

U.S. DEPARTMENT OF STATE
Summer Language Institute: Study of [Insert Language] in [Insert Country]
[Insert Year] Pre-Program Survey

Please know that your answers will be strictly confidential and will in no way affect your participation in the program. We will use the data for analytical and evaluative purposes only.

Please feel free to give us your honest opinions. This survey is not a test, and there are no right or wrong answers. Thank you for your participation in this survey.

Privacy Act and Paperwork Reduction Act Statements:

The information solicited on this survey is requested pursuant to the Government Performance and Results Act of 1993 (P.L. 103-62) and the Mutual Educational and Cultural Exchange Act of 1961, as amended, also known as the Fulbright-Hays Act (22 U.S.C. 2451, et seq.). In order to ensure that the U.S. Department of State's international exchange programs meet statutory program requirements (22 U.S.C. 2460(c)), the Department's Bureau of Educational and Cultural Affairs (ECA) regularly monitors the programs, gathers data about program accomplishments, and evaluates selected ones. ECA uses the information collected to inform program design, management, and funding. All personal information that is collected through surveys is considered confidential. All responses are coded to ensure the confidentiality of individual responses. Data collected under this study will not be shared, sold, or used for fundraising purposes. Survey data and findings will be used only in an aggregate form for the express purposes of fulfilling the data needs of the outcome assessment. Responses to this survey are voluntary.

Public reporting burden for this collection of information is estimated to average fifteen (15) minutes to respond to this survey, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An Agency may not conduct or sponsor, and respondents are not required to respond to, a collection of information unless it displays a valid OMB control number. Please send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to: A/ISS/DIR, U.S. Department of State, Washington, D.C. 20520.

1. Which program will you attend? (Drop down List: China Institute Beijing, University of Denver, Chicago Public Schools) **[Question Only for Chinese Language Group]**

2. What is your primary reason for participating in the Summer Language Institute?

3. There are many different reasons for participating in the exchange program. In the table below, please identify your **three** most important reasons for participating.

	✓
To learn and practice [Insert language]	
To represent the United States abroad	
To learn about the culture of the Arabic world [Only for Arabic Groups]	
To learn Modern Standard Arabic [Only for Arabic Groups]	
To share my culture with others	
To make friends with [Insert country] students and their families	
To increase my understanding of contemporary [Insert country] and [Insert country] society, people, and culture	
To learn more about [Insert country] history—ancient to modern	
Other (Please write in): _____	

4. Do you have any connections to **[Insert country]**? *Please check all boxes that apply.*

	✓
Family ties	
Friends	
Religion	
Teachers	
Academic	
Professional	
Travel/Personal Experience	
No Ties	

5. If you have family ties to **[Insert country]**, please identify the family members below. *Please check all boxes that apply.*

	✓
Mother	
Father	
Maternal Grandmother	
Maternal Grandfather	
Paternal Grandmother	
Paternal Grandfather	
Not applicable	

6. If you have studied **[Insert language]** formally (in school) prior to participating in the Summer Language Institute, how many years did you study? *Please check one box.*

	✓
Less than one year	
One year	
Two years	
Three years	
Four or more years	
Did not study language formally	

7. Please rate your current **[Insert language]** language skill level. *Please check one box in each row.*

	None	Beginner	Advanced Beginner	Intermediate	Advanced
[Insert language]: Reading comprehension [Only for Chinese Group] (pinyin Romanization and character recognition)					
[Only for Arabic Groups] Colloquial Arabic (conversational)					
[Only for Arabic Groups] Modern Standard Arabic: Composition					
[Insert language]: Grammar and vocabulary					
[Only for Chinese Group] Mandarin: Writing (pinyin Romanization and character writing)					
[Only for Chinese Group] Mandarin: Speaking					
[Only for Chinese Group] Mandarin: Listening comprehension					

8. Please rate your knowledge or understanding of the following topics. *Please check one box in each row.*

	No Knowledge	Less Than Basic	Basic Knowledge	Beyond Basic	Advanced Knowledge
[Insert country] political system					
[Insert country] economy					
[Insert country] values and culture					
Religious and ethnic diversity in [Insert country]					
Freedom of speech and the press in [Insert country]					
Voluntary community service in [Insert country]					

	No Knowledge	Less Than Basic	Basic Knowledge	Beyond Basic	Advanced Knowledge
Daily life in [Insert country]					

9. How do you view the **[Insert country]** Government and the **[Insert country]** people? *Please check one box in each row.*

	Strongly Unfavorable	Generally Unfavorable	Neither Favorable Nor Unfavorable	Generally Favorable	Strongly Favorable
[Insert country] Government					
[Insert country] people					

10. How do you view the **[Insert country]** Government and its relationship with the United States?

	Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
The [Insert country] Government is a trustworthy partner for my country					

11. What is the first positive thing you think about when you think about **[Insert country]**?

12. What is the first negative thing you think about when you think about **[Insert country]**?

13. Which of these fields are you considering studying or working in when you graduate? *Please check all boxes that apply.*

	✓
Agriculture	
Arts and Humanities (history, languages, literature, art, theater)	
Athletics	
Business Administration, Finance	
Computer Science, Information Technology	
Education	
Engineering	
Environment	
Government	
Humanitarian Affairs, Development Assistance, Conflict Resolution	
International Relations	
Labor, Trade Unions	

Law, Judicial, Law Enforcement	
Library and Information Science	
Media, Mass Communications, Journalism, Communication Technology, Advertising, Graphics	
Medicine	
Military Service	
Public Administration	
Public Health	
Religion	
Science (physics, math, chemistry, biology, astronomy, geography, agronomy)	
Social Sciences (sociology, economics, psychology, political science)	
Social Work	
Teaching English, English language instructions	
Not Sure	
Other (Please write in): _____	

14. Do you see yourself using **[Insert language]** as part of your future profession? *Please check one box.*

	✓
Yes	
No	
Not sure yet	

15. Home state: **[Drop Down List]**

16. Which best describes the geographic location where you live? *Please check one box.*

	✓
A major city	
A suburb of a major city	
A small city or town	
A rural area	

17. Age: **[Drop Down List 15-19]**

18. Gender:

	✓
Female	
Male	

19. Which religion do you most closely identify with? *Please check one box.*

	✓		✓
Baha'ism		Judaism	
Buddhism		Shintoism	
Christianity (for example: Orthodox, Catholic, Protestant)		Sikhism	

Confucianism		Taoism	
Hinduism		Zoroastrianism	
Islam		None	
Jainism		Other (Please write in):	

20. Thank you for completing this survey! If you have additional comments you would like to make, about any of the things above, about your participation so far, about what you have been proud to share, or something we haven't touched upon, please do so here. We value your thoughts very much.

21. How long did it take you to complete this survey? _____ minutes