carrying out your job responsibilities?

- a. extremely great
- b. very great
- c. great
- d. some
- e. none at all

65. How much informal energy education involving the client, in addition to any formal energy education you must conduct, goes on during the usual weatherization job?

- a. a great deal
- b. some
- c. little
- d. none

66. What are the most frequently asked questions you get from clients? _____

67. In what percentage of homes do you directly interact with the client's extended family during weatherization jobs?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

68. In what percentage of homes do you directly interact with the client's neighbors during weatherization jobs?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

69. How much informal energy education, in addition to any formal energy education you must conduct, goes on during the usual weatherization job involving the extended family and/or neighbors if they are present during the job?

- a. a great deal
- b. some
- c. little
- d. none

70. What percentage of homes do you feel unsafe entering to do weatherization jobs?

- a. 0%
- b. 1-5%
- c. 6-10%
- c. 11-25%
- d. 26-50%
- e. 51-75%
- f. 76-100%

70a. What situations typically make you feel unsafe? _____

Crew Chiefs and Crew Members

71. Please indicate your level of agreement/disagreement with the following statement: "As a tem, my crew has sufficient knowledge to perform all the weatherization tasks we need to complete."

	Excellent	Very Good	Good	Poor	Very Poor	Not applicable
e. Hot water heating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Base loads (lighting, refrigerators)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Mold and mildew	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Lead	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Asbestos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Vermiculite	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. General crew safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

76. On a scale from 1 to 5, where a 1 means “does not need more training” and a 5 means “a great deal of more training is needed,” please rate the training needs of the crew in the areas listed below.

	Crew does not need more training				Crew could benefit greatly from more training
	1	2	3	4	5
a. Insulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Space heating, ventilation and air conditioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Infiltration/air sealing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Door and window installation/repair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Hot water heating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Base loads (lighting, refrigerators)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Mold and mildew	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Lead	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Asbestos	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Vermiculite	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. General crew safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

All Respondents

77. What is your age? _____

78. What is your gender?

- a. Male
- b. Female

79. What is the highest level of school you have completed or the highest degree you have received? (Select best option)

- a. Did not attend high school
- b. Some high school but no diploma
- c. High school diploma or the equivalent (For example: GED)
- d. Some college but no degree
- e. Associate degree in college occupational/vocational or academic program

the Training Center						
g. In the field training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Access to demonstration equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Length of the Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Overall Training Experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Focus on renewable energy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Focus on innovation techniques	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

These next questions pertain to your employment status and experiences.

5. Are you currently...?

- (1) Employed for wages
- (2) Self-employed
- (3) Out of work for more than 1 year (SKIP to Q49)
- (4) Out of work for less than 1 year (SKIP to Q49)
- (5) A Homemaker (SKIP to Q54)
- (6) A Student (SKIP to Q51)
- (7) Retired (SKIP to Q54)
- (8) Unable to work (SKIP to Q54)
- (9) Refused (SKIP to Q54)

6. Are you employed full-time or part-time?

- (1) Full-time
- (2) Part-time
- (3) Don't Know/Not Sure
- (4) Refused

7. How many employers do you have?

- c. One
- d. Two
- e. More than two

8. How many hours per week do you usually work at all of your jobs?

Enter _____ hrs

9. Do you currently work for a local agency that conducts low-income weatherization or a private contractor that performs low-income weatherization?

- a. Yes
- b. No (Go to Q35)

10. For whom do you work?

- a. Local weatherization agency
- b. Private weatherization contractor
- c. Other _____

11. What is your primary weatherization job title?

- a. Administrator
- b. Auditor
- c. Inspector
- d. Crew leader/foreman
- e. Crew member
- f. Day laborer
- g. Other _____

12. How long have you been working for your current weatherization employer? _____
(Years) _____ (months)

13. How long have you been working in low-income weatherization? _____ (Years)
_____ (months)

14. How many hours per week do you usually work at all of your jobs?
Enter _____ hrs

15. Do you have health insurance?

- a. Yes
- b. No (go to Question 17)

16. Who provides your health insurance?

- a. Your current weatherization employer
- b. A non-weatherization employer
- c. Your state
- d. You purchase your own insurance
- e. You have insurance through a family member
- f. Other _____

17. What is your annual income?

income range	weatherization job	all jobs
\$0-\$10,000	<input type="checkbox"/>	<input type="checkbox"/>
\$10,001 - \$15,000	<input type="checkbox"/>	<input type="checkbox"/>
\$15,001 - \$20,000	<input type="checkbox"/>	<input type="checkbox"/>
\$20,001 - \$25,000	<input type="checkbox"/>	<input type="checkbox"/>
\$25,001 - \$30,000	<input type="checkbox"/>	<input type="checkbox"/>
\$30,001 - \$40,000	<input type="checkbox"/>	<input type="checkbox"/>

\$40,001 - \$50,000	<input type="checkbox"/>	<input type="checkbox"/>
\$50,001 - \$75,000	<input type="checkbox"/>	<input type="checkbox"/>
\$75,001 and over	<input type="checkbox"/>	<input type="checkbox"/>

18. How likely would it be that you would be unemployed if you did not have a job with your current weatherization employer?

- a. Very likely
- b. Likely
- c. Neither likely or unlikely
- d. Unlikely
- e. Very unlikely

19. How satisfactory are these aspects of your job weatherizing low-income homes?

	Very satisfactory	Satisfactory	Neither satisfactory nor unsatisfactory	Unsatisfactory	Very unsatisfactory
a. Pay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Health benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Steady work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Boss/supervisor(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Co-workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Interactions with clients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Flexibility of work schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Dress code	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Paid time off policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Retirement benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Job safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. Do you view your current employment in low-income weatherization as a career or just another job?

- e. Definitely a career
- f. Mostly a career
- g. Mostly just a job
- h. Definitely just a job

21. What share of the weatherization skills you apply in your job did you learn...

	None	Some	A Lot	Most / All
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a. prior to entering the weatherization field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. through on-the-job training & experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. formal weatherization training (classes, workshops, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. How much structured weatherization-related ‘on-the-job’ training or mentoring have you had during the past five years?

- a. A great deal
- b. Quite a bit
- c. Some
- d. Not much
- e. None at all

23. Which of the following types of formal training have you attended in the last five years? (Select all that apply)

- a. National Weatherization Training Conference
- b. Affordable Comfort Conference
- c. Regional weatherization conference
- d. Your state’s weatherization conference
- e. Classroom training at a training center
- f. Classroom training at your agency
- g. Web cast
- h. Other (please specify)_____

24. What is the most valuable weatherization training experience you have had in the last five years? _____

25. On which weatherization topics have you received formal training in the past five years? (Select all that apply)

- Diagnostic testing and assessment procedures
- Insulation
- Space heating, ventilation, air conditioning
- Infiltration/air sealing measures
- Doors and window installation/repair
- Hot water heating
- Base loads (e.g., lighting, refrigerators)

26. On which topics have you had professional development training in the past five years that could take you to the next level in your weatherization career? (Select all that apply)

- a. Management
- b. Client education
- c. Auditing/estimating for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- d. Monitoring/quality control

- e. Financial topics
- f. Outreach and communications
- g. Other (please specify)_____

27. On which health and safety topics have you received training in the past five years? (Select all that apply)

- a. Lead
- b. Indoor air quality
- c. Mold and mildew
- d. Fire safety
- e. Asbestos
- f. General crew safety
- g. Other health and safety (please specify)_____

28. Is there training you think you need in your current job, but have not been able to get?

- a. Yes
- b. No (go to Q31)

29. In what areas do you feel more training would be useful in your current weatherization job? (Select all that apply)

- a. Diagnostic testing and assessment procedures
- b. Insulation for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- c. Space heating, ventilation, air conditioning for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- d. Infiltration/air sealing measures for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- e. Door window installation/repair for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- f. Hot water heating for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- g. Baseloads (e.g., lighting, refrigerators) for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- h. Client education

- i. Auditing/estimating for:
 - i. single family dwellings
 - ii. multifamily dwellings
 - iii. mobile homes
- j. Monitoring/quality control
- k. Lead
- l. Indoor air quality
- m. Mold and mildew
- n. Fire safety
- o. Asbestos
- p. General crew safety
- q. Other (please specify)_____

30. What has kept your training needs from being met in the last five years? (Select all that apply)

- a. Lack of training funds
- b. Not senior enough
- c. Training not available at the right times
- d. Training not available at the right places
- e. Available training is poor in quality
- f. Not aware of training opportunities that meet training needs
- g. Haven't asked for the training
- h. I have to pay for my own training
- i. Don't know
- j. None of these
- k. Other (please specify) _____

31. What national professional certifications do you have? (Select all that apply)

- a. BPI Building Analyst
- b. BPI Envelope
- c. BPI Residential Building Envelope Accessible Areas Air Leakage Control Installer
- d. Residential Building Envelope Whole House Air Leakage Control Crew Chief
- e. BPI Manufactured Housing
- f. BPI Heating
- g. BPI Air Conditioning and Heat Pump
- h. BPI Multifamily
- i. HERS
- j. LEED
- k. Lead Safe Weatherization
- l. Lead Certified Renovator
- m. NAHB Green Building

32. What other certification do you have? (Please fill in the table below as appropriate)

Organization providing certification	Subject of certification

33. Have you gained training and/or experience from your current low-income weatherization job that could be useful if you had to find a new job?

- c. Yes
- d. No (skip Q34)

34. How useful could your training and/or experience from your current weatherization job be for a job in these fields and job types?

	Extremely Useful	Very Useful	Useful	Not Very Useful	Not at all Useful
a. Low-income residential weatherization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Non-low-income residential weatherization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. General residential construction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. General commercial and industrial retrofit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Supervisory positions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Running your own business	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(Go to Q54)

35. Please choose the description that best describes your current primary employer:

- a. Private sector contractor (Choose if you are self-employed in this field)
- b. Local government
- c. State government
- d. Federal government
- e. Non-profit organization
- f. Other type of for-profit firm
- g. Other _____

36. How long have you been working for your current primary employer?

_____ (Years) _____ (months)

37. Please choose the description that best describes your current job.

- a. Owner
- b. Manager
- c. Field crew chief
- d. Crew Member

- e. Auditor
- f. Inspector
- g. Other _____

38. How long have you had your current job title?
 _____ (Years) _____ (months)

39. Do you have health insurance?
- c. Yes
 - d. No (go to Question 41)

40. Who provides your health insurance?
- a. Your current primary employer
 - b. Your state
 - c. You purchase your own insurance
 - d. You have insurance through a family member
 - e. Other _____

41. What is your annual income from your primary job?
- a. \$0-\$10,000
 - b. \$10,001 - \$15,000
 - c. \$15,001 - \$20,000
 - d. \$20,001 - \$25,000
 - e. \$25,001 - \$30,000
 - f. \$30,001 - \$40,000
 - g. \$40,001 - \$50,000
 - h. \$50,001 - \$75,000
 - i. \$75,001 and over

42. How satisfactory are these aspects of your job primary job?

	Very satisfactory	Satisfactor y	Neither satisfactory nor unsatisfactory	Unsatisfactor y	Very unsatisfactory
l. Pay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Health benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Steady work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o. Boss/supervisor(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p. Co-workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q. Interactions with clients	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r. Flexibility of work schedule	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s. Dress code	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

t. Paid time off policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
u. Retirement benefits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. Job safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

43. How many different employers of all kinds have you had in the last five years? _____

44. How likely would it be that you would be unemployed if you did not have a job with your current primary employer?

- j. Very likely
- k. Likely
- l. Neither likely or unlikely
- m. Unlikely
- n. Very unlikely

45. Do you view your current employment as a career or just another job?

- i. Definitely a career
- j. Mostly a career
- k. Mostly just a job
- l. Definitely just a job

46. Please choose the description that best describes your career-related plans for the next two years.

- a. Plan to stay with current primary employer
- b. Plan to find another job in same field
- c. Plan to find a job in another field
- d. Plan to start own company
- e. Plan to go back to school
- f. Plan to retire
- g. Other _____

47. What national professional certifications do you have? (Select all that apply)

- a. BPI Building Analyst
- b. BPI Envelope
- c. BPI Residential Building Envelope Accessible Areas Air Leakage Control Installer
- d. Residential Building Envelope Whole House Air Leakage Control Crew Chief
- e. BPI Manufactured Housing
- f. BPI Heating
- g. BPI Air Conditioning and Heat Pump
- h. BPI Multifamily
- i. HERS
- j. LEED
- k. Lead Safe Weatherization
- l. Lead Certified Renovator
- m. NAHB Green Building

48. What other certification do you have? (Please fill in the table below as appropriate)

Organization providing certification	Subject of certification

(Go to Q54)

49. {IF ANSWERED (3) or (4) to Q5} Have you looked for work during the last 4 weeks?

- (1) Yes (Go to Q51)
- (2) No
- (3) Don't Know/Not Sure
- (4) Refused

50. {IF ANSWERED (2) or (3) to Q49} What is the main reason you were not looking for work during the LAST 4 WEEKS? CHECK ALL THAT APPLY

- (1) Believes no work available in line of work or area
- (2) Couldn't find any work
- (3) Lacks necessary schooling, training, skills or experience
- (4) Employers think too young or too old
- (5) Other types of discrimination
- (6) Can't arrange child care
- (7) Family responsibilities
- (8) In school or other training
- (9) Ill health, physical disability
- (10) Transportation problems
- (11) Other
- (12) Don't Know/Not Sure
- (13) Refused

(Go to Q54)

51. Please choose the best description of your current educational status.

- a. Enrolled in high school
- b. Enrolled in community college
- c. Enrolled in 4-year university or college
- d. Enrolled in graduate school
- e. Other _____

52. Did you take the just completed training to satisfy any course requirements?

- a. Yes
- b. No

53. Were you required to take the just completed training as part of your participation in a community-based social program (e.g., Teens at Risk)?

- a. Yes
- b. No

All Respondents

54. What is your age? _____

55. What is your gender?

- a. Male
- b. Female

56. What is the highest level of school you have completed or the highest degree you have received? (Select best option)

- a. Did not attend high school
- b. Some high school but no diploma
- c. High school diploma or the equivalent (For example: GED)
- d. Some college but no degree
- e. Associate degree in college occupational/vocational or academic program
- f. Bachelor's degree
- g. Advanced college degree

57. Please indicate your race and ethnicity. (Select all that apply)

- a. American Indian or Alaska Native
- b. Asian
- c. Black or African American
- d. Hispanic or Latino
- e. Native Hawaiian or other Pacific Islander
- f. White

58. Is English your native language?

- c. Yes (go to Question 60)
- d. No

59. What is your native language? _____

60. What languages can you speak conversantly? _____