Longitudinal Study Survey

Department of Veterans Affairs, Education Service Division is conducting a Longitudinal Study of Veterans participating in the Post-9/11 GI Bill (Chapter 33). This study will take place over the next 20 years.

You have been randomly selected to participate in this study. We are requesting that you complete a survey each year, for the next 20 years. Information gathered will be used to help understand the long-term benefits of the Chapter 33 program and help us improve services for other Veterans.

Please take a few moments to complete this yearly survey. Your feedback is very important to us. Data reported to outside sources will be reported in aggregate form and not be specific to you. Your responses will also be kept private to the extent of the law and will not be used for any purposes other than for this study.

If you have any questions about the survey, please call 1-800-XXX-XXXX or email info@xxxxxxxx.com. Your participation is very much appreciated.

Please mail the survey in the enclosed pre-addressed postage-paid envelope.

Current Status

	ow have you used the Post-9/11 GI Bill benefits so far? (Check all that bly.)
	Took college or university coursework leading to a degree Took college or university coursework <u>not</u> leading to a degree Attended business, technical or vocational school training leading to a certificate or diploma
	Participated in an apprenticeship or on-the-job training program Took correspondence courses Took flight training
	Received tutorial assistance, refresher courses, or deficiency training Attended a teacher certification program Other:
Bill □	e you <u>currently</u> using your Post-9/11 GI Bill benefits, or using Post-9/11 GI benefits that were transferred to you? (Check only one.) Yes —— (Skip to item 3) No
	hy are you no longer using the Post-9/11 GI Bill benefits? (Check only one.) Successfully completed classes or training — (Skip to item 3) Used all eligible months available — (Skip to item 3) Suspended by school — (Skip to item 3) Voluntarily withdrew or stopped attending classes or training Other:
	y did you voluntarily withdraw or stop attending classes or training? neck all that apply.)
	Medical reasons Financial reasons
	Family responsibilities
	Found a job prior to program completion
	Successfully met my educational or training goals Transportation difficulties
	Training or educational program did not meet my needs
	Training or educational program requirements were too difficult
	Lost interest in training or educational program To pursue another education benefit (Ch31, State Voc Rehab, etc)
	Other:

Benefits
 3. At any time in the past 12 months, did you receive any of the following benefits from Social Security? (Check all that apply.) Did not receive SS benefits
 □ Supplemental Security Income (SSI) □ Social Security Disability Insurance (SSDI) □ Medicare □ Retirement
□ Survivor's or Dependent □ Other:
Employment
 4. During the last week, were you (Check only one.) □ Working, or on paid vacation or sick leave from work? → (Skip to item 5) □ Not working, but looking for work? → (Skip to item 5) □ Not working and not looking for work?
 4a. What is the main reason you were not looking for work? (Check only one.) □ Going to school □ Ill, or disabled and unable to work □ Retired □ Taking care of home or family □ Could not find work □ Other:
 5. Were you employed at any time in the past 12 months? (Check only one.) ☐ Yes ☐ No → (Skip to item 9)
6. During the <u>past 12 months</u> (52 weeks), how many weeks were you employed? (Fill in number of weeks.)
Weeks employed:
7. During the <u>past 12 months</u> , in the weeks you worked, how many hours did you usually work each week? (Fill in number of hours.)

Hours per week: _____

 8. During the past 12 months, how much did you earn from all jobs or busin before taxes and other deductions? (Check only one and fill in the number of the past 12 months, how much did you earn from all jobs or busin before taxes and other deductions? (Check only one and fill in the number of the past 12 months, how much did you earn from all jobs or busin before taxes and other deductions? (Check only one and fill in the number of taxes and other deductions?) Hourly rate	
 9. During the past 12 months, did you receive any counseling, training, job search assistance, or other assistance to help you find or keep a job? ☐ Yes ☐ No)
 9a. How much did this assistance contribute to your success in finding or keeping a job? A lot Some A little None 	
10. What was your gross income during the <u>past 12 months</u> , from each of t following sources?	the
a. Wages, salary, commissions, bonuses, or tips from all jobs\$	
b. Interest, dividends, net rental income, royalty, Income, or income from estates and trusts \$	
c. Social Security or Railroad Retirement\$	
d. Supplemental Security Income (SSI)\$	
e. Any public assistance or welfare payments from the state or local welfare office\$	
f. Retirement, survivor, or disability pension (NOT including Social Security)\$	
g. Any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support, or alimony\$	
TOTAL INCOME (add a – g)\$	

CO	mpensation?
<u> </u>	Yes No ——→ (Skip to item 12)
11a. Ho	ow many weeks of unemployment did you receive? (Fill in number of ks.)
İ	Number of weeks:
	Education
Lea univ inst emp gra	any time in the <u>past 12 months</u> , were you enrolled in an Institution of Higher rning (IHL)? (An Institution of Higher Learning is defined as a college, versity, or similar institution offering postsecondary level academic truction that leads to an associate or higher degree if the school is powered by the appropriate State education authority under State law to not an associate or higher degree.) Yes No (Skip to item 16)
	/hat was the major subject or field of study of the education or training gram in which you were enrolled?
	Full-time
	ring the <u>past 12 months,</u> how many academic credit hours did you mplete? (Check only one.)

15. How did you pay for this education or training? (Check all that apply.)
 □ VR&E VetSuccess Program (Chapter 31) □ Veterans Educational Assistance Program (Chapter 32) □ GI Bill (Chapter 30 or Chapter 33) □ Reserve Educational Assistance (Chapter 1607) □ Military Tuition Assistance □ Pell Grant □ Federal Loan (e.g., Stafford Loan) □ Grants or scholarships from the state or my institution □ Loan or line of credit from my institution □ Private student loan (non-federal bank loans) □ Loan from family or friends □ Personal funds (e.g., income from a job or savings) □ Other:
16. During the past 12 months, did you receive any of the following degrees?
(Check all that apply.) ☐ Did not receive a degree in the past 12 months
 □ Regular high school diploma □ GED □ Associate's degree (e.g., AA, AS) □ Bachelor's degree (e.g., BA, BS) □ Master's (e.g., MA, MS, MEng, MEd, MSW, MBA) □ Doctorate degree (e.g., PhD, EdD) □ Other Professional degree (e.g., MD, JD, PharmD):
17. During the past 12 months, did you receive a certificate, diploma, or license
from a business, technical, or vocational school? ☐ Yes ☐ No —→ (Skip to item 18)
18. List the certificates, diplomas, or licenses you received from a business, technical, or vocational school during the past 12 months (e.g., CDL licens HVAC Certification, etc.).

	re you enrolled in any other education or training programs during the <u>past</u>
	months? (Check all that apply.) Was not enrolled in any other education or training programs in the past 12
	<u>months</u>
	Non-College degree program (NCD)
	On-the-job training (OJT)
	Volunteer work experience
	Non-paid work experience (NPWE) Apprenticeship
	Special Employer Incentive (SEI)
	Compensated Work Therapy (CWT)
	Other:
40- 14/1	
	nat was the major subject or field of study of the education or training grams in which you were enrolled?
p. 05	grame in miner year nere emear
_	
_	
_	
Mac	dical
IVIC	aicai
	ing the past 12 months, how many times did you go to a VA Medical
	lity for each of the following reasons? (Fill in each one with a number. Put
	o if you did not go to a VA Medical facility for that reason.)
	Emergency visits: Routinely scheduled visits (checkups, screenings, etc.):
	reatment visits (PT, OT, counseling, etc.):
0	
	ing the past 12 months, how many times did you go to a non-VA medical
	ity for each of the following reasons? (Fill in each one with a number. Put if you did not go to a non-VA Medical facility for that reason.)
	Emergency visits
	Routinely scheduled visits (checkups, screenings, etc.)
	reatment visits (PT, OT, counseling, etc.)

Н	$\mathbf{\alpha}$	110	eh		Ы
	u	us	CII	w	ı

22.	During the <u>past 12 months</u> , what was your gross household income? (Your nousehold income is the combined before-tax income of people who share their income and live in the same home. Typically, this would be you and your spouse). \$
23.	Do you own your principal residence? (Your principal residence is the home where you live for at least half of the year.) Yes No
24.	How many dependents do you currently have? (Dependents include a spouse children under 18, children between the ages of 18 and 23 who are attending school, children who are permanently incapable of self-support because of disabilities arising before age 18, and dependent parents).
	Spouse: Children under 18: Children 18-23 years old attending school: Children who are permanently incapable of self- support because of disabilities arising before age 18: Dependent parents:
25.	Overall Experience Thinking about ALL aspects of your experiences and outcomes during the past 12 months with your most recently attended educational institution, please rate it overall, using 1 to 9 scale where 1 is <i>Unacceptable</i> , 5 is <i>Average</i> , and 9 is <i>Outstanding</i> . (Mark only one.) If you did not attend an educational institution during the past 12 months, check that box. □ Did not attend an educational institution in the past 12 months

Average

Outstanding

Unacceptable

 26. What is the primary reason you applied for the Post-9/11 GI Bill program? (Check only one.) □ Further my education for self-improvement □ Further my education so I could become employed or qualify for a higher paying job □ Further my education so I could keep my current job □ Further my education to start my own business □ Other (Specify): 									
 27. If you are working, does your current job generally match the training you received while you participated in the Post-9/11 GI Bill program? Yes No Somewhat Not currently working 									
28. Thinking about your experience with the Post-9/11 GI Bill program, please rate the following statement, using a 1 to 9 scale where 1 is Strongly Disagree, 5 is Neither Agree or Disagree, and 9 is Strongly Agree. (Mark only one.) The Post-9/11 GI Bill program assisted in my ability to develop the skills that I need to get a job.									
1	2	3	4	5	6	7	8	9	
Strongly Disagree				Neither Agree or Disagree				Strongly Agree	