

**Supporting Statement
for OMB Clearance
Request**

**Appendix O:
Instructional Staff
Online Survey**

**Innovative Strategies for
Increasing Self-Sufficiency
(ISIS) – Follow-up Data
Collection**

OMB No. 0970-0397

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and Evaluation
Administration for Children
and Families
**U.S. Department of Health and
Human Services**

Appendix O: Instructional Staff Online Survey



Advance email to instructional staff

Dear [name of instructor]:

As you may know, [name of local ISIS program] is participating in the Innovative Strategies for Increasing Self-Sufficiency (ISIS) study. This study is sponsored by the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services (HHS) and is being conducted by Abt Associates and its partners. ISIS will assess a range of promising post-secondary career pathways programs that promote the improvement of education, employment and self-sufficiency outcomes for low-skilled and economically disadvantaged adults. I am writing to ask your support and assistance in this important project.

A key feature of the information collection for this study will be an online survey of instructional staff. We are asking instructors like you to complete a brief survey to help us better understand the types of instruction provided as part of [name of local ISIS program]. The survey should take you approximately 30 minutes to complete. It is divided into three areas: instructor background and program involvement, course information and instructional approaches, and professional and program context. Your answers will be kept private. Information you provide will not be shared with program or instructional staff, including your supervisor. Your participation in this survey is completely voluntary, but it is important that we have as much input as possible to ensure an accurate evaluation of these programs.

Shortly you will receive an email from the ISIS study team providing you with a link to a web-based survey form. The email will be sent from [sender], and it will reference [subject line] in the "Subject" line. The email will also contain a toll free number and email address for you to send any questions or concerns about the survey. Thank you in advance for your assistance in completing this survey and providing important information to the study. With your help, we will have better information about the practices of participating ISIS programs across the nation.

Sincerely,

Abt Associates ISIS Project Director

The Paperwork Reduction Act Burden Statement: This collection of information is voluntary and will be used to supplement information gathered during on-site visits. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to [Contact Name]; [Contact Address]; Attn: OMB-PRA (0970-0397).



Innovative Strategies for Increasing Self-Sufficiency (ISIS) Instructional Staff Survey

As you may know, [name of local ISIS program] is participating in the Innovative Strategies for Increasing Self-Sufficiency (ISIS) study. This study is sponsored by the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services (HHS) and is being conducted by Abt Associates and its partners. The study will assess a range of promising post-secondary career pathways programs that promote the improvement of education, employment, and self-sufficiency for low-skilled and economically disadvantaged adults. I am writing to enlist your support and assistance in this important project..

As part of the ISIS study, we are asking staff involved in instructional services to participate to complete a brief survey to help us better understand the types of instruction provided as part of [name of local ISIS program] and the contexts in which this instruction is provided. The survey should take you approximately 30 minutes to complete and is divided into three areas: instructor background and program involvement, course information and instructional approaches, and professional and program context.

Your answers will be kept private. Information you provide will not be shared with other program or instructional staff, including your supervisor. Only the evaluation team will have access to the information you provide through this survey. Your name will not be listed in any published reports, and comments will not be attributed to you. Instead, your responses will be combined with information provided by others. Your responses to these questions are completely voluntary. We hope you will choose to complete all of the questions on the survey, but you may choose to skip any question you do not feel comfortable answering. Thank you in advance for your assistance in completing this survey and providing important information to the study.

The Paperwork Reduction Act Burden Statement: This collection of information is voluntary and will be used to supplement information gathered during on-site visits. Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to [Contact Name]; [Contact Address]; Attn: OMB-PRA (0970-0397).

Part A. Instructor Background and Program Involvement

Please complete the requested information below or select the category for each item that best describes your background.

1. What is your title in your current position with [name of local ISIS program]?

2. What is the name of your employer? _____

3a. How long have you been working in this position of [title from Q1.] or a similar one at [name of local ISIS program]?

_____ years _____ months

3b. On average, what percent of your time do you spend on [name of local ISIS program]? (Please enter a response from 1-100.)

_____ % of your time

4. Are you male or female?

Male

Female

5. What is your age? _____ years

6. Are you of Hispanic, Latino, or Spanish Origin?
(Please select only one answer.)

No, not of Hispanic, Latino, or Spanish origin

Yes, Mexican, Mexican American, Chicano

Yes, Puerto Rican

Yes, Cuban

Yes, another Hispanic, Latino, or Spanish origin

7. What is your race?

(You may select one or more answers.)

White

Black or African American

American Indian or Alaska Native

Native Hawaiian or other Pacific Islander

Asian

8. What is the highest level of education you have completed?
(Please select only one answer.)

- Some high school (no diploma/no GED)
- High school diploma or GED
- Some college (no degree)
- Associate’s Degree
- Bachelor’s Degree
- Master’s degree
- Doctoral degree or equivalent
- Other (*Please specify*): _____

**9. Have you earned a post-secondary degree in any of the following academic areas?
(Please select all that apply. If you have not earned a degree in an academic area, leave it blank.)**

Academic Area	Degree Earned			
	Associate’s Degree	Bachelor’s Degree	Master’s Degree	Doctoral Degree
9a. Adult Education				
9b. Business				
9c. Communication Arts				
9d. Education				
9e. Education/Elementary School				
9f. Education/Middle School				
9g. Education/Secondary School				
9h. Education/Reading				
9i. Special Education				
9j. Engineering				
9k. English				
9l. ESL				
9m. Guidance/Counseling				
9n. History				
9o. Language/Linguistics				
9p. Mathematics				
9q. Science (i.e., Biology, Botany, Chemistry, Physics, Health Sciences, Nursing)				
9r. Social Science (i.e., Anthropology, Economics, Political Science, Sociology, Psychology)				
9s. Social Work				
9t. Other academic area (<i>Please specify</i>): _____				

10. In addition to these post-secondary degrees, do you hold any educational certifications?

- Yes
 No

11. If yes, please specify the subject area in which you are certified and the type of certification you hold. You may include temporary or emergency certifications. Please do not include certifications that are in progress.

Subject Area	Type Certification
a.	
b.	
c.	
d.	
e.	
f.	

12. On average, how many hours per week do you spend per course preparing for the class that [name of local ISIS program] participants attend?

- Less than 1 hour
 1 to less than 3 hours
 3 to less than 5 hours
 5-10 hours
 more than 10 hours

13. How much total work experience (including your current and prior positions) do you have in teaching courses similar to those you instruct as part of [name of local ISIS program]?

(Please select only one answer.)

- More than 5 years
 3 to 5 years
 1 to less than 3 years
 Less than 1 year

14. In your position of [insert title from Q1] at [program or college name], are you a:

(Please select only one answer.)

- Full-time, tenured instructor
 Full-time, non-tenured instructor
 Part-time instructor
 Adjunct or Contract instructor

15. If part-time or adjunct/contract, are you paid:

- Per course
 Per instructional hour
 Other (please specify): _____

16. Are you compensated for the time you spend preparing for class?:

- No, I am not paid for my time spent preparing for class
 Yes, I am paid for my time spent preparing for class

17a. Do you receive any fringe benefits (e.g., paid time off, health insurance) as part of your employment with [name of employer/ISIS program]?

- Yes
 No

17b. If yes, please select all that apply:

- Paid vacation
 Health insurance
 Life insurance
 Sick leave
 Tuition reimbursement
 Free or discounted tuition
 Other (Please specify): _____

18a. Are professional development opportunities (e.g., workshops or training) available to you as part of your job as an instructor?

- Yes
 No

18b. If yes, please select all that apply.

- Workshops/Trainings
 Professional conferences
 Professional association memberships or journal subscriptions
 Online learning resources
 Mentoring/Coaching
 Learning communities or listservs
 Other (Please specify): _____

19. Are the majority of the professional development opportunities available to you: (Please select the one answer that is most accurate.)

- Paid by your employer and available during your normal work hours
 Paid by your employer, but on personal time
 Available at a cost to you, but provided time during work hours to attend/use
 Available at a cost to you, on personal time

20. How often do you attend/participate in professional development activities?

- More than 5 times per year
 3-5 times per year
 1-2 times per year
 Never

Part B. Course Information and Instructional Approaches

Please complete the requested information below or select the category for each item that best describes your involvement or approach, with respect to [name of local ISIS program].

21. How many courses do you teach in [name of local ISIS program]?

_____ # courses

22. What are the names of the courses you teach in [name of local ISIS program]?

Course Name
a.
b.
c.
d.
e.
f.

23. How many sessions of each course do you teach per week?

[Auto-populate with course names from item 22]

Course Name	Number of Sessions
a.	
b.	
c.	
d.	
e.	
f.	

24. What is the number of students enrolled for each of the sessions?

[Auto-populate with course names from item 22]

Course Name	Number Enrolled
a.	
b.	
c.	
d.	
e.	
f.	

25. Which of the following types of courses do you teach as part of [name of local ISIS program]?

(You may select more than one answer.)

- Adult Basic Education (ABE)
- Developmental Education
- English as a Second Language (ESL)
- Vocational or Occupational Training (standalone)
- Vocational or Occupational Training Combined with Basic Skills or ESL
- College/career readiness
- Academic subject area (e.g., chemistry, biology, algebra, etc.)
- Other (Please specify): _____

26a. If you teach vocational/occupational or academic courses, do you include or integrate basic skills instruction?

- Yes
- No

[If no, skip to 27a]

26b. Which basic skills do you include?

(Please select all that apply)

- Math
- Reading
- Writing

26c. Using a scale of 1 to 7, where 1 = No Integration and 7 = High Level of Integration (every day), to what extent do you integrate basic skills instruction with vocational/occupational training in the courses you teach as part of [name of local ISIS program]?

Scale						
1 No Integration	2	3	4	5	6	7 High Level of Integration (every day)

26d. Using a scale of 1 to 7, where 1 = Never and 7 = All the Time, to what extent do you use the following methods to include basic skills instruction as part of the vocational/occupation training you provide?

	Scale						
	1 Never	2	3	4	5	6	7 All the Time
i. I teach separate parts or sections of the vocational/occupational class that focus on basic skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. I teach separate basic skills classes to students in my vocational/occupational classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Scale						
	1 Never	2	3	4	5	6	7 All the Time
iii. I integrate basic skills directly into training content	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iv. I provide basic skills-focused tutoring outside of class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
v. I collaborate with another instructor who provides basic skills instruction as part of my course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
vi. Other (Please specify): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

26e. Are courses co- taught (i.e., using instructor pairs or “team teaching” with one focused on basic skills and the other on career and technical training)?

- Yes
- No

[If no, skip to 27a]

26f. Using a scale of 1 to 7, where 1 = Never and 7 = All the Time, how frequently are both the basic skills instructors and technical instructors/occupational teaching together in the class (during the same session)?

Scale						
1 Never	2	3	4	5	6	7 All the time

27a. If you teach adult basic education, ESL or development education, do you include or integrate vocational/occupational content into your course?

- Yes
- No

[If no, skip to 28a]

27b. Using a scale of 1 to 7, where 1 = No Integration and 7 = High Level of Integration (done every day), to what extent do you integrate vocational/occupational or academic content into basic skills training in the courses you teach as part of [name of local ISIS program]?

Scale						
1 No Integration	2	3	4	5	6	7 High Level of Integration (every day)

27c. Using a scale of 1 to 7, where 1 = Never and 7 = All the Time, to what extent do you use the following methods to include vocational/occupation content in the basic skills training you provide?

	Scale						
	1 Never	2	3	4	5	6	7 All the Time
i. I use examples from an occupational or academic field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii. I have guest speakers from the field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
iii. Other (<i>Please specify</i>): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

28a. On average, how frequently are the classes you teach as part of [name of local ISIS program] held during the day?

- More than once per week
- Weekly
- 2-3 times per month
- Once a month
- About once a quarter
- Infrequently, maybe once per year
- Never

28b. On average, how frequently are the classes you teach as part of [name of local ISIS program] held in the evening?

- More than once per week
- Weekly
- 2-3 times per month
- Once a month
- About once a quarter
- Infrequently, maybe once per year
- Never

28c. On average, how frequently are the classes you teach as part of [name of local ISIS program] held on the weekend?

- More than once per week
- Weekly
- 2-3 times per month
- Once a month
- About once a quarter
- Infrequently, maybe once per year
- Never

29. Considering all of the courses you teach in a typical week as part of [name of local ISIS program], what percent of your classes are “accelerated” or “compressed” in time to allow participants to complete the course in a shorter time period?

Scale						
1 None	2	3	4	5	6	7 All

30. Using a scale of 1 to 5, where 1 = Never and 5 = All the Time, how frequently do you use each of the following learning environments while teaching [course name from item 22] as part of [name of local ISIS program]?

[Program with a loop function to separately query each course listed in item 22.]

	Scale				
	1 Never	2 Rarely	3 Sometimes	4 Often	5 All the Time
a. Individual Instruction (e.g., one-on-one tutoring or individuals working by themselves with materials)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Small group instruction within a classroom (for fewer than 8 learners <i>within a larger classroom</i>)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Small group instruction (for fewer than 8 learners at one time)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Classroom style instruction (8 or more learners at one time in a whole group)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Computer-assisted instruction within a classroom environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Multi-media learning labs or centers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Real or simulated workplace settings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Other (<i>Please specify</i>): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

31. Using a scale of 1 to 5, where 1 = Never and 5 = All the Time, how frequently do you use each of the following instructional approaches while teaching [course name from item 22] as part of [name of local ISIS program]?

[Note: anticipate providing descriptions of each approach in web format]

[Program with a loop function to separately query each course listed in item 22.]

	Scale				
	1 Never	2 Rarely	3 Sometimes	4 Often	5 All the Time
a. Didactic (lecture-based)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Seminar style with interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Group work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Experiential learning outside of the classroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Experiential learning inside of the classroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Project-based learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Computer-based/online learning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Exercises/assignments that are self-paced	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

32. Using a scale of 1 to 5, where 1 = Never and 5 = All the Time, how frequently do you use each of the following instructional supports as part of [name of local ISIS program]?

[Note: anticipate providing descriptions of each approach in web format]

[Program with a loop function to separately query each course listed in item 22.]

	Scale				
	1 Never	2 Rarely	3 Sometimes	4 Often	5 All the Time
a. Tutoring	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Ad hoc sessions on specific topics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Study groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Study skills classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Time management classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

33. Using a scale of 1 to 7, where 1 = None of My Time and 7 = Most of My Time, how much time do you spend on each of the following activities?

Domain		Scale						
		1 None of My Time	2	3	4	5	6	7 Most of My Time
Academic Advising	a. Advising on admissions requirements or pre-requisites	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Advising	b. Obtaining and reviewing academic assessment results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Advising	c. Monitoring of participants' day-to-day academic progress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-Academic Advising	d. Advising on students' personal issues and needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-Academic Advising	e. Advising or assistance with financial aid or scholarships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-Academic Advising	f. Referring or connecting to support services (childcare, TANF, SNAP, transportation, housing, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-Academic Advising	g. Assistance with developing skills needed for success at school, work, and other areas of life (either in a group setting or individually)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Career Advising	h. Career goal development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Career Advising	i. Advising on career choices	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Domain		Scale						
		1 None of My Time	2	3	4	5	6	7 Most of My Time
Employment Assistance	j. Assistance with internships/externships/clinical placements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment Assistance	k. Resume preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment Assistance	l. Identifying job openings for students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment Assistance	m. Referring to job search/placement services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment Assistance	n. Mock interviewing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	o. Other (Please specify): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

34a. Do you find that you need to make changes to the course(s) you teach as part of [name of local ISIS program]?

- Yes
 No

34b. If yes, when do you typically implement the changes?
(Please select the one answer that is most accurate.)

- While the course is being taught (i.e., during the semester)
 After the course is completed (i.e., in advance of the next term or semester)
 Other (Please specify): _____

[For 35a, 35b, 35c: Program with a loop function to separately query each course listed in item 22]

35a. Does completion of your course, [name of course from Q22], result in the achievement of a specific certificate or credential?

- Yes
 No

35b. If yes, please specify the certificate or credential awarded for [name of course from Q22]:

35c. What is required of students for successful completion of your course, [name of course from Q22]?

(You may select more than one answer.)

- Attendance standard
 Completion of homework
 Completion of special projects
 Successful completion of coursework
 Specific Grade

36. Using a scale of 1 to 7, where 1 = Never and 7 = All the Time, if a student is having academic problems how frequently do you use the following strategies?

	Scale						
	1 Never	2	3	4	5	6	7 All the Time
a. Spend more time in class with the student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Spend time outside of class with the student	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Refer the student to a tutor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Refer the student to an academic advisor/case manager	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

37. If a student is having personal problems, please indicate on scale of 1 to 7 which strategies you use:

	Scale						
	1 Never	2	3	4	5	6	7 All the Time
a. Work with the student to address the personal problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Refer the student to another staff person in this organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Refer the student to an outside organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

38. Using a scale of 1 to 5, where 1 = Strongly Disagree and 5 = Strongly Agree, please respond to the following statements:

	Scale				
	1 Strongly Disagree	2	3	4	5 Strongly Agree

a. Staff in this program make an effort to get to know the students well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Staff in this program make an effort to learn about students' personal and family situations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Staff in this program closely monitor the academic progress of students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Staff in this program make an effort to learn about students' career and employment goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

39. Using a scale of 1 to 5, where 1 = Strongly Disagree and 5 = Strongly Agree, please rate how much you agree or disagree with the following statement:

If people in my job do good work, we can really improve the lives of students.

Scale				
1	2	3	4	5
Strongly Disagree				Strongly Agree

40. Using a scale of 1 to 5, where 1 = Strongly Disagree and 5 = Strongly Agree, please rate how much you agree or disagree with the following statement:

The goal of my class is for students to get a job when they are done.

Scale				
1	2	3	4	5
Strongly Disagree				Strongly Agree

41. In your opinion, which three of the following personal problems or challenges stand in the way most frequently of students' successfully completing the program?
(Please select up to three answers.)

- Motivational issues
- Mental health issues
- Substance abuse issues
- Physical health issues
- Domestic violence issues
- Other domestic issues (e.g., marital or relationship issues)
- Child care or dependent care issues
- Transportation problems
- Child behavioral issues
- Homelessness or housing problems
- Criminal history
- Legal problems
- Financial issues
- Other (Please specify): _____

42. In your opinion, does your program offer sufficient support services to students with the following issues?

	Yes	No	Don't Know
a. Motivational issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mental health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Substance abuse issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Physical health issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Domestic violence issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Other domestic issues (e.g., marital or relationship issues)			
g. Child care or dependent care issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Transportation problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Child behavioral issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Homelessness or housing problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Criminal history	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Legal problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Financial issues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Other (<i>Please specify</i>):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Part C. Professional and Program Context

Using a scale of 1 to 5, where 1 = Strongly Disagree and 5 = Strongly Agree, please rate how strongly do you agree or disagree with each of the following statements about your experiences as an instructor at [name of local ISIS program]?

• Domain	Item	Scale				
		1 Strongly Disagree	2	3	4	5 Strongly Agree
• Staffing	43. Frequent staff turnover is a problem for your program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Staffing	44. Staff in your program are able to spend the time needed with students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Staffing	45. Staff in your program have the skills they need to do their jobs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Staffing	46. Your program has enough staff to meet current student need.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Staffing	47. Staff in your program are well-trained.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Staffing	48. A larger student services support staff (e.g., advisors, case managers) is needed to help meet needs at your program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Training	49. Instructor training and professional development are priorities in your program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Training	50. You learned new skills or techniques at a professional training in the past year.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Training	51. Your program holds regular in-service training for staff.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Training	52. The budget in your program allows staff to attend professional training.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

• Domain	Item	Scale				
		1 Strongly Disagree	2	3	4	5 Strongly Agree
• Supervision	53. Your program is managed well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Supervision	54. Your program has supervisors who are capable and qualified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Supervision	55. When needed, program supervisors devote much time and attention to supervision.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Supervision	56. Management decisions for your program are well planned.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Supervision	57. You have confidence in how decisions at your program are made.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Supervision	58. You meet frequently with supervisors about student needs and progress.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Supervision	59. Staff concerns are ignored by management when making decisions about your program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Growth	60. Keeping your knowledge and skills up-to-date is a priority for you.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Growth	61. You do a good job of regularly updating and improving your skills.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Growth	62. You regularly read professional articles or books in your field of expertise.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Growth	63. You review new techniques or updates in the field regularly.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Satisfaction	64. You are satisfied with your present job.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Satisfaction	65. You feel appreciated for the job you do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Satisfaction	66. You give high value to the work you do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

• Domain	Item	Scale				
		1 Strongly Disagree	2	3	4	5 Strongly Agree
• Satisfaction	67. You are proud to tell others where you work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Satisfaction	68. You like the people you work with.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Satisfaction	69. You would like to find a job somewhere else.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Mission	70. Some staff members seem confused about the main goals for your program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Mission	71. Your duties are clearly related to the goals for your program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Mission	72. Your program operates with clear goals and objectives.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Mission	73. Management for your program has a clear plan for its future.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Stress	74. The heavy staff workload reduces the effectiveness of your program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Stress	75. You are under too many pressures to do your job effectively.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Stress	76. Staff members at your program often show signs of high stress and strain.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
• Stress	77. Staff frustration is common where you work.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Thank you for your time in filling out this questionnaire.