

Contract No.: SS00-05-60084
MPR Reference No.: 6209-139

MATHEMATICA
Policy Research, Inc.

**Youth Transition
Demonstration**

**36-Month YTD
Follow-Up Instrument**

January 7, 2009

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NOTE: There is no Section VII in this version.

SECTION I: EDUCATION AND TRAINING

I.A1 The first questions are about school. (Are you/Is NAME) currently attending or enrolled in school?

(YTD-9 mod

PROBE: Please include regular high school, special high school, adult basic education or GED courses, vocational or trade school, and college or university courses.

PROBE: (Do you/Does NAME) go to school?

PROBE: At school they teach (you/him/her) how to do things, like how to read, write, or do math.

PROBE: IF NO: When was the last time (you/he/she) went to school?

PROBE IF SUMMER: (Are you/Is NAME) off school for the summer. Will (you/he/she) be going back to school in the fall?

INTERVIEWER: CODE "YES" IF ON SUMMER BREAK.

- YES 1 (GO TO I.B1)
- NO 0
- DON'T KNOW d
- REFUSED r

I.A1a (Are you/Is NAME) currently in a training program or taking classes to help you learn job skills or get a job?

PROBE: Please include classes to learn English or improve your reading skills.

- YES 1 (GO TO I.B1)
- NO 0
- DON'T KNOW d
- REFUSED r

I.A2 **ASK IF NEITHER CURRENTLY IN SCHOOL OR TRAINING PROGRAM:**

Did (you/NAME) go to school, attend a training program or take any classes within the past year?
That is, at any time since [oneyrago]?

PROBE: IF DON'T KNOW: When was the last time (you/he/she) went to school or training?

YES 1
NO 0
DON'T KNOW d
REFUSED r

} → (GO TO I.D1)

I.B1 Please tell me the name of each training program or school (you/NAME) attended within the past year? Let's begin with the one you attended most recently and work backwards.

IF UNABLE TO STATE NAME OF SCHOOL OR PROGRAM: I need to enter something that will help us identify the school later. What could I enter that will help identify it? A street name, an address, even the color of the building would be helpful.

PROBE: Any others?

INTERVIEWER: RECORD NAME OF EACH PLACE

SCHOOL/TRAINING PROGRAM 1 NAME: _____

SCHOOL/TRAINING PROGRAM 2 NAME: _____

SCHOOL/TRAINING PROGRAM 3 NAME: _____

	SCHOOL 1	SCHOOL 2	SCHOOL 3
I.B2 Thinking about (NAME OF SCHOOL). What type of school/training program is (this/that)?	Regular high school,.....1 Special high school for persons with disabilities,2 Post-secondary, vocational, technical business or trade school,.....3 2-year college or community college,....4 4-year college or university,5 Or something else (SPECIFY)6 SPECIAL EDUCATION NOT IN A SCHOOL.....7 HOME SCHOOLED.....8	Regular high school,1 Special high school for persons with disabilities,.....2 Post-secondary, vocational, technical business or trade school,3 2-year college or community college,4 4-year college or university,5 Or something else (SPECIFY)6 SPECIAL EDUCATION NOT IN A SCHOOL.....7 HOME SCHOOLED8	Regular high school,.....1 Special high school for persons with disabilities,2 Post-secondary, vocational, technical business or trade school,.....3 2-year college or community college,....4 4-year college or university,5 Or something else (SPECIFY)6 SPECIAL EDUCATION NOT IN A SCHOOL.....7 HOME SCHOOLED.....8
I.B3 When did you start (this/that) (school/course/training program)?	START DATE: __ /20 __ MONTH YEAR MORE THAN ONE YEAR AGO999	START DATE: __ /20 __ MONTH YEAR MORE THAN ONE YEAR AGO999	START DATE: __ /20 __ MONTH YEAR MORE THAN ONE YEAR AGO999
I.B4 (Are you/Is NAME) still attending (NAME OF SCHOOL)?	YES.....1 NO.....0	YES1 NO.....0	YES.....1 NO.....0
I.B5 IF NOT CURRENTLY ATTENDING, ASK: And when did you stop going to (this/that) (school/course/training program)?	END DATE: __ /20 __ MONTH YEAR	END DATE: __ /20 __ MONTH YEAR	END DATE: __ /20 __ MONTH YEAR
I.B6 IF I.B3 OR I.B5 "DON'T KNOW"—CANNOT ANSWER EXACT DATES, PROBE FOR TIME ATTENDED SCHOOL: Within the past year about how many months did (you/NAME) go to (NAME OF SCHOOL)? PROBE: Your best estimate is fine.	__ MONTHS IF DON'T KNOW: Was it . . . All year, including the summer,1 All year, except for the summer (9 months),.....2 About half the year (6 months),3 Between 3 and 6 months, or4 Less than 3 months?5	__ MONTHS IF DON'T KNOW: Was it . . . All year, including the summer,1 All year, except for the summer (9 months),2 About half the year (6 months),3 Between 3 and 6 months, or4 Less than 3 months?5	__ MONTHS IF DON'T KNOW: Was it . . . All year, including the summer,1 All year, except for the summer (9 months),2 About half the year (6 months),3 Between 3 and 6 months, or4 Less than 3 months?5
I.C1 IF CURRENTLY IN HIGH SCHOOL, ASK: (Are you/Is NAME) in (your/his/her) freshman, sophomore, junior or senior year of school?	FRESHMAN/9TH GRADE.....1 SOPHOMORE/10TH GRADE.....2 JUNIOR/11TH GRADE.....3 SENIOR/12TH GRADE4 UNGRADED5	FRESHMAN/9TH GRADE1 SOPHOMORE/10TH GRADE.....2 JUNIOR/11TH GRADE3 SENIOR/12TH GRADE4 UNGRADED.....5	FRESHMAN/9TH GRADE.....1 SOPHOMORE/10TH GRADE2 JUNIOR/11TH GRADE.....3 SENIOR/12TH GRADE4 UNGRADED5
I.C1a IF UNGRADED, ASK: When do you expect to graduate? PROBE: How many more years (do you/does NAME) have left in school?	INTERVIEWER NOTE: If respondent reports graduate "this year", code year of the current school year. 20 __ or __ YEARS	INTERVIEWER NOTE: If respondent reports graduate "this year", code year of the current school year. 20 __ or __ YEARS	INTERVIEWER NOTE: If respondent reports graduate "this year", code year of the current school year. 20 __ or __ YEARS
I.C2 What type of classes ([are/were] you taking/[is/was] NAME taking) at (NAME OF SCHOOL)? (Are/Were) the classes mostly vocational courses to train for a job, like computer or business courses, or mostly academic courses, like English or science? PROBE: (Are you/Is NAME) taking courses that are preparing (you/him/her) for a job or for college?	MOSTLY VOCATIONAL.....1 MOSTLY ACADEMIC.....2 BOTH, MIXED3 NEITHER—CLASSES ARE FOR PERSONAL INTEREST, RECREATION4	MOSTLY VOCATIONAL1 MOSTLY ACADEMIC2 BOTH, MIXED3 NEITHER—CLASSES ARE FOR PERSONAL INTEREST, RECREATION.....4	MOSTLY VOCATIONAL.....1 MOSTLY ACADEMIC.....2 BOTH, MIXED3 NEITHER—CLASSES ARE FOR PERSONAL INTEREST, RECREATION4

	SCHOOL 1	SCHOOL 2	SCHOOL 3
<p>I.C3 IF NOT IN HIGH SCHOOL, ASK: (NLTS – SSF) Are (you/Is NAME) – (Were you/Was NAME) going to (NAME OF SCHOOL) full-time or part-time?</p> <p>PROBE: By full-time, we mean taking a full course load of 12 credits or more at a time or being in class at least 12 hours per week.</p>	<p>FULL-TIME1</p> <p>PART-TIME2</p>	<p>FULL-TIME1</p> <p>PART-TIME2</p>	<p>FULL-TIME1</p> <p>PART-TIME2</p>
<p>I.C4 (Are you/Is NAME) – (Were you/Was NAME) working toward a diploma, certificate, or license from this school?</p> <p>(NLTS – SSF)</p>	<p>YES1</p> <p>NO0</p>	<p>YES1</p> <p>NO0</p>	<p>YES1</p> <p>NO0</p>
<p>I.C5 IF NO LONGER ATTENDING (NAME OF SCHOOL), ASK: Why did (you/he/she) stop going to (NAME OF SCHOOL)?</p> <p>(NLTS – SC1)</p> <p>PROBE: Why (are you/Is NAME) no longer taking classes at (NAME OF SCHOOL)?</p> <p>PROBE: Did (you/NAME) graduate or complete (your/his/her) classes, or did (you/he/she) leave for some other reason? What was the reason?</p> <p>PROBE: Any other reason?</p> <p>LIST NOT READ TO RESPONDENT. CHECK ALL THAT APPLY:</p>	<p>GRADUATED01</p> <p>FINISHED CLASSES WANTED TO TAKE02</p> <p>TRANSPORTATION PROBLEMS03</p> <p>DIDN'T GET SERVICES NEEDED04</p> <p>TOO EXPENSIVE/ COULDN'T AFFORD IT05</p> <p>DIDN'T HAVE TIME; SCHEDULE CONFLICT; CONFLICTS WITH OTHER DEMANDS06</p> <p>POOR GRADES/NOT DOING WELL IN SCHOOL07</p> <p>DIDN'T LIKE SCHOOL08</p> <p>WANTED/NEEDED TO FIND A JOB09</p> <p>OFFERED A JOB/CHOSE TO WORK10</p> <p>WANTED TO ENTER MILITARY11</p> <p>DIDN'T GET IN TO THE PROGRAM SM WANTED12</p> <p>ILLNESS/DISABILITY; TOO SICK TO GO13</p> <p>GOT MARRIED14</p> <p>GOT PREGNANT OR HAD A CHILD15</p> <p>MOVED16</p> <p>SCHOOL TOO DANGEROUS17</p> <p>WANTED TO TRAVEL18</p> <p>FRIENDS WEREN'T IN SCHOOL/ FRIENDS WERE DROPPING OUT19</p> <p>COULDN'T GET ALONG WITH TEACHERS20</p> <p>COULDN'T GET ALONG WITH OTHER STUDENTS21</p> <p>COULDN'T GET CHILD CARE22</p> <p>PARENTS/FAMILY DID WANT SM TO GO23</p> <p>OTHER (SPECIFY)24</p> <p>_____</p>	<p>GRADUATED01</p> <p>FINISHED CLASSES WANTED TO TAKE02</p> <p>TRANSPORTATION PROBLEMS03</p> <p>DIDN'T GET SERVICES NEEDED04</p> <p>TOO EXPENSIVE/ COULDN'T AFFORD IT05</p> <p>DIDN'T HAVE TIME; SCHEDULE CONFLICT; CONFLICTS WITH OTHER DEMANDS06</p> <p>POOR GRADES/NOT DOING WELL IN SCHOOL07</p> <p>DIDN'T LIKE SCHOOL08</p> <p>WANTED/NEEDED TO FIND A JOB09</p> <p>OFFERED A JOB/CHOSE TO WORK10</p> <p>WANTED TO ENTER MILITARY11</p> <p>DIDN'T GET IN TO THE PROGRAM SM WANTED12</p> <p>ILLNESS/DISABILITY; TOO SICK TO GO13</p> <p>GOT MARRIED14</p> <p>GOT PREGNANT OR HAD A CHILD15</p> <p>MOVED16</p> <p>SCHOOL TOO DANGEROUS17</p> <p>WANTED TO TRAVEL18</p> <p>FRIENDS WEREN'T IN SCHOOL/ FRIENDS WERE DROPPING OUT19</p> <p>COULDN'T GET ALONG WITH TEACHERS20</p> <p>COULDN'T GET ALONG WITH OTHER STUDENTS21</p> <p>COULDN'T GET CHILD CARE22</p> <p>PARENTS/FAMILY DID WANT SM TO GO23</p> <p>OTHER (SPECIFY)24</p> <p>_____</p>	<p>GRADUATED01</p> <p>FINISHED CLASSES WANTED TO TAKE02</p> <p>TRANSPORTATION PROBLEMS03</p> <p>DIDN'T GET SERVICES NEEDED04</p> <p>TOO EXPENSIVE/ COULDN'T AFFORD IT05</p> <p>DIDN'T HAVE TIME; SCHEDULE CONFLICT; CONFLICTS WITH OTHER DEMANDS06</p> <p>POOR GRADES/NOT DOING WELL IN SCHOOL07</p> <p>DIDN'T LIKE SCHOOL08</p> <p>WANTED/NEEDED TO FIND A JOB09</p> <p>OFFERED A JOB/CHOSE TO WORK10</p> <p>WANTED TO ENTER MILITARY11</p> <p>DIDN'T GET IN TO THE PROGRAM SM WANTED12</p> <p>ILLNESS/DISABILITY; TOO SICK TO GO13</p> <p>GOT MARRIED14</p> <p>GOT PREGNANT OR HAD A CHILD15</p> <p>MOVED16</p> <p>SCHOOL TOO DANGEROUS17</p> <p>WANTED TO TRAVEL18</p> <p>FRIENDS WEREN'T IN SCHOOL/ FRIENDS WERE DROPPING OUT19</p> <p>COULDN'T GET ALONG WITH TEACHERS20</p> <p>COULDN'T GET ALONG WITH OTHER STUDENTS21</p> <p>COULDN'T GET CHILD CARE22</p> <p>PARENTS/FAMILY DID WANT SM TO GO23</p> <p>OTHER (SPECIFY)24</p> <p>_____</p>

DO NOT ASK IF YOUTH IS CURRENTLY IN HIGH SCHOOL:

I.D1 What is the highest grade or year of school that (you have/NAME has) finished?

(YTD-14)

- 8TH GRADE OR LESS 1
 - 9TH GRADE/FRESHMAN IN HS 2
 - 10TH GRADE/SOPHOMORE IN HS..... 3
 - 11TH GRADE/JUNIOR IN HS 4
 - 12TH GRADE/SENIOR IN HS..... 5
 - SOME COLLEGE OR
TECHNICAL SCHOOL..... 6
 - COLLEGE OR TECHNICAL SCHOOL..... 7
 - UNGRADED SCHOOL..... 8
 - HOME SCHOOLED 9
 - OTHER GRADE (SPECIFY) 10
-
- DON'T KNOW d
 - REFUSED r

PROGRAMMER NOTE: IF YOUTH REPORTED HAVING A HIGH SCHOOL DIPLOMA AT 12M (I.D2=1), SKIP TO I.D3

ASK IF NOT CURRENTLY IN HIGH SCHOOL:

I.D2 (Do you/Does NAME) have a high school diploma, a GED, also known as a graduate
(YTD-15) equivalency degree, a certificate of completion, or (do you/does [he/she]) have none of these?

CODE LEFT WITHOUT GRADUATING AS “NONE OF THESE.”

- HIGH SCHOOL DIPLOMA 1
- GED 2
- CERTIFICATE OF COMPLETION 3
- NONE OF THESE 4
- DON'T KNOW d
- REFUSED r

ASK IF HIGHEST GRADE WAS COLLEGE OR TECHNICAL

I.D3 (Do you/Does NAME) have a college degree or a technical certificate?

- YES.....1
 - NO0
 - DON'T KNOWd
 - REFUSED.....r
- } → (GO TO SECTION II)

ASK IF HAS A COLLEGE DEGREE OR TECHNICAL CERTIFICATE:

I.D4 What college degrees or technical certificates do (you have/[he/she] has)?

READ IF NECESSARY. CODE ALL THAT APPLY

- MASTERS OR HIGHER.....1
 - BACHELORS.....2
 - ASSOCIATES.....3
 - TECHNICAL CERTIFICATE (SPECIFY
AS MANY AS SAMPLE MEMBER HAS
EARNED).....4
-
- DON'T KNOW.....d
 - REFUSED.....r

I.D4_specify. How many technical certificates have you earned?

CERTIFICATES

SECTION II: EMPLOYMENT

In this section, I will ask questions about jobs that (you/NAME) have had within the past year. This includes any job or jobs you may currently have as well as jobs that ended after (MONTH AND YEAR ONE YEAR AGO).

II.A1 (Have you/Has [he/she]) worked at a job or a business at any time within the past year? Please include all jobs since (MONTH AND YEAR ONE YEAR AGO), even if (you/NAME) only worked for a short time.

PROBE: Please include jobs that (you/Name) currently (have/has) as well as jobs that ended within the past year. Also, please include jobs at which (you/Name) (are/is) or (were/was) self-employed.

PROBES: A job is work either paid or unpaid other than work around the house.

A job could be a school sponsored job or a work study job.

Jobs include internships, apprenticeships and volunteer work even if (you/NAME) didn't get paid.

A job could be working for a business or organization or work that (you/he/she) do on (your/his/her) own such as babysitting or dog walking, that (you get/NAME gets) paid to do.

Do not include chores that (you do/NAME does) around the house, even if (you are/NAME is) paid to do them.

YES..... 1
NO 0 (GO TO II.F4)
DON'T KNOW d
REFUSED..... r

II.A1_num. How many jobs (have you /has NAME) had within the past year?

Please include jobs that (you/Name) currently (have/has) as well as jobs that ended within the past year. Also, please include jobs at which (you/Name) (are/is) or (were/was) self-employed or only worked at for a short period of time

PROBES: A job is work either paid or unpaid other than work around the house.

A job could be a school sponsored job or a work study job.

Jobs include internships, apprenticeships and volunteer work even if (you/NAME) didn't get paid.

A job could be working for a business or organization or work that (you/he/she) do on (your/his/her) own such as babysitting or dog walking, that (you get/NAME gets) paid to do.

Do not include chores that (you do/NAME does) around the house, even if (you are/NAME is) paid to do them.

|_|_| JOBS

DON'T KNOWd

REFUSEDr

IF II.A1=1 and II.A1_num=DK or R, TREAT AS 1 JOB. IF II.A1=D or R and II.A1_num=D or R, skip to II.F4.

(II.A2 thru II.E2 ASKED FOR EACH JOB AT II.A1 – NOTE IN REFERENCE TO THIS FOLLOWING II.E2)

II. A2 ONE JOB: What is the name of the place where [you work or worked at/NAME works or worked at]?

IF II.A1_num>1 FIRST JOB: Now, I would like to get more information about each job [you have/NAME has] has since [RA date]. I'd like to start with the [your/his/her] most recent job and work backwards. What is the name of the place [you/NAME] currently work at or worked at most recently? Please include jobs at which [you are /he is / she is] self-employed.

IF II.A1_num>1 2nd, 3rd, 4th,...x JOBS: Now, I would like to get more information about each of the other jobs [you have/NAME has] had since [RA date]. What is the name of the second place [you have/he has/she has] worked at since [RA Date]? Please include jobs at which [you are /NAME is] self-employed.

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	JOB 1 CURRENT/MAIN JOB/OR MOST RECENT JOB	JOB 2 NEXT MOST RECENT JOB
<p>II.A2 What is the name of the place where (you/he/she) (work/worked)?</p> <p>PROBE: Please include jobs at which (you are/NAME is) self-employed.</p>	<p>NAME OR PLACE: _____</p> <p>_____</p> <p style="text-align: center;">OR</p> <p>SELF-EMPLOYED 99</p>	<p>NAME OR PLACE: _____</p> <p>_____</p> <p style="text-align: center;">OR</p> <p>SELF-EMPLOYED 99</p>
<p>II.B1 (Do you/Does NAME) currently work at (NAME OF PLACE)?</p> <p>IF SELF-EMPLOYED: (Do you/Does NAME) still currently do this job? (GO TO II.B3)</p>	<p>YES 1</p> <p>NO 0</p>	<p>YES 1</p> <p>NO 0</p>
<p>II.B2 What does (NAME OR PLACE) make or do?</p> <p>PROBE: What kind of place is (NAME OR PLACE)?</p>	<p>_____</p> <p>_____</p>	<p>_____</p> <p>_____</p>
<p>II.B3 What (do/did) (you/he/she) do at (NAME OR PLACE)?</p> <p>PROBE: What (are/were) (your/his/her) responsibilities?</p> <p>PROBE: What kinds of things (have you/ has [he/she]) done there?</p> <p>PROBE: Tell me what (you/he/she) (do/did) when (you/he/she) (get/got) to work? After that? Then what?</p> <p>IF SELF-EMPLOYED, ASK: What (do/did) (you/he/she) do?</p>	<p>RECORD VERBATIM AND CODE:</p> <p>_____</p> <p>ASSEMBLY WORK (SORTING STUFFING) 1</p> <p>ANIMAL CARE (DOG WALKING, VETERINARY HELPER) 2</p> <p>CAMP COUNSELOR 3</p> <p>CASHIER—GROCERY STORE, FAST FOOD PLACE, ETC. 4</p> <p>CHILD CARE—BABYSITTING/MOTHERS HELPER 5</p> <p>CLEANING—JANITOR/MAID 6</p> <p>CLERICAL—FILING, RECEPTIONIST, SECRETARY, TYPING 7</p> <p>COMPUTER WORK—DATA ENTRY/PROGRAMMING/ WEB PAGE DEVELOPMENT 8</p> <p>DELIVERY—OF FOOD OR NEWSPAPERS OR PRESCRIPTIONS 9</p> <p>FARM WORK 10</p> <p>FOOD SERVICE—BUS BOY, WAITER, COOK 11</p> <p>GARDENING AND GROUNDS MAINTENANCE 12</p> <p>GAS STATION ATTENDANT 13</p> <p>HEALTH CARE AIDE—PERSONAL CARE ATTENDANT, NURSES AIDE 14</p> <p>MECHANIC (AUTO REPAIR) 15</p> <p>RETAIL SALES 16</p> <p>SKILLED LABOR APPRENTICE—PLUMBER, CARPENTER, ELECTRICIAN 17</p> <p>SPORTS RELATED—UMPIRE, CADDY, REFEREE, COACH, LIFEGUARD 18</p> <p>STOCK CLERK—GROCERY STORE OR DRUG STORE 19</p> <p>USHER—MOVIE THEATER 20</p> <p>OTHER (SPECIFY) 21</p> <p>_____</p>	<p>RECORD VERBATIM AND CODE:</p> <p>_____</p> <p>ASSEMBLY WORK (SORTING STUFFING) 1</p> <p>ANIMAL CARE (DOG WALKING, VETERINARY HELPER) 2</p> <p>CAMP COUNSELOR 3</p> <p>CASHIER—GROCERY STORE, FAST FOOD PLACE, ETC. 4</p> <p>CHILD CARE—BABYSITTING/MOTHERS HELPER 5</p> <p>CLEANING—JANITOR/MAID 6</p> <p>CLERICAL—FILING, RECEPTIONIST, SECRETARY, TYPING 7</p> <p>COMPUTER WORK—DATA ENTRY/PROGRAMMING/ WEB PAGE DEVELOPMENT 8</p> <p>DELIVERY—OF FOOD OR NEWSPAPERS OR PRESCRIPTIONS 9</p> <p>FARM WORK 10</p> <p>FOOD SERVICE—BUS BOY, WAITER, COOK 11</p> <p>GARDENING AND GROUNDS MAINTENANCE 12</p> <p>GAS STATION ATTENDANT 13</p> <p>HEALTH CARE AIDE—PERSONAL CARE ATTENDANT, NURSES AIDE 14</p> <p>MECHANIC (AUTO REPAIR) 15</p> <p>RETAIL SALES 16</p> <p>SKILLED LABOR APPRENTICE—PLUMBER, CARPENTER, ELECTRICIAN 17</p> <p>SPORTS RELATED—UMPIRE, CADDY, REFEREE, COACH, LIFEGUARD 18</p> <p>STOCK CLERK—GROCERY STORE OR DRUG STORE 19</p> <p>USHER—MOVIE THEATER 20</p> <p>OTHER (SPECIFY) 21</p> <p>_____</p>

JOB 3 NEXT MOST RECENT JOB	JOB 4 NEXT MOST RECENT JOB	JOB 5 NEXT MOST RECENT JOB
NAME OR PLACE: _____ _____ OR SELF-EMPLOYED 99	NAME OR PLACE: _____ _____ OR SELF-EMPLOYED 99	NAME OR PLACE: _____ _____ OR SELF-EMPLOYED 99
YES..... 1 NO..... 0	YES..... 1 NO..... 0	YES..... 1 NO..... 0
_____ _____	_____ _____	_____ _____
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	JOB 1 CURRENT/MAIN JOB/OR MOST RECENT JOB	JOB 2 NEXT MOST RECENT JOB
II.B4 When did (you/he/she) start working at (NAME OR PLACE)? IF SELF-EMPLOYED, SAY: When did (you/he/she) start working as a (JOB FROM II.B3)?	START DATE: _ _ / 20 _ _ MONTH YEAR MORE THAN ONE YEAR AGO 9999	START DATE: _ _ / 20 _ _ MONTH YEAR MORE THAN ONE YEAR AGO 9999
II.B5 IF CURRENT JOB ASK: How did (you/he/she) find this job? PROBES: How did (you/he/she) hear about this job?	NEWSPAPER AD 1 INTERNET 2 EMPLOYMENT AGENCY (PRIVATE) 3 JOB PLACEMENT OFFICE AT SCHOOL 4 FRIENDS OR RELATIVES 5 DIRECT APPLICATION TO EMPLOYER 6 VOC REHAB OR OTHER SERVICE AGENCY 7 ONE STOP OR WORKFORCE DEVELOPMENT CENTER (UNEMPLOYMENT OFFICE) 8 THE YTD PROGRAM (FILL LOCAL NAMES) 9 OTHER (SPECIFY) 10 _____	NEWSPAPER AD 1 INTERNET 2 EMPLOYMENT AGENCY (PRIVATE) 3 JOB PLACEMENT OFFICE AT SCHOOL 4 FRIENDS OR RELATIVES 5 DIRECT APPLICATION TO EMPLOYER 6 VOC REHAB OR OTHER SERVICE AGENCY 7 ONE STOP OR WORKFORCE DEVELOPMENT CENTER (UNEMPLOYMENT OFFICE) 8 THE YTD PROGRAM (FILL LOCAL NAMES) 9 OTHER (SPECIFY) 10 _____
II.B6 How many hours per week (do/did you) (does/did [he/she]) usually work at this job? USE THE FOLLOWING PROBES TO CALCULATE HOURS WORKED: Which days do (you/he/she) work? What time do (you/he/she) start work? What time do (you/he/she) finish work? (Do you/Does NAME) take a break for lunch?	_ _ HOURS PER WEEK USUALLY WORKED OR IF CANNOT ANSWER EXACT HOURS, PROBE FOR RANGE: (Do you/Does NAME) think (you/he/she) work . . . Less than 10 hours per week? 1 10-20 hours per week? 2 21-30 hours per week? 3 Or more than 30 hours per week? 4	_ _ HOURS PER WEEK USUALLY WORKED OR IF CANNOT ANSWER EXACT HOURS, PROBE FOR RANGE: (Do you/Does NAME) think (you/he/she) work . . . Less than 10 hours per week? 1 10-20 hours per week? 2 21-30 hours per week? 3 Or more than 30 hours per week? 4
II.C1 Next, I'd like to ask you some questions about how ((you are) / (he/she is) / (you were) / (he/she was)) paid at (NAME or PLACE)). (Do you/Did you/Does NAME/Did NAME) get paid by the hour or by how many things (you/he/she) (make/do/sell/makes/does/sells)? PROBES: Are you paid a certain amount per day, per week, per month, or per year? Do you get a salary?	Hour, day, week, month, year 1 Things 2 Some other way (SPECIFY) 3 _____ Unpaid 4	Hour, day, week, month, year 1 Things 2 Some other way (SPECIFY) 3 _____ Unpaid 4

JOB 3 NEXT MOST RECENT JOB	JOB 4 NEXT MOST RECENT JOB	JOB 5 NEXT MOST RECENT JOB
<p>START DATE: _ _ /20 _ _ MONTH YEAR</p> <p>MORE THAN ONE YEAR AGO 9999</p>	<p>START DATE: _ _ /20 _ _ MONTH YEAR</p> <p>MORE THAN ONE YEAR AGO 9999</p>	<p>START DATE: _ _ /20 _ _ MONTH YEAR</p> <p>MORE THAN ONE YEAR AGO 999 9</p>
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<p>II.C2 About how much (are you/is NAME) paid on this job?</p> <p>PROBES: How much (do you/does[he/she]) get paid for each thing (you/he/she) (make/do/sell/makes/does/sells)?</p> <p>How many things (do you/does [he/she]) (make/do/sell) in an (hour/day/week)?</p> <p>Is that the amount of pay (you bring/[he/she] brings) home or is that the amount of (your/his/her) pay before taxes are taken out?</p> <p>PROGRAMMER: SKIP NET PAY/BEFORE TAXES IF PAID HOURLY OR BY THE THING</p>	<p>\$ _ _ _ . _ _ per hour/thing</p> <p> _ _ _ things/hour</p> <p>or</p> <p>\$ _ _ _ . _ _ per day1</p> <p>per week.....2</p> <p>every other week.....3</p> <p>twice a month.....4</p> <p>once a month5</p> <p>OTHER (SPECIFY).....6</p> <p>_____</p> <p>Net pay1</p> <p>Before taxes.....2</p>	<p>\$ _ _ _ . _ _ per hour/thing</p> <p> _ _ _ things/hour</p> <p>or</p> <p>\$ _ _ _ . _ _ per day1</p> <p>per week2</p> <p>every other week3</p> <p>twice a month.....4</p> <p>once a month5</p> <p>OTHER (SPECIFY)6</p> <p>_____</p> <p>Net pay1</p> <p>Before taxes2</p>																								
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<p>II.C4 Sometimes people need changes made at their job to help them with their work or to help them try new things. These could be changes to their workspace, work schedule, tasks or responsibilities.</p> <p>Since (you/NAME) started (your/his/her) job, (have you/has he/she) needed any sort of changes made at [JOB FROM E4] because of (your/his/her) disability or health problem?</p>	<p>YES.....1</p> <p>NO.....0</p>	<p>YES.....1</p> <p>NO.....0</p>																								
<p>II.C5 Did (JOB FROM E4) make these changes for (you/him/her)?</p>	<p>YES.....1</p> <p>NO.....0</p>	<p>YES.....1</p> <p>NO.....0</p>																								
<p>II.C6 What change did they make?</p> <p>PROBE: Did they make any other changes?</p>	<p>WHEELCHAIR ACCESSIBILITY.....1</p> <p>CUSTOM DESIGNED WORKSPACE2</p> <p>COMPUTER-RELATED ASSISTIVE TECHNOLOGY DEVICE3</p> <p>COMMUNICATION-RELATED ASSISTIVE TECHNOLOGY DEVICE4</p> <p>CHANGE IN WORK SCHEDULE.....5</p> <p>CHANGE IN JOB TASKS/RESPONSIBILITIES6</p> <p>OTHER (SPECIFY)7</p> <p>_____</p>	<p>WHEELCHAIR ACCESSIBILITY1</p> <p>CUSTOM DESIGNED WORKSPACE2</p> <p>COMPUTER-RELATED ASSISTIVE TECHNOLOGY DEVICE3</p> <p>COMMUNICATION-RELATED ASSISTIVE TECHNOLOGY DEVICE4</p> <p>CHANGE IN WORK SCHEDULE5</p> <p>CHANGE IN JOB TASKS/RESPONSIBILITIES6</p> <p>OTHER (SPECIFY)7</p> <p>_____</p>																								

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CHANGE IN JOB TASKS/RESPONSIBILITIES	6																																											
OTHER (SPECIFY)	7																																											

	JOB 1 CURRENT/MAIN JOB/OR MOST RECENT JOB	JOB 2 NEXT MOST RECENT JOB
II.D1 At (your/his/her) job, do most of the other workers have disabilities?	YES 1 NO 0	YES..... 1 NO 0
II.D2 Is (NAME OR PLACE) part of any school sponsored work activities like a work-study job, an internship, or part of a school-based business?	YES 1 NO 0	YES..... 1 NO 0
II.D4 When did (you/he/she) stop working at . . . Probe: In which month did (you/he/she) (start/stop)? Probe: What was the weather like? Probe: Was it around a holiday or (your/his/her) birthday? Probe: Was it during the school year or during the summer? Probe: (Is/Was) this a summer job? Interview note: If respondent report still working at this job, reset II.B1 to 1.	END DATE: _ _ / 20 _ _ MONTH YEAR STILL WORKING 9999 IF CANNOT ANSWER EXACT DATES, PROBE FOR TIME WORKED AT THIS JOB: How long (have [you/he/she] worked/did [you/he/she] work) at (NAME OR PLACE)? PROBE: Your best estimate is fine. _ _ MONTHS 1 _ _ WEEKS 2 OR IF CANNOT ANSWER TIME WORKED, PROBE FOR RANGE: (Do you/Does NAME) think (you/he/she) worked at (NAME OR PLACE) . . . Three months of less?..... 1 4-6 months? 2 Or more than 6 months?..... 3	END DATE: _ _ / 20 _ _ MONTH YEAR STILL WORKING 9999 IF CANNOT ANSWER EXACT DATES, PROBE FOR TIME WORKED AT THIS JOB: How long (have [you/he/she] worked/did [you/he/she] work) at (NAME OR PLACE)? PROBE: Your best estimate is fine. _ _ MONTHS 1 _ _ WEEKS 2 OR IF CANNOT ANSWER TIME WORKED, PROBE FOR RANGE: (Do you/Does NAME) think (you/he/she) worked at (NAME OR PLACE) . . . Three months of less?..... 1 4-6 months? 2 Or more than 6 months? 3
II.E1 IF NOT CURRENT JOB, ASK: Why did (you/he/she) leave this job? PROBE: Why (are you/is NAME) no longer working (NAME OR PLACE)? PROBE FOR MAIN REASON.	Job was too hard 1 Job was too easy 2 Found a better job 3 Temporary job ended 4 Went back to school 5 Job did not pay enough 6 Does not need the money 7 Did not like boss 8 Did not like coworkers 9 Transportation problems 10 I moved to far 11 Job moved too far 12 Fired/performance problems 13 Health reasons 14 Employer wouldn't provide accommodations needed to succeed at job 15 Had a baby 16 Family obligations 17 Did not want to loose disability or other benefits 18 Parents do not want youth to work 19 Youth does not want to work 20	Job was too hard 1 Job was too easy 2 Found a better job 3 Temporary job ended 4 Went back to school 5 Job did not pay enough 6 Does not need the money 7 Did not like boss 8 Did not like coworkers 9 Transportation problems 10 I moved to far 11 Job moved too far 12 Fired/performance problems 13 Health reasons 14 Employer wouldn't provide accommodations needed to succeed at job 15 Had a baby 16 Family obligations 17 Did not want to loose disability or other benefits 18 Parents do not want youth to work 19 Youth does not want to work 20

JOB 3 NEXT MOST RECENT JOB	JOB 4 NEXT MOST RECENT JOB	JOB 5 NEXT MOST RECENT JOB
YES..... 1 NO..... 0	YES..... 1 NO..... 0	YES..... 1 NO..... 0
YES..... 1 NO..... 0	YES..... 1 NO..... 0	YES..... 1 NO..... 0
END DATE: _ _ / 20 _ _ MONTH YEAR	END DATE: _ _ / 20 _ _ MONTH YEAR	END DATE: _ _ / 20 _ _ MONTH YEAR
STILL WORKING.....9999	STILL WORKING9999	STILL WORKING9999
IF CANNOT ANSWER EXACT DATES, PROBE FOR TIME WORKED AT THIS JOB: How long (have [you/he/she] worked/did [you/he/she] work) at (NAME OR PLACE)? PROBE: Your best estimate is fine.	IF CANNOT ANSWER EXACT DATES, PROBE FOR TIME WORKED AT THIS JOB: How long (have [you/he/she] worked/did [you/he/she] work) at (NAME OR PLACE)? PROBE: Your best estimate is fine.	IF CANNOT ANSWER EXACT DATES, PROBE FOR TIME WORKED AT THIS JOB: How long (have [you/he/she] worked/did [you/he/she] work) at (NAME OR PLACE)? PROBE: Your best estimate is fine.
_ _ MONTHS 1 _ _ WEEKS..... 2	_ _ MONTHS 1 _ _ WEEKS..... 2	_ _ MONTHS 1 _ _ WEEKS..... 2
OR	OR	OR
IF CANNOT ANSWER TIME WORKED, PROBE FOR RANGE: (Do you/Does NAME) think (you/he/she) worked at (NAME OR PLACE) . . .	IF CANNOT ANSWER TIME WORKED, PROBE FOR RANGE: (Do you/Does NAME) think (you/he/she) worked at (NAME OR PLACE) . . .	IF CANNOT ANSWER TIME WORKED, PROBE FOR RANGE: (Do you/Does NAME) think (you/he/she) worked at (NAME OR PLACE) . . .
Three months of less? 1 4-6 months?..... 2 Or more than 6 months?..... 3	Three months of less? 1 4-6 months?..... 2 Or more than 6 months? 3	Three months of less? 1 4-6 months?..... 2 Or more than 6 months? 3
Job was too hard1 Job was too easy.....2 Found a better job3 Temporary job ended4 Went back to school5 Job did not pay enough6 Does not need the money7 Did not like boss8 Did not like coworkers9 Transportation problems.....10 I moved to far.....11 Job moved too far12 Fired/performance problems13 Health reasons.....14 Employer wouldn't provide accommodations needed to succeed at job15 Had a baby16 Family obligations.....17 Did not want to loose disability or other benefits.....18 Parents do not want youth to work.....19 Youth does not want to work20	Job was too hard 1 Job was too easy 2 Found a better job 3 Temporary job ended 4 Went back to school 5 Job did not pay enough 6 Does not need the money 7 Did not like boss 8 Did not like coworkers 9 Transportation problems 10 I moved to far..... 11 Job moved too far 12 Fired/performance problems 13 Health reasons 14 Employer wouldn't provide accommodations needed to succeed at job 15 Had a baby 16 Family obligations 17 Did not want to loose disability or other benefits 18 Parents do not want youth to work 19 Youth does not want to work 20	Job was too hard1 Job was too easy.....2 Found a better job3 Temporary job ended4 Went back to school5 Job did not pay enough6 Does not need the money7 Did not like boss8 Did not like coworkers9 Transportation problems10 I moved to far.....11 Job moved too far12 Fired/performance problems13 Health reasons14 Employer wouldn't provide accommodations needed to succeed at job15 Had a baby16 Family obligations17 Did not want to loose disability or other benefits18 Parents do not want youth to work19 Youth does not want to work20

	JOB 1 CURRENT/MAIN JOB/OR MOST RECENT JOB	JOB 2 NEXT MOST RECENT JOB
II.E2 Overall, how happy ([are/were] you/[is/was] NAME) with (your/his/her) job at (JOB FROM E4)? Would (you/he/she) say . . .	very happy,..... 1 a little happy, or..... 2 not happy? 3	very happy, 1 a little happy, or 2 not happy? 3
II.E3 IF CURRENT JOB, ASK: Does (your/his/her) job make good use of your skills and abilities?	YES 1 NO 0	
II.E4 IF CURRENT JOB, ASK: (Do you/Does NAME) think (your/his/her) job is very interesting, somewhat interesting, or boring?	VERY INTERESTING, 1 SOMEWHAT INTERESTING 2 BORING, 3	
II.E5 IF CURRENT JOB, ASK: If (you/NAME) had the chance would you get a different job?	YES 1 NO 0	
II.F1.	CONTINUE WITH OTHER JOB(S) OR COMPLETE JOB GRID. NEXT JOB..... 1 GO TO JOB 2 NO MORE JOBS..... 0 GO TO II.F2	CONTINUE WITH OTHER JOB(S) OR COMPLETE JOB GRID. NEXT JOB 1 GO TO JOB 3 NO MORE JOBS 0 GO TO II.F2

JOB 3 NEXT MOST RECENT JOB	JOB 4 NEXT MOST RECENT JOB	JOB 5 NEXT MOST RECENT JOB
very happy,..... 1	very happy, 1	very happy,..... 1
a little happy, or..... 2	a little happy, or 2	a little happy, or..... 2
not happy? 3	not happy? 3	not happy? 3
<p align="center">CONTINUE WITH OTHER JOB(S) OR COMPLETE JOB GRID.</p>	<p align="center">CONTINUE WITH OTHER JOB(S) OR COMPLETE JOB GRID.</p>	<p align="center">CONTINUE WITH OTHER JOB(S) OR COMPLETE JOB GRID.</p>
NEXT JOB..... 1 GO TO JOB 4	NEXT JOB 1 GO TO JOB 5	NEXT JOB..... 1 GO TO JOB 6
NO MORE JOBS..... 0 GO TO II.F2	NO MORE JOBS 0 GO TO II.F2	NO MORE JOBS..... 0 GO TO II.F2

II.F2 Thank you for telling me about these jobs, I just want to be sure we haven't missed any job (you/NAME) had in the past year. We just spoke about (your/NAME's) job at (LIST JOBS). Did (you/NAME) have any other jobs during the past year, even ones that lasted for just a short time?

PROBES: A job is work, either paid or unpaid, other than work around the house.

A job could be a school sponsored job or a work study job.

Jobs include internships, apprenticeships, and volunteer work, even if you don't get paid.

A job could be working for a business or organization or work that (you/he/she) do on (your/his/her) own such as babysitting or dog walking.

Do not include chores that (you do/NAME does) around the house, even if (you are/NAME is) paid to do them.

YES.....	1	
NO	0	} → (GO TO II.F4)
DON'T KNOW	d	
REFUSED.....	r	

II.F2_num. How many other jobs did (you /NAME) have during the past year?

PROBE: Please do no include jobs you already told me about.

PROBE: That is since (month and year 1 year ago).

PROBE: Please include all jobs, even if (you/NAME) only worked for a short period of time. Please include jobs at which (you/Name) (were/was) self-employed.

|_|_| JOBS

DON'T KNOWd (GO TO II.F4)

REFUSED.....r (GO TO II.F4)

II.F3 Did any of these jobs last more than two weeks?

PROBE: So (you/NAME) had NUMBER job(s) that lasted less than two weeks?

YES..... 1 (GO BACK TO II.A2)

NO 0

DON'T KNOWd

REFUSED.....r

II.F4 Next I would like you to think about the year before this year, that is from (month and year 2 years ago) to (month and year 1 year ago). (Other than any jobs you have just told me about) Did (you/NAME) work at a job or a business at any time in the year before the past year?

PROBE: Please include all jobs, even if (you/NAME) only worked for a short period of time. Please include jobs at which (you/Name) (were/was) self-employed.

PROBES: A job is work, either paid or unpaid, other than work around the house.

A job could be a school sponsored job or a work study job.

Jobs include internships, apprenticeships, and volunteer work, even if you don't get paid.

A job could be working for a business or organization or work that (you/he/she) do on (your/his/her) own such as babysitting or dog walking.

Do not include chores that (you do/NAME does) around the house, even if (you are/NAME is) paid to do them.

YES.....	1	
NO	0	} → (GO TO NOTE BEFORE II.G4)
DON'T KNOW	d	
REFUSED.....	r	

II.F4_num. How many jobs did (you /NAME) have during the year before the past year?

PROBE: Please do no include jobs you already told me about.

PROBE: That is from (month and year 2 years ago) to (month and year 1 year ago).

PROBE: Was it one job, or more than one job. INTERVIEWER CONTINUE PROBING TO GET NUMBER OF JOBS.

PROBE: Please include all jobs, even if (you/NAME) only worked for a short period of time. Please include jobs at which (you/Name) (were/was) self-employed, like baby sitting or cutting the lawn.

____ JOBS (GO TO NOTE BEFORE II.G4)

DON'T KNOW.....d

REFUSED.....r

II.F5 Did (you/ NAME) have 2 or 3 jobs, 4 or 5 jobs, or more than 5 jobs?

PROBE: That is from (month and year 2 years ago) to (month and year 1 year ago).

- 2 OR 3 1
- 4 OR 5 2
- MORE THAN 5..... 3
- DON'T KNOW d
- REFUSED r

NOTE: THERE IS NO II.G1 TO II.G3 IN THIS VERSION

IF CURRENTLY EMPLOYED GO TO SECTION III.

ASK IF NOT CURRENTLY EMPLOYED:

II.G4 (Have you/Has [he/she]) been looking for work during the last four weeks?

(NBS-B28.)

- YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- } → (GO TO II.G6)

ASK IF LOOKING FOR WORK:

II.G5 Next, I am going to read you a list of things that some people do to look for work. Please tell me whether or not (you/NAME) did any of these things during the last four weeks.

(NBS - B29.)

To look for work in the last four weeks, did (you/NAME) . . .

	YES	NO
a. Contact (your/his/her) state's One Stop office, (CO: WIN Center), Workforce Development office, or unemployment office?	1	0
b. Ask friends or relatives?	1	0
c. Look through job advertisements in a newspaper or on the internet?	1	0
d. Contact the State Vocational Rehabilitation Agency or (STATE VR NAME)?	1	0
e. Contact any employers in person, by mail, or by phone?	1	0
f. Do anything else that I didn't mention? (SPECIFY: What was it?)	1	0

GO TO SECTION III

ASK IF NOT LOOKING FOR WORK:

II.G6 I am going to read a list of reasons people do not work. For each, please tell me if it is a reason why (you are/[he/she] is) not currently working. (Are you/Is NAME) not working because . . .

(NBS-B25.)

READ IF NEEDED: I know (you are/[he/she] is) not able to work, but the study rules require us to ask all respondents the same questions.

	YES	NO	NA
a. A physical or mental condition prevents (you/NAME) from working?.....	1	0	
b. (You do/NAME does) not have reliable transportation to and from work?	1	0	
c. ASK IF CURRENTLY IN SCHOOL OR TRAINING PROGRAM: (You are/NAME is) too busy with school to work?	1	0	
d. (You are/NAME is) waiting to complete (your/his/her) education or a training program?	1	0	
e. Workplaces are not accessible to people with (your/his/her) disability?	1	0	
f. (You/NAME) do not want to lose benefits such as disability or Medicaid?.....	1	0	

II.G7 Are there any other reasons why (you are/NAME is) not working that I didn't mention?

(NBS-B26.)

YES.....1
 NO0
 DON'T KNOW.....d
 REFUSED.....r

} → (GO TO SECTION III)

II.G8 What are they?

(NBS-B27.)

INTERVIEWER: ENTER VERBATIM RESPONSE.

SECTION III: SERVICE UTILIZATION

III.A1 My next questions are about services or training (you/NAME) might have received in
(NLTS - F8b)-st year. Since Since (MONTH AND YEAR 1 YEAR AGO), (have/has) . . .
(mod)

PROGRAMMER: IF YES ASK III.A2

	YES	NO
a. (you/NAME) been taught skills needed for life, like counting change, telling time or using public transportation?	1	0
b. (you/NAME) had career counseling, like help in learning which jobs are a good match with (your/NAME's) skills and interests?	1	0
<p>PROBE: Career counseling, is where someone talked with (you/NAME) about different types of jobs or careers, and the training and skills they require?</p>		
c. (you/NAME) had help in finding or applying for a job, such as how to find jobs available, fill out an application, write a resume, or go for an interview?	1	0
<p>PROBE: A resume is a summary of (your/NAME's) job qualifications.</p>		
d. (you/NAME) done any job shadowing?	1	0
<p>PROBE: Job shadowing is a way for youth to learn about job opportunities by tagging along with a worker to see what kind of activities are performed as part of his or her particular job.</p>		
e. (you/NAME) had help in getting into a school or training program, including helping with an application or interview?	1	0
<p>PROBE: For example, where someone told (you/him/her) about jobs that are available and how to apply for them? Or if someone helped you complete an application for college.</p>		

III.A2a **IF III.A1a IS YES:** In the last three months, how many times did (you/ NAME) get training in skills needed for life?

PROBE: Like counting change, telling time, or using public transportation.

PROBE: Your best estimate is fine.

PROBE: Did (you/NAME) get this training this month, last month, the month before that.

IF YES: About how often each week during that month did (you/NAME) get this training.

|_|_| TIMES (GO TO III.A1b)

DON'T KNOWd

REFUSEDr

III.A3a In the past 3 months, would you say that (you/NAME) received this service or training ...

More than once a week 1

About once a week.....2

More than once a month3

About once a month, or4

Less often than that?.....5

DON'T KNOWd

REFUSEDr

GO TO III.A1b

III.A2b **IF III.A1b IS YES:** In the last three months, how many times did (you/ NAME) get career counseling?

PROBE: Like help in learning which jobs are a good match with (your/NAME's) skills and interests.

PROBE: You best estimate is fine.

PROBE: Did (you/NAME) get this training this month, last month, the month before that.

IF YES: About how often each week during that month did (you/NAME) get this training.

|_|_| TIMES (GO TO III.A1c)

DON'T KNOWd

REFUSEDr

III.A3b In the past 3 months, would you say that (you/NAME) received this service or training ...

- More than once a week..... 1
- About once a week.....2
- More than once a month3
- About once a month, or4
- Less often than that?.....5
- DON'T KNOWd
- REFUSED.....r

GO TO III.A1c

ASK III.A1c

III.A2c **IF III.A1c IS YES:** In the last three months, how many times did (you/ NAME) get help in applying for a job?

PROBE: Such as how to find jobs available, fill out an application, write a resume, or go for an interview.

PROBE: You best estimate is fine.

PROBE: Did (you/NAME) get this training this month, last month, the month before that.
IF YES: About how often each week during that month did (you/NAME) get this training.

TIMES (GO TO III.A1d)

- DON'T KNOWd
- REFUSED.....r

III.A3c In the past 3 months, would you say that (you/NAME) received this service or training ...

- More than once a week..... 1
- About once a week.....2
- More than once a month3
- About once a month, or4
- Less often than that?.....5
- DON'T KNOWd
- REFUSED.....r

GO TO III.A1d

III.A2d **IF III.A1d IS YES:** In the last three months, how many times did (you/ NAME) do job shadowing?

PROBE Job shadowing is a way for youth to learn about job opportunities by tagging along with a worker to see what kind of activities are performed as part of his or her particular job.

PROBE: You best estimate is fine.

PROBE: Did (you/NAME) get this training this month, last month, the month before that. IF YES: About how often each week during that month did (you/NAME) get this training.

|_|_| TIMES (GO TO III.A1e)

DON'T KNOWd

REFUSED.....r

III.A3d In the past 3 months, would you say that (you/NAME) received this service or training ...

More than once a week 1

About once a week.....2

More than once a month3

About once a month, or4

Less often than that?.....5

DON'T KNOWd

REFUSED.....r

GO TO III.A1e

III.A2e **IF III.A1e IS YES:** In the last three months, how many times did (you/ NAME) get help in getting into a school or training program?

PROBE: For example, where someone told (you/him/her) about jobs that are available and how to apply for them? Or if someone helped you complete an application for college.

PROBE: Your best estimate is fine.

PROBE: Did (you/NAME) get this training this month, last month, the month before that.
IF YES: About how often each week during that month did (you/NAME) get this training.

|_|_| TIMES (GO TO SECTION IV)

DON'T KNOWd

REFUSEDr

III.A3e In the past 3 months, would you say that (you/NAME) received this service or training ...

More than once a week 1

About once a week.....2

More than once a month3

About once a month, or4

Less often than that?5

DON'T KNOWd

REFUSEDr

SECTION IV: SATISFACTION WITH YTD PROGRAM

THIS SECTION IS ASKED OF YOUTH IN TREATMENT GROUP WHO RECEIVED YTD SERVICES. TREATMENT YOUTH WITH NO 12-MONTH INTERVIEW BEGIN SECTION. TREATMENT YOUTH WHO DID NOT REPORT PARTICIPATION IN YTD AT 12 MONTH SKIP TO SECTION V. CONTROL YOUTH SKIP TO SECTION V.

My next questions are about (your/NAMES) experiences with (YTD PROGRAM). This is the program through Social Security that helps young people with disabilities become more independent. (You were/NAME was) eligible for this program beginning on (RA DATE).

IV.E1.1 How much has (your/his/her) experience with (YTD PROGRAM) helped (you/him/her) in the following areas?

(OPENING DOORS – S1Q16)

INTERVIEWER: READ STATEMENT. . .

Did (YTD PROGRAM) help (you/NAME) very much, somewhat, a little, or not at all?

IV.E1.2 **IF NOT AT ALL, ASK:** Did (you/he/she) need this help?

	IV.E1.1					IV.E1.2	
	VERY MUCH	SOME WHAT	A LITTLE	NOT AT ALL	Volunteered: Did not participate in YTD program	YES	NO
a. Getting work-related knowledge and skills?	1	2	3	4	5	1	0
b. Working effectively with others?	1	2	3	4	5	1	0
c. Understanding yourself?	1	2	3	4	5	1	0
d. Developing clearer career goals?	1	2	3	4	5	1	0

	IV.E1.1					IV.E1.2	
	VERY MUCH	SOME WHAT	A LITTLE	NOT AT ALL	Volunteered: Did not participate in YTD program	YES	NO
e. Gaining information about career opportunities?.....	1	2	3	4	5	1	0
f. Developing a sense of confidence in what (you are/[he/she] is) able to do?	1	2	3	4	5	1	0
g. Getting a job?.....	1	2	3	4	5	1	0

IV.E4 How useful has the help or services that (you/NAME) got from (YTD PROGRAM) been in your life? Would you say . . .
(NLTS - F9f) (Mod)

- Very useful, 1
- Somewhat useful, 2
- Not very useful, or 3
- Not at all useful? 4
- DON'T KNOW d
- REFUSED r

IV.F1 Would you recommend (YTD PROGRAM) to a friend or family member?

- YES 1
- NO 0
- DON'T KNOW d
- REFUSED r

SECTION V: AWARENESS OF WAIVERS AND INCENTIVES

V.A1 Next, I'd like to ask you a few questions about your understanding about Social Security
 (EIDP-mod) benefits. Please tell me whether you agree or disagree with these statements about Social Security benefits.

PROBE: If you're not sure, please just say so.

	AGREE	NOT SURE	DISAGREE
a. As soon as people start working they stop getting their Social Security benefits	1	2	3
b. As soon as people start working they lose their medical coverage	1	2	3

V.B1 I'm going to read a list of incentives and supports that Social Security offers to people
 (NBS-E3) getting disability benefits, to encourage them to work. Please tell me if you have ever heard of these incentives or supports or used any of them.

Have you ever heard of a Plan for Achieving Self-Support or a PASS Plan? This is a Social Security incentive that lets (you/beneficiaries) set aside money to be used to help (you/them) reach a work goal. The money set aside does not affect (your/their) benefits.

PROBE: Have you ever heard of this plan?

PROBE: If you're not sure, please just say so.

YES.....1
 NO/NOT SURE0
 REFUSED.....r } → (GO TO V.C1)

ASK IF HEARD OF PASS:

V.B2 I'm going to read a list of different work goals. Please tell me if you think a PASS Plan could be used for each goal.

Could (you/NAME) use a PASS Plan to . . .

		YES	NO
a.	Pay for college?	1	0
b.	Start (your/his/her) own business?	1	0
c.	Pay a job coach?	1	0
d.	Pay for accommodations (you/he/she) need(s)?	1	0

ASK IF HEARD OF PASS:

V.B3 (Have you/Has NAME) used a Plan for Achieving Self-Support or a PASS Plan since
(NBS-E4) (RA/DATE)?

YES..... 1
 NO 0
 DON'T KNOW..... d
 REFUSED..... r

V.C1 Have you ever heard of the general earned income exclusion? This is an incentive
(NBS-E5) where Social Security does not count the first \$65 of (your/NAME's) earnings in a month,
Mod. and then only counts a portion of (your/his/her) earnings when determining (your/his/her) monthly payment.

PROBE: Have you ever heard of this exclusion?

PROBE: If you're not sure, please just say so.

YES..... 1
 NO/NOT SURE 0
 REFUSED..... r } → (GO TO V.D1)

V.C2 **ASK IF HEARD OF GENERAL EARNED INCOME EXCLUSION**

What portion of (your/NAME) earnings after the first \$65 does Social Security count against (your/his/her) SSI benefit? Does Social Security count one dollar for each dollar ([you/he/she] earn/[he/she] earns), one dollar for each two dollars ([you/he/she] earn/[he/she] earns), one dollar for each three dollars ([you/he/she] earn/[he/she] earns), or one dollar for each four dollars ([you/he/she] earn/[he/she] earns)?

PROBE: Does Social Security count all of (your/his/her) earnings in reducing your SSI benefit, half of (your/his/her) earnings, one-third of (your/his/her) earnings, or one-quarter of (your/his/her) earnings?

- 1 FOR 1 (ALL)..... 1
- 1 FOR 2 (HALF) 2
- 1 FOR 3 (ONE-THIRD) 3
- 1 FOR 4 (ONE-QUARTER)..... 4
- DON'T KNOW d
- REFUSED r

ASK IF HEARD OF THE GENERAL EARNED INCOME EXCLUSION:

V.C3 (Have you/Has NAME) used the general earned income exclusion since (RA DATE)?
(NBS-E6)

- YES..... 1
- NO 0
- DON'T KNOW d
- REFUSED r

V.D1 (NBS-E9) Have you ever heard of Continued Medicaid Eligibility or Medicaid While Working? This is a Social Security incentive that lets (you/beneficiaries) keep (your/their) LOCAL MEDICAID NAME insurance after (you/they) go to work, even if (your/their) benefits have stopped.

INTERVIEWER NOTE: THIS IS ALSO KNOWN AS SECTION 1619(b).

- YES..... 1
 - NO/NOT SURE 0
 - REFUSED r
- } → (GO TO V.E1)

ASK IF HEARD OF CONTINUED MEDICAID ELIGIBILITY:

V.D2 (NBS-E10) (Have you/Has NAME) used the Continued Medicaid Eligibility or Medicaid While Working since (RA DATE)?

INTERVIEWER NOTE: THIS IS ALSO KNOWN AS SECTION 1619(b).

YES..... 1
NO 0
REFUSED..... r

V.E1 (NBS-E12) Have you ever heard of the student earned-income exclusion? This is a Social Security incentive where if (you are/[he/she] is) in school, up to (AMOUNT PER MONTH: \$1,640 for 2009) of earnings per month are not counted when Social Security figures (your/the) benefit.

YES..... 1
NO/NOT SURE 0
REFUSED..... r } → (GO TO V.F1)

ASK IF HEARD OF SEIE:

V.E2 (NBS-E13) (Have you/Has NAME) used the student earned-income exclusion since (RA DATE)?

YES..... 1
NO 0
DON'T KNOW d
REFUSED..... r

ASK IF LESS THAN AGE 18 AT RANDOM ASSIGNMENT:

V.F1 (NBS-E12) Have you ever heard of the Continuing Disability Review or Age 18 Medical Redetermination? This is when Social Security determines whether or not an SSI recipient is eligible to receive SSI benefits as an adult.

YES..... 1
NO/NOT SURE 0
REFUSED..... r } → (GO TO V.G1)

ASK IF AGE LESS THAN 18 AT RANDOM ASSIGNMENT, HEARD OF CDR AND IS A TREATMENT CASE:

V.F2 If (you/NAME) are found no longer eligible for benefits, will (you/NAME) continue receiving benefits from Social Security for as long as (you continue/ he/she continues) to participate in (YTD PROGRAM NAME)?

YES..... 1
 NO/NOT SURE 0
 REFUSED..... r

V.G1 Have you ever heard of an Individual Development Account or an IDA? An IDA is a special bank account that helps (you/NAME) save for (your/his/her) education, the purchase of a first home, or to start a business.

PROBE: Have you ever heard of this special bank account?

PROBE: If you're not sure, please just say so.

YES..... 1
 NO/NOT SURE 0
 REFUSED..... r } → (GO TO V.H1)

ASK IF HEARD OF IDA:

V.G2 (Have you/Has NAME) used an IDA since (RA DATE)?

PROBE: An individual development account.

YES..... 1
 NO 0
 DON'T KNOW d
 REFUSED..... r

V.H1 If you wanted information about how working would affect (your/NAME) Social Security benefits where would you get that information?

CODE ALL THAT APPLY

- BENEFITS PLANNER/BPAO/WIPA..... 1
- INTERNET2
- FRIENDS/FAMILY3
- ONE STOP CENTER/WORKFORCE
DEVELOPMENT CENTER/
[IF COLORADO: WIN CENTERS]..... 4
- SOCIAL SECURITY OFFICE5
- SOCIAL SECURITY WEBSITE6
- VOCATIONAL REHABILITATION
AGENCY.....7
- YTD PROGRAM8
- OTHER (SPECIFY).....9
-
- DON'T KNOWd
- REFUSED.....r

SECTION VI: HEALTH

THIS SECTION ASKED OF ALL YOUTH.

Now I will ask you some questions about (your/NAME's) health and daily activities.

VI.A1 (NLTS-Q5) Some people have a disability or special need that makes it hard for them to do some things. (Do you/Does NAME) consider (yourself/himself/herself) to have any kind of disability?

- YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED..... r
- } → (GO TO VI.B1)

VI.A2 Can (you/NAME) describe (your/his/her) disability to others?

- YES..... 1
- NO 0
- DON'T KNOW d
- REFUSED..... r

VI.B1 (YTD-30) (SF-1) In general, would (you/he/she) say that (your/NAME's) health is. . .

- Excellent, 1
- Very good,..... 2
- Good,..... 3
- Fair, or 4
- Poor? 5
- DON'T KNOW d
- REFUSED..... r

VI.B1a Compared to one year ago, how would (you/NAME) rate (your/his/her) health in general now? Is it . . .
(NBS-19)
(SF-36)

- Much better now,..... 1
- Somewhat better now,.....2
- About the same,3
- Somewhat worse now, or4
- Much worse now?5
- DON'T KNOWd
- REFUSED.....r

The next two question are about activities (you/NAME) might do during a typical day.

VI.B2 During a typical day, does (your/NAME's) health now limit (you/him/her) in doing moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or playing golf?
(SF-12)

PROBE, IF YES: Does (your/NAME's) health limit you a little or a lot?

- Yes, limited a lot..... 1
- Yes, limited a little2
- No, not limited at all.....3

VI.B3 During a typical day, does (your/NAME's) health now limit (you/him/her) in climbing several flights of stairs?
(SF-12)

PROBE, IF YES: Does (your/NAME's) health limit you a little or a lot?

PROBE, IF RESPONDENT REPORTS THAT THEY DON'T PERFORM STAIR-CLIMBING ASK: Could you climb several flights of stairs if you needed to?

- Yes, limited a lot..... 1
- Yes, limited a little2
- No, not limited at all.....3

The next two questions ask about (your/NAME's) physical health and (your/his/her) daily activities.

VI.B4 (SF-12) During the past 4 weeks, how much of the time have (you/NAME) accomplished less than (you/he/she) would have liked to as a result of (your/his/her) physical health? Would you say . . .

- All,..... 1
- Most, 2
- Some, 3
- A little, or 4
- None of the time? 5

VI.B5 (SF-12) During the past 4 weeks, how much of the time (were you/was NAME) limited in the kind of work or other regular daily activities (you do/[he/she] does) as a result of (your/his/her) physical health? Would you say . . .

- All,..... 1
- Most, 2
- Some, 3
- A little, or 4
- None of the time? 5

Now I will ask about any emotional problems and (your/NAME's) daily activities.

VI.B6 (SF-12) During the past 4 weeks, how much of the time (have you/has NAME) accomplished less than (you/he/she) would have liked to as a result of any emotional problems, such as feeling depressed or anxious? Would you say . . .

- All,..... 1
- Most, 2
- Some, 3
- A little, or 4
- None of the time? 5

VI.B7 During the past 4 weeks, how much of the time did (you/he/she) not do work or other activities as carefully as usual as a result of any emotional problems, such as feeling depressed or anxious? Would you say . . .

(SF-12)

- All, 1
- Most, 2
- Some, 3
- A little, or 4
- None of the time? 5

VI.B8 During the past 4 weeks, how much did pain interfere with (your/NAME's) normal work, including both work outside the home, housework, or school work? Did it interfere . . .

(SF-12)

- Not at all, 1
- A little bit, 2
- Moderately, 3
- Quite a bit, or 4
- Extremely? 5

These next questions are about how (you feel/NAME feels) and how things have been with (you/him/her) during the past 4 weeks. For each question, please give me the one answer that comes closest to the way (you have/NAME has) been feeling.

VI.B9 During the past 4 weeks, how much of the time (have you/has NAME) felt calm and peaceful? Would you say . . .

(SF-12)

- All, 1
- Most, 2
- Some, 3
- A little, or 4
- None of the time? 5

VI.B10 During the past 4 weeks, how much of the time did (you/NAME) have a lot of energy?
(SF-12) Would you say . . .

- All, 1
- Most, 2
- Some, 3
- A little, or 4
- None of the time? 5

VI.B11 During the past 4 weeks, how much of the time have (you/NAME) felt downhearted and
(SF-12) depressed? Would you say . . .

- All, 1
- Most, 2
- Some, 3
- A little, or 4
- None of the time? 5

VI.B12 During the past 4 weeks, how much of the time has (your/NAME's) physical health or
(SF-12) emotional problems interfered with your social activities, like visiting with friends or
relatives? Would you say . . .

- All, 1
- Most, 2
- Some, 3
- A little, or 4
- None of the time? 5

VI.C1 For the next set of activities, please tell me how often (you do/NAME does) the activity by (yourself/himself/herself).

(YTD-38)

The first (next) activity is ACTIVITY. (Do you/Does NAME) do it by (yourself/himself/herself) most of the time, some of the time, or none of the time.

IF NONE OF THE TIME: Could (you/NAME) ACTIVITY by yourself it if (you/he/she) had the chance to or needed to?

	MOST	SOME	NONE	IF NONE, ASK: Could (you/he/she) (ACTIVITY) if (you/he/she) had the chance to or needed to?	
				YES	NO
a. Deciding how to spend (your/his/her) money	1	2	3	1	0
b. Picking clothes to wear.....	1	2	3	1	0
c. Making snacks or sandwiches.....	1	2	3	1	0
d. Riding public transportation alone	1	2	3	1	0
e. Deciding how to spend (your/his/her) free time	1	2	3	1	0
f. Taking medication.....	1	2	3	1	0
g. Making doctor's appointments.....	1	2	3	1	0

VI.C2 (Have you/Has NAME) been in a drug or alcohol treatment program since (RA DATE)? Please include both residential and outpatient programs.

PROBE: Was this in the past three years?

JC-H27

YES.....1
 NO0
 DON'T KNOW.....D
 REFUSED.....R

} → (GO TO SECTION VIII)

VI.C3 How many drug or alcohol treatment programs did you attend since (RA DATE)?

JC-h28

____|____| PROGRAMS

ASK VI.D1 TO VI.D3 FOR EACH PROGRAM

VI.D1 When did (you/NAME) begin attending (that/the) ([next] most recent) drug or alcohol treatment program?
JC-h29

|__|__| MONTH

20|__|__| YEAR

VI.D2 How long (were you/was NAME) in that drug or alcohol treatment program?

JC-h30 INTERVIEWER: IF STILL ATTENDING, CIRCLE CODE 99.

|__|__| UNITS

DAYS 1

WEEKS 2

MONTHS 3

YEARS 4

STILL ATTENDING 99

VI.D3 Where (do/did) (you/NAME) receive that drug or alcohol treatment? Was it in

JC-h31

PROBE: By a long-term residential program we mean one that was longer than three months.

a hospital, 1

a free-standing detoxification center, 2

a short-term residential program, 3

a long-term residential program, 4

a methadone program, 5

an out-patient drug-free program, or 6

did you receive drug or alcohol treatment
in another setting? (SPECIFY) 7

NOTE: THERE IS NO SECTION VII IN THIS VERSION

SECTION VIII: SELF-DETERMINATION

IF PROXY GO TO VIII.B1

DO NOT ASK PROXY:

VIII.A1 Next I'm going to read a list of statements. For each one please tell me how much you agree or disagree with the statement. There are no right or wrong answers.
(YITS -11)

INTERVIEWER: READ STATEMENT.

Do you agree or disagree? Do you (dis)agree a lot or a little?

	AGREE A LOT	AGREE A LITTLE	DISAGREE A LITTLE	DISAGREE A LOT
a. You have little control over the things that happen to you	1	2	3	4
b. There is really no way you can solve some of the problems you have	1	2	3	4
c. There is little you can do to change many of the important things in your life..	1	2	3	4
d. You often feel helpless in dealing with the problems of life.....	1	2	3	4
e. Sometimes you feel like you are being pushed around in life..	1	2	3	4
f. What happens to you in the future mostly depends on you.....	1	2	3	4
g. You can do just about anything you really set your mind to...	1	2	3	4
h. You tell other people how you feel when they upset you or hurt your feelings	1	2	3	4
i. You know how to get the information you need	1	2	3	4
j. You have a good sense of the path you want to take in life and the steps to get there.....	1	2	3	4
k. Your personal goals include working or continuing to work in a paid job	1	2	3	4
l. Your job opportunities will be limited by discrimination, because of your gender, race or disability	1	2	3	4
m. You know of paying jobs that you would like to try.....	1	2	3	4
n. You often reach the personal goals that you have set for yourself.	1	2	3	4

	AGREE A LOT	AGREE A LITTLE	DISAGREE A LITTLE	DISAGREE A LOT
o. You know of the supports that you need to be successful in a job or school	1	2	3	4
p. You tell other people what you would like to do now and in the future.....	1	2	3	4
q. You know of the special laws that protect people with disabilities.....	1	2	3	4

VIII.A2. The next list of statements are about activities that people sometimes take part in. For each, I'd like you to tell me how often you do the activity when you have the chance to it. Please tell me if you do you not do it, do it sometimes, do it most of the time, or do it every time you have the chance. There are not right or wrong answers.

(ARC Self-Determination)

	DO NOT EVEN IF I HAVE THE CHANCE	DO SOMETIMES WHEN I HAVE THE CHANCE	DO MOST OF THE TIME I HAVE THE CHANCE	DO EVERY TIME I HAVE THE CHANCE
a. You keep your own personal items together.....	1	2	3	4
b. You keep good personal care and grooming.....	1	2	3	4
c. You make friends with other people your age.....	1	2	3	4
d. You keep appointments and meetings.	1	2	3	4
e. You plan weekend activities that you like to do	1	2	3	4
f. You are involved in activities outside the home.....	1	2	3	4
g. You volunteer for things that you are interested in	1	2	3	4
h. You go to restaurants that you like	1	2	3	4
i. You choose gifts to give to family and friends	1	2	3	4
j. You choose how to spend your personal money	1	2	3	4

VIII.A3 Next, I am going to read you two statements. Then, I want you to tell me the one that best describes you. Choose only one answer for each question. There are no right or wrong answers. Let's start.
(NLTS-2)

VIII.A3a READ IF NECESSARY: Which of the following statements best describes you?

- You tell others when you have a new or different opinion, or 1
- You usually agree with other's opinions and/or ideas 2
- DON'T KNOW d
- REFUSED r

VIII.A3b READ IF NECESSARY: Which of the following statements best describes you?

- You can make your own decisions, or 1
- Other people make decisions for you 2
- DON'T KNOW d
- REFUSED r

VIII.A3c READ IF NECESSARY: Which of the following statements best describes you?

- You can get what you want by working hard, or 1
- You need good luck to get what you want 2
- DON'T KNOW d
- REFUSED r

VIII.A3d READ IF NECESSARY: Which of the following statements best describes you?

- You keep trying even after you get something wrong, or 1
- It is no use to keep trying because it will not work 2
- DON'T KNOW d
- REFUSED r

VIII.A3e READ IF NECESSARY: Which of the following statements best describes you?

- You usually make good choices, or 1
- You usually do not make good choices 2
- DON'T KNOW d
- REFUSED r

VIII.A3f READ IF NECESSARY: Which of the following statements best describes you?

- You will be able to make choices that are important to you, or 1
- Your choices will not be honored..... 2
- DON'T KNOW d
- REFUSED r

DO NOT ASK IF DISABILITY IS BLINDNESS

VIII.B1 (Do you/Does NAME) have a driver's license or learners permit?

(NLTS-P15)

- YES..... 1 (GO TO VIII.B3)
- NO 0
- DON'T KNOW d
- REFUSED r

ASK IF NO DRIVER'S LICENSE OR LEARNERS PERMIT:

VIII.B2 How likely (do you/does [he/she]) think it is that (you/he/she) will get a driver's license?

(NLTS-V11)

(Do you/Does NAME) think (you/he/she) . . .

- Definitely will, 1
- Probably will, 2
- Probably won't, or 3
- Definitely won't? 4
- DON'T KNOW d
- REFUSED r

VIII.B3 (Do You/Does NAME) get any bills in (your/his/her) own name that (you are/[he/she] is) responsible for paying?

PROBE: Such as a bill for a cell phone, electricity, internet access, credit card, rent, or a magazine subscription.

YES.....1
NO0
DON'T KNOWd
REFUSED.....r

SECTION IX: CRIMINAL BEHAVIOR

IX.A1 Now I'm going to ask you about things some young people do. All of your answers will be private; nothing you say will be told to anyone else.

First, think about (your/NAME's) friends. How often (do you/does [he/she]) and (your/his/her) friends get together to have fun or hang out? Would you say . . .

- Never, 1
- Hardly ever, 2
- Sometimes, or 3
- Often? 4
- DOES NOT HAVE FRIENDS 5
- DON'T KNOW d
- REFUSED r

IX.B1 Young people sometime get in trouble with the law. These next questions are about experiences (you/NAME) may have had with the police or courts.

JC-J20

(Have you/Has NAME) ever been arrested or charged with a delinquency or criminal complaint?

PROBE: Please include probation or parole violations.

PROBE: Do not include minor motor vehicle violations.

- YES 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- } → (GO TO SECTION X)

IX.B2 IF YES: (Have you/Has NAME) been arrested or charged with a delinquency or criminal complaint, since (RA DATE)?

JC-J20

PROBE: Did this happen within the past three years?

PROBE: Please include probation or parole violations.

PROBE: Do not include minor motor vehicle violations.

YES..... 1

NO 0

DON'T KNOW d

REFUSED..... r

} → (GO TO IX.I1)

IX.B3 How many times (have you /has NAME) been arrested or charged with a delinquency or criminal complaint since (RA DATE)?

JC-J21

INTERVIEWER: PROBE TO GET NUMBER OF ARRESTS

|_|_| ARRESTS

IX.C1 When were (you/NAME) (most recently/next most recently) arrested or charged with a delinquency or criminal complaint?

JC-J22
(MOD)

|_|_| MONTH

20|_|_| YEAR

IX.C2 What were all of the charges brought against (you/NAME) by the police on (ARREST DATE)?

JC- J25
(MOD)

PROBE: Why (were you/was NAME) arrested?

Were there any other charges brought against (you/NAME)

Were there any other reasons (you were/NAME was) arrested?

RECORD VERBATIM AND CODE:

AGGRAVATED ASSAULT 1

ARSON 2

BURGLARY 3

DISORDERLY CONDUCT 4

DRUGS - USE OR POSSESSION 5

DRUGS - SALE OR MANUFACTURE6

DRUNKENNESS, LIQUOR LAWS, OR
DRIVING WHILE UNDER THE INFLUENCE
(DWI, DUI)7

EMBEZZLEMENT8

FORCIBLE RAPE9

FORGERY OR COUNTERFEITING..... 10

FRAUD 11

GAMBLING 12

LARCENY OR THEFT 13

LOITERING, VAGRANCY, OR CURFEW
VIOLATION..... 14

MOTOR VEHICLE THEFT OR
CARJACKING 15

MURDER OR MANSLAUGHTER 16

OFFENSES AGAINST YOUR FAMILY OR
CHILDREN (DOMESTIC VIOLENCE) 17

PAROLE OR PROBATION VIOLATION 18

PROSTITUTION 19

ROBBERY20

SEX OFFENSES OTHER THAN RAPE OR
PROSTITUTION21

SHOPLIFTING22

SIMPLE ASSAULT.....23

STOLEN PROPERTY, EITHER BUYING,
RECEIVING, OR POSSESSING24

VANDALISM25

EITHER CARRYING OR POSSESSION OF
WEAPONS.....26

OTHER (SPECIFY).....27

DON'T KNOW.....d

REFUSED.....r

IX.D1 (Were you/Was NAME) convicted of (that charge/those charges)?

JC- J26
(MOD)

PROBE: (Were you/Was NAME) found guilty?

- YES.....1 (GO TO IX.E1)
- NO0
- DON'T KNOWd
- REFUSED.....r

IX.D2 Did (you/NAME) plead guilty to (that charge/those charges)?

JC- J26
(MOD)

- YES.....1 (GO TO IX.E1)
- NO0
- DON'T KNOWd
- REFUSED.....r

IX.D3 What happened with (that charge/those charges)?

JC- J26
(MOD)

PROBE: Did (you/ NAME) make a deal or “cop a plea”? (Were you/Was NAME) acquitted? Were the charges dismissed or dropped? Or are the charges still pending?

- MADE A DEAL.....1 (GO TO IX.E1)
- ACQUITTED2
- DISMISSED OR DROPPED.....3
- PENDING.....4
- DON'T KNOWd
- REFUSED.....r

ASK ABOUT NEXT ARREST. IF NO MORE ARRESTS GO TO IX.G1

IX.E1 What (were you/was NAME) convicted of or what did (you/NAME) plead guilty to?

JC- J29

PROBE: What crime(s) (were you/was NAME) convicted of?
(Were you/Was NAME) convicted of any other charge?

RECORD VERBATIM AND CODE ALL THAT APPLY:

- AGGRAVATED ASSAULT1
- ARSON2
- BURGLARY3

DISORDERLY CONDUCT4

DRUGS - USE OR POSSESSION5

DRUGS - SALE OR MANUFACTURE6

DRUNKENNESS, LIQUOR LAWS, OR
DRIVING WHILE UNDER THE INFLUENCE
(DWI, DUI)7

EMBEZZLEMENT8

FORCIBLE RAPE9

FORGERY OR COUNTERFEITING..... 10

FRAUD 11

GAMBLING 12

LARCENY OR THEFT 13

LOITERING, VAGRANCY, OR CURFEW
VIOLATION..... 14

MOTOR VEHICLE THEFT OR
CARJACKING 15

MURDER OR MANSLAUGHTER 16

OFFENSES AGAINST YOUR FAMILY OR
CHILDREN (DOMESTIC VIOLENCE) 17

PAROLE OR PROBATION VIOLATION 18

PROSTITUTION 19

ROBBERY20

SEX OFFENSES OTHER THAN RAPE OR
PROSTITUTION21

SHOPLIFTING22

SIMPLE ASSAULT.....23

STOLEN PROPERTY, EITHER BUYING,
RECEIVING, OR POSSESSING 24

VANDALISM25

EITHER CARRYING OR POSSESSION OF
WEAPONS.....26

OTHER (SPECIFY).....27

DON'T KNOWd

REFUSEDr

IX.E2 Did (you/NAME) serve time in a jail, prison or detention home on that conviction?

JC-J30

YES.....1
 NO0
 DON'T KNOWd
 REFUSED.....r

} → (GO TO IX.F1)

IX.E3 When did (you/ NAME) start serving time on that conviction?

JC-J31

|__|__| MONTH
 |__|__| DAY
 20|__|__| YEAR
 DON'T KNOWd
 REFUSED.....r

IX.E4 (Are you/Is NAME) currently serving time in a jail, prison or detention home?

JC-J32

INTERVIEWER: CODE IF ALREADY KNOWN

YES.....1 (GO TO IX.F1)
 NO0

IX.E5 When did (you/ NAME) get out?

JC-J33

|__|__| MONTH
 |__|__| DAY
 20|__|__| YEAR
 DON'T KNOWd
 REFUSED.....r

IF SAMPLE MEMBER DOES NOT KNOW OR REFUSES DATES OF INCARCERATION ASK IX.E6. ELSE ASK IX.F1.

IX.E6 How much time did (you/ NAME) serve on that conviction?

JC-J35

INTERVIEWER: PROBE FOR TIME SERVED, NOT LENGTH OF SENTENCE.

|_|_|_| UNITS

- DAYS 1
- WEEKS 2
- MONTHS 3
- YEARS 4
- DON'T KNOW d
- REFUSED r

IX.F1 (Were you/Was NAME) put on probation or parole?

JC-J36

- PROBATION 1
- PAROLE 2
- BOTH PROBATION AND PAROLE 3
- NO PROBATION OR PAROLE 4
- DON'T KNOW d
- REFUSED r

} → (GO TO BOX
BEFORE IX.G1)

IX.F2 How long (were you/was NAME) put on probation or parole?

|_|_|_| UNITS

- DAYS 1
- WEEKS 2
- MONTHS 3
- YEARS 4
- DON'T KNOW d
- REFUSED r

IX.F2 IF YES: (Are you/Is NAME) still on probation or parole for that charge?

JC-J37

- YES 1
- NO 0
- DON'T KNOW d

REFUSED.....r

**ASK ABOUT NEXT ARREST. IF NO MORE ARRESTS
GO TO IX.G1**

IX.G1 I just want to make sure we haven't missed any arrests or charges since (RA DATE). Other than the one(s) you've already told me about, (were you/was NAME) arrested or changed since (RA DATE)?

YES.....1 (ADD 1 TO ARRESTS,
GO TO IX.C1)
NO0
DON'T KNOWd
REFUSED.....r } → (GO TO IX.H1)

IX.H1 (Other than the ones you already told me about) Since (RA DATE), (have you/has NAME) been convicted of, or (have you/has (he/she)) plead guilty to any charge?

YES.....1
NO0
DON'T KNOWd
REFUSED.....r } → (GO TO BOX
BEFORE IXI1)

IX.H2 What [were/are] all the [other] charges (you were/NAME was) [convicted of / or plead guilty to] since (RA DATE)?

JC-129
(MO)

PROBE: Please don't count any convictions you already told me about.

PROBE: (Were you convicted of/did you plead guilty to) any other charges?

RECORD VERBATIM AND CODE:

AGGRAVATED ASSAULT 1
ARSON2
BURGLARY3
DISORDERLY CONDUCT4
DRUGS - USE OR POSSESSION5
DRUGS - SALE OR MANUFACTURE6
DRUNKENNESS, LIQUOR LAWS, OR
DRIVING WHILE UNDER THE INFLUENCE
(DWI, DUI)7

EMBEZZLEMENT	8
FORCIBLE RAPE	9
FORGERY OR COUNTERFEITING.....	10
FRAUD	11
GAMBLING	12
LARCENY OR THEFT	13
LOITERING, VAGRANCY, OR CURFEW VIOLATION.....	14
MOTOR VEHICLE THEFT OR CARJACKING	15
MURDER OR MANSLAUGHTER	16
OFFENSES AGAINST YOUR FAMILY OR CHILDREN (DOMESTIC VIOLENCE).....	17
PAROLE OR PROBATION VIOLATION	18
PROSTITUTION	19
ROBBERY	20
SEX OFFENSES OTHER THAN RAPE OR PROSTITUTION	21
SHOPLIFTING	22
SIMPLE ASSAULT.....	23
STOLEN PROPERTY, EITHER BUYING, RECEIVING, OR POSSESSING	24
VANDALISM	25
EITHER CARRYING OR POSSESSION OF WEAPONS.....	26
OTHER (SPECIFY).....	27
DON'T KNOW	d
REFUSED.....	r

**IF JAIL TIME WAS REPORTED SINCE RA GO TO IX.I2a,
ELSE ASK IX.I1.**

IF NO JAIL TIME SINCE RA DATE

IX.I1 (Have you/Has NAME) ever served time in a jail, prison or detention home?

JC-I30
(MOD)

PROBE: Please only include time served in a jail, prison or detention home if you were arrested or charged with a crime or delinquency?

YES..... 1
 NO 0
 DON'T KNOW d
 REFUSED..... r

} → (GO TO BOX BEFORE IX.J1)

IX.I2 (Have you/Has NAME) served any time in a jail, prison or detention home since (RA DATE)?

PROBE: Was this in the past three years?

YES..... 1 (GO TO IX.I3)
 NO 0
 DON'T KNOW d
 REFUSED..... r

} → (GO TO BOX BEFORE IX.K1)

IX.I2a Next, I would like to ask about time spent in jail, prison or detention home since (RA DATE)? Other than the time spent in jail that you have already told me about, (have you, has NAME) served any other time in a jail, prison or detention home since (RA DATE)?

PROBE: Was this in the past three years?

YES..... 1
 NO 0
 DON'T KNOW d
 REFUSED..... r

} → (GO TO BOX BEFORE IX.K1)

IX.I3 (Other than what you have already told me about,) Since (RA DATE), how many different times did (you/ NAME) serve time in a jail, prison, or detention home?

PROBE: How many jail terms (have you/has NAME) had since (RA DATE)?

|_|_| NUMBER OF JAIL TERMS

IX.I4 (Other than the time you have already told me about,) How much time did (you/ NAME) serve in a jail, prison, or detention home since (RA DATE)?

INTERVIEWER: PROBE FOR TIME SERVED, NOT LENGTH OF SENTENCE. IF UNSURE, GET BEST ESTIMATE.

____|____|____| UNITS

- DAYS 1
- WEEKS 2
- MONTHS 3
- YEARS 4
- DON'T KNOW d
- REFUSED r

IX.I5 (Are you/Is NAME) currently serving time in a jail, prison or detention home?

JC-J32

INTERVIEWER: CODE IF ALREADY KNOWN

- YES 1
- NO 0
- DON'T KNOW d
- REFUSED r

**IF PROBATION OR PAROLE WAS REPORTED SINCE RA
GO TO IX.J2a, ELSE ASK IX.J1.**

IF NO PROBATION OR PAROLE SINCE RA DATE

IX.J1 (Have you/Has NAME) ever been on probation or parole?

(NLTS (mod. timeframe) U8c)

- YES 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- } → (GO TO SECTION X)

IX.J2 IF YES: (Were you/Was NAME) on probation or parole since (RA DATE)?

- YES 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- } → (GO TO SECTION X)

IX.J2a Next, I would like to ask about probation or parole. Other than the time spent on probation or parole that you have already told me about, (have you, has NAME) been on probation or parole at any other time since (RA DATE)?

PROBE: Was this in the past three years?

YES.....	1	
NO	0	} → (GO TO SECTION X)
DON'T KNOW	d	
REFUSED.....	r	

IX.J3 (Other than the probation or parole time you have already told me about,) Since (RA DATE), how many different times (have you/has NAME) been on probation or parole?

|_|_| NUMBER OF TIMES ON PROBATION/PAROLE

DON'T KNOWd
 REFUSED.....r

IX.I4 (Other than the time you have already told me about,) Since (RA DATE) how long (were you/ was NAME) put on probation or parole?

|_|_|_| UNITS

DAYS 1
 WEEKS 2
 MONTHS 3
 YEARS..... 4
 DON'T KNOWd
 REFUSED.....r

IX.J4 (Are you/Is NAME) currently on parole for any offense?

JC-J39

YES..... 1
 NO 0
 DON'T KNOWd
 REFUSED.....r

IX.J5 (Are you/Is NAME) currently on probation for any offense?

JC-J40

YES.....1
NO0
DON'T KNOW.....d
REFUSED.....r

SECTION X: LIVING ARRANGEMENT

Next, I will ask some questions about (your/ NAME's) living arrangement.

X.A1 (Are you/Is NAME) currently married?

(YTD - 52.)

- YES..... 1 (GO TO X.A3)
- NO 0
- DON'T KNOW d
- REFUSED r

IF NOT CURRENTLY MARRIED AND DOES NOT LIVE ALONE:

X.A2 (Are you/Is NAME) living with a partner or companion in a marriage-like relationship?

- YES..... 1
- NO 0
- DON'T KNOW d
- REFUSED r

X.A3 (Do you/Does NAME) live in a house, condo or mobile home that (you/name) or (your/his/her) family owns?

- YES..... 1 (GO TO X.B1)
- NO 0

X.A4 (Do you/Does NAME) live in a house, apartment, condo or mobile home that (you/name) or (your/his/her) family rents?

- YES..... 1
- NO 0 (GO TO X.A6)

X.A5 Some people live in a place that has staff available to help them learn daily activities, like cleaning the apartment, making nutritious meals, and maintaining a clean and neat personal appearance. (Do you/Does NAME) live in this type of place?

- YES..... 1 (GO TO X.D1)
- NO 0 (GO TO X.B1)

X.A6 (Do you/Does NAME) live in a house, apartment, condo or other home for people with disabilities?

YES.....1 (GO TO X.D1)

NO0

X.A7 (Do you/Does NAME) live in a group home?

PROBE: (Do you/Does NAME) live in home with other people with disabilities and someone whose job it is to help (you/him/her) or provide supervision?

YES.....1 (GO TO X.D1)

NO0

X.A8 Where (do you/does NAME) live?

JAIL, PRISON, DETENTION CENTER1(GO TO X.D1)

SHELTER2(GO TO X.D1)

NURSING HOME.....3 (GO TO X.D1)

ASSISTED LIVING FACILITY4 (GO TO X.D1)

OTHER INSTITUTIONAL SETTING
(SPECIFY)5 (GO TO X.D1)

OTHER RESIDENTIAL SETTING
(SPECIFY)6 (GO TO X.B1)

HOMELESS7 (GO TO X.D1)

DON'T KNOW.....d

REFUSED.....r

X.B1 Other than family members, does someone help (you/NAME) with activities like how to manage (your/his/her) money, how to do laundry, how to make meals, OR other activities so that (you/NAME) can live independently.

YES.....1

NO0

X.B2 (Do you/Does NAME) live alone or (do you/does [he/she]) live with other people?

(YTD -Q40)

INTERVIEWER: CODE IF ALREADY KNOWN

- LIVE ALONE1 (GO TO X.D1)
- LIVE WITH OTHER PEOPLE.....0

ASK IF SM LIVES IN RESIDENTIAL SETTING AND LIVES WITH OTHER PEOPLE:

X.C1 Who (do you/does NAME) live with?

(YTD -Q43)

PROBE: (Do you/Does NAME) live with anyone else?

CODE ALL THAT APPLY

- BIOLOGICAL/ADOPTIVE MOTHER 1
- STEP/OTHER MOTHER.....2
- FOSTER MOTHER.....3
- GRANDMOTHER.....4
- AUNT5
- SISTER.....6
- BIOLOGICAL/ADOPTIVE FATHER7
- STEP/OTHER FATHER8
- FOSTER FATHER9
- GRANDFATHER.....10
- UNCLE.....11
- BROTHER12
- SPOUSE OR PARTNER.....13
- LEGAL GUARDIAN.....14
- SM'S CHILD.....15
- FOSTER SIBLING16
- COUSIN.....17
- FRIEND18
- ROOMMATE.....19
- SOMEONE ELSE.....20
- DON'T KNOWd
- REFUSED.....r

X.C2 Including (yourself/NAME), how many people live with (you/him/her)?

(YTD -Q46)

____ NUMBER OF PEOPLE

DON'T KNOW..... d

REFUSED..... r

X.D1 Next I am going to ask you about all of (your/his/her) biological children, adopted children, or foster children and any other children for whom (you/he/she) are responsible, even if they are not living in (your/his/her) household right now.

(YTD -Q49)

PROGRAMMER: CODE "1" YES IF LIVES WITH OWN CHILD:

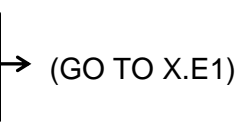
(Do you/Does NAME) have any children for whom (you/he/she) are responsible?

YES..... 1

NO 0

DON'T KNOW..... d

REFUSED..... r



ASK IF SM HAS CHILDREN:

X.D2 How many children (do you/does NAME) have?

(YTD -Q50)

____ NUMBER OF CHILDREN

X.D4 (Is this child/Are any of these children) (your/NAME's) biological child?

YES..... 1 (GO TO SECTION XI)

NO 0

DON'T KNOW..... d

REFUSED..... r

ASK FEMALES ONLY

X.E1 (Have you/Has NAME) ever been pregnant?

YES..... 1

NO 0

DON'T KNOW..... d

REFUSED..... r

ASK MALES ONLY

X.E2 To your knowledge, (have you/has NAME) ever gotten a woman pregnant?

YES.....1

NO0

DON'T KNOWd

REFUSED.....r

SECTION XI: INCOME

XI.A1 (YTD -57.) The next questions are about (your/NAME's) health insurance, income and assistance (you/NAME) may receive. [IF RESPONDENT IS SM ADD]: You may need someone's help to answer these questions.

First, I'd like to ask about medical expenses and health insurance. Health insurance helps pay for medical expenses, like when (you/he/she) go to the doctor.

(Are you/Is NAME) now covered by any government-assisted or public health insurance such as Medicare, Medicaid, (IF COLORADO: or Child Health Plan Plus, IF NY: Child Health Plus, or Family Health Plus; IF WV: Mountain Health Choices).

- YES..... 1
- NO 0
- DON'T KNOW d
- REFUSED..... r

XI.A2 (YTD -58) (Mod) (Are you/Is NAME) now covered by private health insurance from an employer or union?

PROBE [If independent youth]: This includes coverage through your own employer or union as well as coverage that you may have through your parents' employer or union.

PROBE [If parent]: This includes coverage that you may have for (NAME) through your own employer or union as well as coverage that (NAME) may have through (his/her own) employer or union.

- YES..... 1
- NO 0
- DON'T KNOW d
- REFUSED..... r

XI.A3 (YTD -58) (Mod) (Are you/Is NAME) now covered by private health insurance that (you/NAME) or (your/his/her) family buys directly?

- YES..... 1
- NO 0
- DON'T KNOW d
- REFUSED..... r

XI.B1 Last month, did (you/NAME) receive assistance from temporary assistance for needy families, TANF, or (**COLORADO:** Colorado Works; **NY:** Family Assistance; **FLORIDA:** Temporary Cash Assistance; **MARYLAND:** Temporary Cash Assistance; **WEST VIRGINIA:** West Virginia Works)]?

(YTD - 63)

YES.....	1	
NO	0	} → (GO TO X.B1c)
DON'T KNOW	d	
REFUSED.....	r	

XI.B1a. Last month, how much money did (you/NAME) get from TANF?

|_|_|_| DOLLARS (GO TO XI.B2)

DON'T KNOW	d
REFUSED.....	r

XI.B1b. Was it ...

Less than \$100	1
Between \$100 and \$199	2
Between \$200 and \$299	3
Between \$300 and \$399	4
Between \$400 and \$499	5
Between \$500 and \$599	6
Between \$600 and \$699	7
Or was it more than \$700	8
DON'T KNOW	d
REFUSED.....	r

IF SM LIVES ALONE, SKIP TO XI.B2

XI.B1c Last month, did anyone else in (your/NAME's) household receive assistance from temporary assistance for needy families, TANF, or (**COLORADO:** Colorado Works; **NY:** Family Assistance; **FLORIDA:** Temporary Cash Assistance; **MARYLAND:** Temporary Cash Assistance; **WEST VIRGINIA:** West Virginia Works])?

(YTD - 63)

YES..... 1
 NO 0
 DON'T KNOW d
 REFUSED..... r

XI.B2 Last month, did (you/ NAME) receive assistance from food stamps (**IF FLORIDA:** or SUNCAP)?

(YTD - 63a)

PROBE: This is also known as the supplemental nutrition program or SNAP.

PROBE: Benefits are provided on an electronic card, called an EBT card, that is used like an ATM card and accepted at most grocery stores.

YES..... 1
 NO 0
 DON'T KNOW d
 REFUSED..... r

} → (GO TO X.B2c)

XI.B2a. Last month, how much money did (you/NAME) get from food stamps?

|_|_|_| DOLLARS (GO TO XI.B3)

DON'T KNOW d
 REFUSED..... r

XI.B2b. Was it ...

Less than \$100	1
Between \$100 and \$199	2
Between \$200 and \$299	3
Between \$300 and \$399	4
Between \$400 and \$499	5
Between \$500 and \$599	6
Between \$600 and \$699	7
Or was it more than \$700	8
DON'T KNOW	d
REFUSED	r

IF SM LIVES ALONE, SKIP TO XI.B3

XI.B2c. Last month, did anyone else in (your/NAME's) household receive assistance from food stamps (IF FLORIDA: or SUNCAP)?

YES.....	1
NO	0
DON'T KNOW	d
REFUSED	r

XI.B3. (Do you/Does NAME) currently receive any governmental housing assistance in paying rent (such as through public housing or Section 8)?

PROBE: This is also known as the Housing Choice Voucher Program. Section 8 provides funding for rent subsidies for eligible low-income families.

YES.....	1
NO	0
DON'T KNOW	d
REFUSED	r

XI.C1. Last month, did you (IF MARRIED: or your spouse) receive any income from Social Security? Please consider both SSI and SSDI payments.

NBS

- YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED..... r
- } → (GO TO X.D1)

XI.C2 How much income did (you/name) receive last month from Social Security?

____|____|____|____| DOLLARS (GO TO XI.D1)
(1-4000)

- DON'T KNOW d
- REFUSED..... r

XI.C2a. Was it less than \$500?

- YES..... 1
- NO 0 (GO TO XI.C2c)
- DON'T KNOW d (GO TO XI.D1)
- REFUSED..... r (GO TO XI.D1)

XI.C2b. Was it . . .

- Less than \$100 1
- Between \$100 and \$199 2
- Between \$200 and \$299 3
- Between \$300 and \$399, or 4
- Was it between \$400 and \$500 5
- DON'T KNOW d
- REFUSED..... r

GO TO XI.D1

XI.C2c. Was it less than \$1,000?

- YES..... 1
- NO 0 (GO TO XI.C2e)
- DON'T KNOW d (GO TO XI.D1)
- REFUSED r (GO TO XI.D1)

XI.C2d. Was it . . .

- Between \$500 and \$599 1
- Between \$600 and \$699 2
- Between \$700 and \$799 3
- Between \$800 and \$899 4
- Or was it between \$900 and \$1,000 5
- DON'T KNOW d
- REFUSED r

GO TO XI.D1

XI.C2e. Was it . . .

- Between \$1,000 and \$1,499 1
- Between \$1,500 and \$1,999 2
- Between \$2,000 and \$2,499 3
- Between \$2,500 and \$2,999 4
- Or was it more than \$3,000 5
- DON'T KNOW d
- REFUSED r
- DON'T KNOW d
- REFUSED r

**IF CURRENTLY EMPLOYED ASK XI.D1, IF NOT
EMPLOYED BUT MARRIED OR LIVING WITH PARTNER
ASK XI.D3, ELSE ASK XI.E1**

IF CURRENTLY EMPLOYED:

XI.D1 Next I'd like you to think about money earned at jobs. How much money did (you/ NAME) earn last month? Please include (your/NAME's) wages, salary, commissions, bonuses and tips from all jobs you worked last month.

PROBE: How much did (you/he/she) earn last week? (INTERVIEWER MULTIPLY BY 4)

PROBE: How much did (you/he/she) earn last year? (INTERVIEWER DIVIDE BY 12)

|_|,|_|_|_| DOLLARS (GO TO XI.D2)

NO EARNINGS LAST MONTH 0 (GO TO XI.D3)

DON'T KNOW d

REFUSED r

XI.D1a. Was (your/his/her) income last month, less than \$1,000?

YES..... 1

NO 0 (GO TO XI.D1e)

DON'T KNOW d (GO TO XI.D3)

REFUSED r (GO TO XI.D3)

XI.D1b. Was it less than \$500?

YES..... 1

NO 0 (GO TO XI.D1d)

DON'T KNOW d (GO TO XI.D3)

REFUSED r (GO TO XI.D3)

XI.D1c. Was it . . .

Less than \$100 1

Between \$100 and \$199 2

Between \$200 and \$299 3

Between \$300 and \$399, or 4

Was it between \$400 and \$500 last month?..... 5

DON'T KNOW d (GO TO XI.D3)

REFUSED r (GO TO XI.D3)

GO TO XI.D2

XI.D1d. Was it . . .

- Between \$500 and \$599 1
- Between \$600 and \$699 2
- Between \$700 and \$799 3
- Between \$800 and \$899 4
- Or was it between \$900 and \$1,000 last month?..... 5
- DON'T KNOW d (GO TO XI.D3)
- REFUSED r (GO TO XI.D3)

GO TO XI.D2

XI.D1e. Was it less than \$2,000?

- YES..... 1
- NO 0 (GO TO XI.D1g)
- DON'T KNOW d (GO TO XI.D3)
- REFUSED r (GO TO XI.D3)

XI.D1f. Was it . . .

- Between \$1,000 and \$1,199 1
- Between \$1,200 and \$1,399 2
- Between \$1,400 and \$1,599 3
- Between \$1,600 and \$1,799 4
- Or was it between \$1,800 and \$2,000 last month?..... 5
- DON'T KNOW d (GO TO XI.D3)
- REFUSED r (GO TO XI.D3)

GO TO XI.D2

XI.D1g. Was it less than \$4,000?

- YES..... 1
- NO 0 (GO TO XI.D1i)
- DON'T KNOW d (GO TO XI.D3)
- REFUSED r (GO TO XI.D3)

XI.D1h. Was it . . .

- Between \$2,000 and \$2,499 1
- Between \$2,500 and \$2,999 2
- Between \$3,000 and \$3,499 3
- Or was it between \$3,500 and \$4,000 last month? 4
- DON'T KNOW d (GO TO XI.D3)
- REFUSED r (GO TO XI.D3)

XI.D1i. Was it . . .

- Between \$4,000 and \$4,999 1
- Between \$5,000 and \$5,999 2
- Between \$6,000 and \$6,999 3
- Between \$7,000 and \$7,999 4
- Or was it more than \$8,000 last month? 5
- DON'T KNOW d (GO TO XI.D3)
- REFUSED r (GO TO XI.D3)

XI.D2. Was this amount before or after taxes?

- BEFORE 1
- AFTER 2
- DON'T KNOW d
- REFUSED r

**IF MARRIED OR LIVING WITH PARTNER ASK XI.D3,
ELSE ASK XI.E1**

XI.D3. Did you spouse or partner work at a job for pay last month?

YES.....	1	} → (GO TO X.E1)
NO	0	
DON'T KNOW	d	
REFUSED.....	r	

XI.D4 How much money did (your/NAME's) spouse or partner earn last month? Please include wages, salary, commissions, bonuses and tips from all jobs worked last month.

PROBE: How much did (he/she) earn last week? (INTERVIEWER MULTIPLY BY 4)

PROBE: How much did (he/she) earn last year? (INTERVIEWER DIVIDE BY 12)

|_|,|_|_|_| DOLLARS (GO TO XI.D5)

DON'T KNOW	d
REFUSED.....	r

XI.D4a. Was (your/his/her) income last month, less than \$1,000?

YES.....	1
NO	0 (GO TO XI.D4e)
DON'T KNOW	d (GO TO XI.E1)
REFUSED.....	r (GO TO XI.E1)

XI.D4b. Was it less than \$500?

- YES..... 1
- NO 0 (GO TO XI.D4d)
- DON'T KNOW d (GO TO XI.E1)
- REFUSED r (GO TO XI.E1)

XI.D4c. Was it . . .

- Less than \$100 1
- Between \$100 and \$199 2
- Between \$200 and \$299 3
- Between \$300 and \$399, or 4
- Was it between \$400 and \$500 last month?..... 5
- DON'T KNOW d (GO TO XI.E1)
- REFUSED r (GO TO XI.E1)

GO TO XI.D5

XI.D4d. Was it . . .

- Between \$500 and \$599 1
- Between \$600 and \$699 2
- Between \$700 and \$799 3
- Between \$800 and \$899 4
- Or was it between \$900 and \$1,000 last month?..... 5
- DON'T KNOW d (GO TO XI.E1)
- REFUSED r (GO TO XI.E1)

GO TO XI.D5

XI.D4e. Was it less than \$2,000?

- YES..... 1
- NO 0 (GO TO XI.D4g)
- DON'T KNOW d (GO TO XI.E1)
- REFUSED r (GO TO XI.E1)

XI.D4f. Was it . . .

- Between \$1,000 and \$1,199 1
- Between \$1,200 and \$1,399 2
- Between \$1,400 and \$1,599 3
- Between \$1,600 and \$1,799 4
- Or was it between \$1,800 and \$2,000 last month? 5
- DON'T KNOW d (GO TO XI.E1)
- REFUSED r (GO TO XI.E1)

GO TO XI.D5

XI.D4g. Was it less than \$4,000?

- YES 1
- NO 0 (GO TO XI.D4j)
- DON'T KNOW d (GO TO XI.E1)
- REFUSED r (GO TO XI.E1)

XI.D4h. Was it . . .

- Between \$2,000 and \$2,499 1
- Between \$2,500 and \$2,999 2
- Between \$3,000 and \$3,499 3
- Or was it between \$3,500 and \$4,000 last month? 4
- DON'T KNOW d (GO TO XI.E1)
- REFUSED r (GO TO XI.E1)

GO TO XI.D5

XI.D4i. Was it . . .

- Between \$4,000 and \$4,999 1
- Between \$5,000 and \$5,999 2
- Between \$6,000 and \$6,999 3
- Between \$7,000 and \$7,999 4
- Or was it more than \$8,000 last month? 5
- DON'T KNOW d (GO TO XI.E1)
- REFUSED r (GO TO XI.E1)

XI.D5. Was this amount before or after taxes?

- BEFORE 1
- AFTER 2
- DON'T KNOW d
- REFUSED r

XI.E1 Next I'd like you to think about money you received from friends or relatives.

Last month, did you receive any money from friends or relatives?

- YES 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- } → (GO TO X.F1)

XI.E2 How much money did (you/ NAME) receive from friends or relatives last month?

||, |_|_|_| DOLLARS (GO TO XI.F1)

- DON'T KNOW d
- REFUSED r

XI.E2a. Was it less than \$1,000?

- YES..... 1
- NO 0 (GO TO XI.E2e)
- DON'T KNOW d (GO TO XI.F1)
- REFUSED r (GO TO XI.F1)

XI.E2b. Was it less than \$500?

- YES..... 1
- NO 0 (GO TO XI.E2d)
- DON'T KNOW d (GO TO XI.F1)
- REFUSED r (GO TO XI.F1)

XI.E2c. Was it . . .

- Less than \$100 1
- Between \$100 and \$199 2
- Between \$200 and \$299 3
- Between \$300 and \$399, or 4
- Was it between \$400 and \$500 last month?..... 5
- DON'T KNOW d
- REFUSED r

GO TO XI.F1

XI.E2d. Was it . . .

- Between \$500 and \$599 1
- Between \$600 and \$699 2
- Between \$700 and \$799 3
- Between \$800 and \$899 4
- Or was it between \$900 and \$1,000 last month?..... 5
- DON'T KNOW d
- REFUSED r

GO TO XI.F1

XI.E2e. Was it less than \$2,000?

- YES..... 1
- NO 0 (GO TO XI.E2g)
- DON'T KNOW d (GO TO XI.F1)
- REFUSED r (GO TO XI.F1)

XI.E2f. Was it . . .

- Between \$1,000 and \$1,199 1
- Between \$1,200 and \$1,399 2
- Between \$1,400 and \$1,599 3
- Between \$1,600 and \$1,799 4
- Or was it between \$1,800 and \$2,000 last month? 5
- DON'T KNOW d
- REFUSED r

GO TO XI.F1

XI.E2g. Was it less than \$4,000?

- YES..... 1
- NO 0 (GO TO XI.E2i)
- DON'T KNOW d (GO TO XI.F1)
- REFUSED r (GO TO XI.F1)

XI.E2h. Was it . . .

- Between \$2,000 and \$2,499 1
- Between \$2,500 and \$2,999 2
- Between \$3,000 and \$3,499 3
- Or was it between \$3,500 and \$4,000 last month? 4
- DON'T KNOW d
- REFUSED r

GO TO XI.F1

XI.E2i. Was it . . .

- Between \$4,000 and \$4,999 1
- Between \$5,000 and \$5,999 2
- Between \$6,000 and \$6,999 3
- Between \$7,000 and \$7,999 4
- Or was it more than \$8,000 last month? 5
- DON'T KNOW d
- REFUSED r

XI.F1 Next I'd like you to think about money (you/NAME) received from any source we haven't mentioned, such as money from interest, dividends, alimony, child support, or other public assistance.

Last month, did (you/NAME) receive money from any source we haven't discussed?

- YES..... 1
 - NO 0
 - DON'T KNOW d
 - REFUSED r
- } → (GO TO X.G1)

XI.F2 How much money did (you/ NAME) receive from other sources last month?

||,|_|_|_| DOLLARS (GO TO XI.G1)

- DON'T KNOW d
- REFUSED r

XI.F2a. Was it less than \$1,000?

- YES..... 1
- NO 0 (GO TO XI.F2c)
- DON'T KNOW d (GO TO XI.G1)
- REFUSED r (GO TO XI.G1)

XI.F2b. Was it less than \$500?

- YES..... 1
- NO 0 (GO TO XI.F2d)
- DON'T KNOW d (GO TO XI.G1)
- REFUSED r (GO TO XI.G1)

XI.F2c. Was it . . .

- Less than \$100 1
- Between \$100 and \$199 2
- Between \$200 and \$299 3
- Between \$300 and \$399, or 4
- Was it between \$400 and \$500 last month?..... 5
- DON'T KNOW d
- REFUSED r

GO TO XI.G1

XI.F2d. Was it . . .

- Between \$500 and \$599 1
- Between \$600 and \$699 2
- Between \$700 and \$799 3
- Between \$800 and \$899 4
- Or was it between \$900 and \$1,000 last month?..... 5
- DON'T KNOW d
- REFUSED r

GO TO XI.G1

XI.F2e. Was it less than \$2,000?

- YES..... 1
- NO 0 (GO TO XI.F2g)
- DON'T KNOW d (GO TO XI.G1)
- REFUSED r (GO TO XI.G1)

XI.F2f. Was it . . .

- Between \$1,000 and \$1,199 1
- Between \$1,200 and \$1,399 2
- Between \$1,400 and \$1,599 3
- Between \$1,600 and \$1,799 4
- Or was it between \$1,800 and \$2,000 last month? 5
- DON'T KNOW d
- REFUSED r

GO TO XI.G1

XI.F2g. Was it less than \$4,000?

- YES..... 1
- NO 0 (GO TO XI.F2i)
- DON'T KNOW d (GO TO XI.G1)
- REFUSED r (GO TO XI.G1)

XI.F2h. Was it . . .

- Between \$2,000 and \$2,499 1
- Between \$2,500 and \$2,999 2
- Between \$3,000 and \$3,499 3
- Or was it between \$3,500 and \$4,000 last month? 4
- DON'T KNOW d
- REFUSED r

GO TO XI.G1

XI.F2i. Was it . . .

Between \$4,000 and \$4,999	1
Between \$5,000 and \$5,999	2
Between \$6,000 and \$6,999	3
Between \$7,000 and \$7,999	4
Or was it more than \$8,000 last month?	5
DON'T KNOW	d
REFUSED	r

XI.G1 You just told me that you received money from (LIST SOURCES) last month, which of these is (your/NAME's) most important source of income?

PROGRAMMER: ONLY SHOW REPORTED SOURCES OF INCOME

TANF	1
FOOD STAMPS	2
SSI/SSDI	3
SM'S JOB	4
SPOUSE OR PARTNER'S JOB	5
FRIENDS AND RELATIVES	6
OTHER INCOME	7
DON'T KNOW	d
REFUSED	r

SECTION XII: FINAL COMMENTS

XII.C1 INTERVIEWER: DID SOMEONE HELP YOUTH ANSWER ANY OF THE QUESTIONS?

- YES, GOT SOME HELP ON SOME QUESTIONS 1
 - YES, PROXY ANSWERED ALL QUESTIONS.....2
 - NO 0
- } → (GO TO XII.D1)

XII.C2 HOW DID THAT PERSON HELP YOUTH?

CODE ALL THAT APPLY

- TRANSLATED INTO ANOTHER LANGUAGE 1
 - USED ASL 2
 - PROVIDED ANSWERS TO A FEW QUESTIONS..... 3
 - PROVIDED ANSWERS TO MANY QUESTIONS..... 4
 - EXPLAINED A FEW QUESTIONS 5
 - EXPLAINED MANY QUESTIONS 6
 - OTHER (SPECIFY)..... 7
-

(All)

XII.D1 Because people like you are such a valued part of what we do, I'd like you to think about the survey you just participated in. On a scale from 1 to 10 where one means 'it was not a good use of time' and ten means, "it was a good use of time", which number between 1 and 10 best describes how you feel about your experience today?

|__|__|
(01-10)

XII.D2 Thank you for helping us with this important study. Your answers will help us better understand how Social Security disability programs affect the lives of people receiving these benefits.

As a token of our appreciation we will be sending a \$10 (GIFT CARD) to you at (FILL ADDRESS). Is this address correct?

INTERVIEWER: CONFIRM INFORMATION AND MAKE CORRECTIONS IF NEEDED.

YES..... 1
NO 0

ADDRESS: _____

STREET ADDRESS: _____

CITY: _____

STATE: _____

ZIP CODE: _____

XII.D3 Thank you again for your help.

XII.D4 Are there any final comments you would like to make regarding your participation in this research?

RECORD VERBATIM: _____

CONTACT MODULE

Hello_SM. Hello, my name is (INTERVIEWER’S FULL NAME) and I am calling from Mathematica Policy Research in Princeton, New Jersey. May I please speak to (NAME)?

- SPEAKING TO SAMPLE MEMBER 1 (SampMemb)
- SM COMES TO THE PHONE 2 (SampMemb)
- SPEAKING TO LEGAL GUARDIAN..... 3 (Parent)
- GUARDIAN COMES TO THE PHONE..... 4 (Parent)
- WHAT IS CALL ABOUT 5 (WhatAbout_SM)
- SM/GUARDIAN BUSY, UNAVAILABLE, NOT HOME ... 6 (CALL BACK)
- SM MOVED/LIVES ELSEWHERE 7 (KnowWhere)
- SM/GUARDIAN SPEAKS SPANISH
[Spanish-speaking interviewer - interim status 410]..... 8
- SM DOES NOT SPEAK ENGLISH OR SPANISH..... 9 (Interpret)
- GUARDIAN DOES NOT SPEAK ENGLISH
OR SPANISH..... 10 (Interpret)
- SM HAS HEALTH PROBLEM 11 (HealthProb)
- SM IN INSTITUTION..... 12 (Institution)
- SM DECEASED 13 (Deceased)
- WRONG NUMBER 14 (Locating)
- HUNG UP DURING INTRODUCTION 15 (HUDI)

WhatAbout_SM Mathematica recently sent (NAME) a letter about a study we are doing for the Social Security Administration. I work for Mathematica Policy Research, a research company in Princeton, New Jersey. Can I please speak with (NAME)?

- SM COMES TO THE PHONE 1 (SampMemb)
- GUARDIAN COMES TO THE PHONE..... 2 (Guardian)
- SM/GUARDIAN BUSY, UNAVAILABLE,
OR NOT HOME 3 (CALL BACK)
- SM MOVED/LIVES ELSEWHERE 4 (KnowWhere)
- SM/GUARDIAN SPEAKS SPANISH
[Spanish-speaking interviewer - interim status 410]..... 5
- SM DOES NOT SPEAK ENGLISH OR SPANISH 6 (Interpret)
- GUARDIAN DOES NOT SPEAK ENGLISH
OR SPANISH..... 7 (Interpret)
- SM/GUARDIAN PHYSICALLY OR MENTALLY
SM HAS HEALTH PROBLEM 8 (HealthProb)

Guardian. **SCRIPT FOR GUARDIANS OF YOUTH.**

IF GUARDIAN COMES TO PHONE: Hello, my name is _____ and I am calling from Mathematica Policy Research about a study we are doing for the Social Security Administration.

You may remember being interviewed by telephone about two years ago. At that time you answered questions about (NAME) over the phone. About three years ago we also spoke to you on the phone and sent you a consent form to sign, and a \$10 INCENTIVE. **IF TREATMENT, ADD:** We also gave (NAME) a chance to be part of the (NAME OF LOCAL YTD PROGRAM). When we spoke to you, we explained that the study would have three interviews. This is the third and final one. The questions I am calling to ask are about (NAME), (his/her) schooling, jobs, health, and how (he/she) getting along day to day. The interview takes about 40 minutes to complete by telephone. I will send (NAME) a \$10 INCENTIVE when we are done.

Unlike the prior interviews when we first started the interview with you and then spoke with (NAME). I would like to complete today's interview with (NAME). It would be helpful for you to stay nearby in case (NAME) needs help.

Can I please speak with (NAME).

IF NECESSARY, ADD:

- All answers will be held in strict confidence.
- Most questions are worded so that young people with disabilities can answer for themselves.
- If it would be better, an interviewer can come to your home instead of doing this by telephone.

YES, CONTINUE 1 (SAMPMEMB)
NOT A GOOD TIME 2 (CALL BACK)
DID NOT RECEIVE LETTER/DOESN'T RECALL 3 (NoLetter)
NEED FIELD INTERVIEW 4 (Field Review)
REFUSAL 5 (REFUSAL)
SM UNABLE TO COMPLETE INTERVIEW 6 (HEALTHPROB)

SampMemb.

IF SM COMES TO PHONE: Hello, my name is _____ and I am calling from Mathematica Policy Research about a study we are doing for the Social Security Administration.

You may remember being interviewed by telephone about two years ago. At that time you answered questions over the phone. About three years ago you also answered questions over the phone and we sent you a consent form to sign and a \$10 INCENTIVE. **IF TREATMENT, ADD:** We also gave you a chance to be part of the (NAME OF LOCAL YTD PROGRAM). When we spoke to you, we explained that the study would have three interviews. This is the third and final one. The questions I am calling to ask are about you, your schooling, jobs, health, and how you are getting along day to day. The interview takes about 40 minutes to complete by telephone. I will send you a \$10 INCENTIVE when we are done. Let's begin.

IF NEEDED: The questions have been worded so you can answer for yourself. If you wish, you can ask someone to stay nearby in case you need help.

IF NECESSARY, ADD:

- All your answers will be held in strict confidence.
- Nothing you say will affect the SSI benefits you get now or in the future.
- Most questions are worded so that young people with disabilities can answer for themselves.
- If it would be better, an interviewer can come to your home instead of doing this by telephone.
- We can start now and take a break if you need one.

YES, CONTINUE 1 (GO TO I.A1)

NOT A GOOD TIME 2 (CALL BACK)

DID NOT RECEIVE LETTER/DOESN'T RECALL 3 (NoLetter)

NEED FIELD INTERVIEW 4 (Field Review)

REFUSAL 5 (REFUSAL)

NoLetter. The letter explained that we would be calling to interview (you/NAME). The questions should take about 40 minutes to answer. All of your answers will be held in strict confidence. I can read the letter to you now and we can begin the interview.

- YES, CONTINUE 1 (GO TO I.A1)
- NOT A GOOD TIME 2 (CALL BACK)
- WANTS ANOTHER LETTER 3 (SendLetter)
- REFUSAL 4 (REFUSAL)

SendLetter. I would be happy to send another letter. Please tell me the address where I should send the letter.

INTERVIEWER NOTE: ADDRESS ENVELOPE FOR REMAIL.

STREET ADDRESS: _____
CITY: _____
STATE: _____
ZIP CODE: _____

StartNow. That letter will be mailed today. Let's begin the interview now.

- YES, BEGIN INTERVIEW 1 (GO TO I.A1)
- NO (INTERVIEWER SCHEDULE CALLBACK
IN 2 WEEKS) [letter requested - code 831] 2 (CALL BACK)

HealthProb. **ENTER TYPE OF HEALTH PROBLEM**

- HEARING PROBLEM 1 (AmpTTY)
- SPEECH PROBLEM 2 (AmpTTY)
- PHYSICAL PROBLEM 3 (CallLater)
- COGNITIVE PROBLEM 4 (NeedProxy)

CallLater. Will (NAME) be able to talk on the telephone if I call back next week or will (NAME) need help with the interview?

PROBE: The interview is designed to be answered by young adults with disabilities.

- YES/MAYBE WOULD ABLE TO DO NEXT WEEK 1 (CALL BACK)
- NO, WOULD NEED HELP FROM A PROXY 0 (NeedProxy)

AmpTTY. I can get on a get a phone that will amplify my voice or (NAME)'s, or we could use a TTY service or instant messenger. Would either of these enable (NAME) to complete the interview?

- YES - amplifier phone 1 (AmpPhone)
- YES - TTY 2 (CallTTY)
- YES - instant messenger..... 3 (IMInterview)
- NO 4 (NeedProxy)

AmpPhone. Please hold while I get the amplifier phone.

INTERVIEWER: WHEN HAVE AMPLIFIER PHONE, ASK RESPONDENT TO CALL SM TO THE PHONE.

- SM COMES TO PHONE 1 (SampMemb)
- CALLBACK 2 (CALLBACK)

CallTTY. I will call back in a few minutes after I have the help of a TTY operator.

INTERVIEWER: NEED TO ARRANGE NEXT CALL WITH TTY OPERATOR.

- ARRANGE CALL WITH TTY OPERATOR 1 (SampMemb)
- IF UNSUCCESSFUL, SET CALLBACK 2 (CALLBACK)

IMInterview. **INTERVIEWER: NEED TO COMPLETE BASELINE USING INSTANT MESSENGER.**

- SM COMES TO PHONE, BEGIN WITH IM 1 (SampMemb)
- CALLBACK 2 (CALLBACK)

Interpret. Perhaps there is someone who could interpret the questions on behalf of (NAME/[NAME's] legal guardian). Is there someone there who can interpret?

- YES, SPEAKING TO INTERPRETER 1 (InterpreterName)
- YES, BUT NOT A GOOD TIME 2 (InterpreterName)
- NO INTERPRETER AVAILABLE 3 (Lang)

InterpreterName.

IF SPEAKING WITH INTERPRETER: What is your name?

IF NOT SPEAKING WITH INTERPRETER: What is the interpreter’s name?

RECORD FIRST AND LAST NAME

BEGIN BASELINE 1 (GO TO I.A1)

SCHEDULE CALLBACK [INTERIM STATUS 400]..... 2 (CALL BACK)

Lang.

What language does (NAME) speak?

CHINESE (CANTONESE)..... 1

CHINESE (MANDARIN)..... 2

CHINESE (NON-SPECIFIED)..... 3

HMONG 4

ITALIAN 5

JAPANESE 6

PORTUGUESE 7

RUSSIAN 8

VIETNAMESE 9

OTHER ASIAN (SPECIFY) 10

OTHER (SPECIFY)..... 11

LangCB.

Thank you. We will try to arrange for an interpreter to call (NAME).

SCHEDULE CALLBACK [INTERIM STATUS 400]

Deceased. I am very sorry to hear that (he/she) passed away.

Thank you. Please accept my condolences. Good-bye.

[END INTERVIEW - FINAL STATUS 440 - DECEASED]

Institution. **ENTER TYPE OF INSTITUTION:**

- HOSPITAL 1 (HomeSoon)
- NURSING HOME 2 (Capable)
- ASSISTED LIVING FACILITY 3 (Capable)
- GROUP HOME 4 (Capable)
- JAIL OR PRISON..... 5 (Release)

HomeSoon. Do you expect (NAME) to come home from the hospital within a week or two?

- YES, APPOINTMENT MADE 1 (CALL BACK)
- SM UNABLE TO RESPOND, NEED PROXY 2 (NeedProxy)

Release. (NAME) should have received a letter about a study we are doing for the Social Security Administration. I work for Mathematica Policy Research, a research company in Princeton, New Jersey. The questions I will be asking are about (NAME), work and school, and how (he/she) gets along day-to-day. When do you expect (NAME) to get out of jail?

SCHEDULE CALL BACK FOR ANTICIPATED TIME OF RELEASE.

- APPOINTMENT MADE
[Incarcerated -interim status 421] 1
- UNKNOWN/MORE THAN ONE YEAR
[Supervisor Review Needed] 2

Capable. (NAME) should have received a letter about a study we are doing for the Social Security Administration. I work for Mathematica Policy Research, a research company in Princeton, New Jersey. The questions I will be asking are about (NAME), work and school, and how he/she gets along day-to-day.

If I called (NAME) at the group facility, would (he/she) be able to answer questions (himself/herself) or would someone need to answer on (his/her) behalf?

- SM COULD RESPOND..... 1 (Facility)
- SM COULD RESPOND BY FIELD 2 (Field Review)
- SM COULD NOT RESPOND, NEED PROXY 3 (NeedProxy)

Facility. I would like to talk to (NAME) over the telephone about this research study. Where is (NAME) living?

NAME OF PLACE: _____

FacAddress. What is the address?

ADDRESS OF PLACE: _____

FacPhone. What is the phone number?

INTERVIEWER: RECORD PHONE NUMBER ON CONTACT SHEET.

PHONE NUMBER OF PLACE: _____

INTERVIEWER: RECORD BEST TIME TO REACH SM ON CONTACT SHEET.

CALL SM AT NEW NUMBER..... 1 (CALL BACK)

NeedProxy. Perhaps there is someone who could answer the questions on behalf of (NAME). Is there a legal guardian, family member, or friend who is knowledgeable about (his/her) school and work experiences and how (he/she) gets along day-to-day?

- YES, LEGAL GUARDIAN CAN PROXY 1 (ProxyName)
- YES, PROXY OTHER THAN LEGAL GUARDIAN 2 (ProxyName2)
- NO PROXY AVAILABLE
[FINAL STATUS - NO PROXY 470] 3

ProxyName. May I please have (your/his/her) legal guardian's name?

LEGAL GUARDIAN'S FIRST AND LAST NAME

[GO TO ProxyRel]

ProxyName2. Who is the person who is most knowledgeable about (NAME)'s school and work experiences and how (he/she) gets along day-to-day?

May I please have (your/his/her) name?

PROXY'S FIRST AND LAST NAME

ProxyRel. How (are you/is proxy) related to (NAME)?

- SPOUSE 1
 - PARTNER..... 2
 - SIBLING..... 3
 - PARENT 4
 - LEGAL GUARDIAN..... 5
 - NIECE/NEPHEW 6
 - OTHER RELATIVE 7
 - FRIEND 8
 - OTHER (SPECIFY)..... 9
- _____

Speaking. **INTERVIEWER: ARE YOU SPEAKING TO PROXY? IS PROXY AVAILABLE?**

- SPEAKING TO PROXY 1 (ProxyStart)
- NOT SPEAKING TO PROXY, PROXY
NOT AVAILABLE, NEED TO GET
MORE INFORMATION 2 (ProxyThere)

ProxyStart. I'd like to begin the interview now.

- BEGIN INTERVIEW 1 (SampMemb)
- SCHEDULE CALLBACK..... 2 (CALL BACK)

ProxyThere. Does (NAME OF PROXY) live at this phone number or do I need to call somewhere else to speak with (him/her)?

PROXY LIVES AT THIS NUMBER -
SCHEDULE CALLBACK 1 (CALL BACK)
PROXY LIVES ELSEWHERE 2 (ProxyPhone)

ProxyPhone. May I please have (his/her)telephone number?

TELEPHONE NUMBER: _____

ProxyAddr. And (his/her)address?

STREET ADDRESS: _____
CITY: _____
STATE: _____
ZIP CODE: _____

[GO TO Thanks]

KnowWhere. (NAME) should have received a letter about a study we are doing for the Social Security Administration. I work for Mathematica Policy Research, a research company in Princeton, New Jersey.

Do you know how we can reach (NAME)?

YES..... 1 (NewPhone)
YES, NEED CALLBACK 2 (CALLBACK)
NO [send to searching - interim status 530]..... 3

NewPhone. Could you please give me the number where I can reach (him/her)?

INTERVIEWER: RECORD PHONE NUMBER AND ADDRESS ON CONTACT SHEET.

TELEPHONE NUMBER: _____

New Address. May I please have (his/her) address?

STREET ADDRESS: _____

CITY: _____

STATE: _____

ZIP CODE: _____

Thanks. Thank you very much for your time.

[exit case]

Thanks. Thank you very much for your time.

[exit case]