

INSTRUMENT I.1

SNAP EMPLOYMENT AND TRAINING (E&T) REGISTRANT AND PARTICIPANT (R/P)

SURVEY

OMB # xxxx-xxxx  
Expiration: xx/xx/20xx  
Reference No.: 40272.401

**MATHEMATICA**  
Policy Research

# SNAP Employment and Training (E&T) Registrant and Participant

Final

*September 11, 2014*

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection will be entered after clearance. The time required to complete this information collection is estimated to average 20 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

**Thank you for helping us with the SNAP Employment and Training (E&T) Study. We need your help to better understand the labor skills and training people need to get jobs in the local labor market. The results of the study will help programs better meet the needs of people who are looking for jobs.**

**This survey asks questions about your work history, skills and training needs, and challenges you faced in getting the training you wanted to get and keep a job in your area. The survey takes about 20 minutes to complete.**

**The information you provide will be used only for statistical purposes. In accordance with the Privacy Act of 1974, your responses will not be disclosed in identifiable form without your consent. Your participation in this survey is completely voluntary. You may skip any questions that make you uncomfortable or that you would prefer not to answer.**

**At the end of the survey I will ask for your mailing address so we can send you a gift card in appreciation of your time. The gift card will not affect your benefits in any way.**

**Is it okay to begin now?**

## Section A: Education and Training

The first questions are about your education and any training you've received.

### 1. What is the highest grade or degree you have completed?

*Select one only*

- Less than 8th grade..... 1
- 8th to 12th grade, no diploma..... 2
- High school diploma or GED..... 3
- Some college but no degree..... 4
- Associate degree -- Occupational/vocational program..... 5
- Associate degree -- Academic program..... 6
- Bachelors degree (For example: BA, AB, BS)..... 7
- Masters degree or higher..... 8
- Other..... 99

Specify

### 1a. Do you have certifications in any of the following areas?

*Select all that apply*

- Commercial drivers' license (CDL),..... 1
- Nursing,..... 2
- Dental,..... 3
- Secretarial,..... 4
- Cosmetology,..... 5
- Construction,..... 6
- Mechanical, or..... 7
- Another certification?..... 99

Specify

- No..... 0

## Section B: Employment History

For the next questions, please tell us about any paid jobs. They could be part- or full-time or self-employment in your own business. Don't include any unpaid work or volunteering.

2. Have you ever worked at a job for pay?

- Yes..... 1
- No..... 0 GO TO Q3a.....

3. Are you currently working at a job for pay?

- Yes..... 1 GO TO Q4
- No..... 0

IF 2 = 0 FILL WITH "HAVE NEVER WORKED"  
IF 3 = 0 FILL WITH "ARE NOT CURRENTLY WORKING"

3a. What is the main reason you (have never worked/are not currently working)?

Select only one.

- Could not find work or lack of jobs available in the area..... 1
- Lack necessary schooling, training, skills or experience..... 2
- Could not get along with supervisor or co-workers..... 3
- Physical or mental health problems..... 4
- Alcohol or substance abuse..... 5
- Family responsibilities; caring for children, spouse, or parents..... 6
- Attending school..... 7
- Transportation issues or problems (no car or no public transportation available, transportation costs too much)..... 8
- Chose not to work..... 9
- Other..... 99

Specify

IF Q2 = 1

4. How many jobs have you had in the last 24 months? This includes regular and temporary employment and self-employment. Please do not include any unpaid jobs.

Select one only

- None..... 0
- 1..... 1
- 2..... 2
- 3..... 3
- 4..... 4
- 5..... 5
- 6 or more..... 6

Please think about your two most recent jobs, including your current job or jobs.

5. For each of these jobs, please enter the name of the company.

Job 1

Job 2

The next questions are about your (job/jobs) at (this company/these companies).

6a. Are you currently working at [FILL JOB 1]?

- Yes..... 1
- No..... 0

Interviewer: Fill (is/was) and (do/did) in this section based on the response to 6a.

6b. What kind of work (do/did) you do, or what (is/was) your job title? For example: plumber, machinist, food service worker, home health aide, or day laborer.

WORK PERFORMED/JOB TITLE

6c. About when did you start working at [FILL JOB 1]?

START DATE

MONTH / YEAR

- Don't remember..... d

IF 6a = 0

**6d. When did your job at [INSERT JOB 1] job end?**

END DATE

MONTH / YEAR

- Still work there / job hasn't ended..... 1
- Don't remember..... d

IF 6c = d or 6d = d

**6e. About how long did you work at that job?**

*Select one only*

- Less than 3 months..... 1
- Between 3 and 6 months..... 2
- Between 7 and 12 months..... 3
- More than a year..... 4

**6f. What type of job (is/was) this? Was it...**

*Select one only*

- Regular,**..... 1
- Temporary, such as seasonal or contract, or**..... 2
- You don't remember?**..... d

**6g. How many hours (do/did) you usually work at [INSERT JOB 1] during a typical week?**

(0-99)

TOTAL HOURS WORKED IN A TYPICAL WEEK

- Hours (vary/varied) each week..... n
- Don't remember..... d

IF 6g = N OR D

**6h. About how many hours (do/did) you work at [INSERT JOB 1] in a typical week?**

*Select one only*

- 1 - 19 hours..... 1
- 20 - 29 hours..... 2
- 30 - 34 hours..... 3
- 35 - 40 hours..... 4
- Over 40 hours..... 5
- Don't remember..... d

IF 6g < 30 OR 6h = 1 or 2

**6i. What is your main reason for working less than 30 hours in a typical week?**

*Select one only*

- Employer reduced hours..... 1
- Could only find part-time work..... 2
- Full-time is less than 30 hours..... 3
- That is what was available..... 4
- Child care problems (including being pregnant)..... 5
- Other family/personal obligations..... 6
- Health/medical limitations..... 7
- School/training..... 8
- Didn't want/need more hours..... 9
- Other..... 99

Specify

**6j. How much (are/were) you paid at [INSERT JOB 1]?**

\$  RATE OF PAY

*Select one only*

- Hourly..... 1
- Weekly..... 2
- Monthly..... 3
- Yearly..... 4
- Don't remember..... d

IF 6a = 0

**6k. What was your reason for leaving [INSERT JOB 1]?**

*Select one only*

- Layoff, company downsized, or plant closed..... 1
- Fired..... 2
- Quit..... 3
- Became disabled..... 4
- Moved away from that area..... 5
- Job was temporary and ended..... 6
- Other..... 99

Specify



IF 6k = 2 or 3

**6l. Why did you (quit/get fired from) your last job? Was it because you...**

*Select all that apply*

- Didn't like supervisor or co-workers,..... 1
- Didn't like job duties,..... 2
- Didn't like job earnings,..... 3
- Had difficulty getting to work on time (late or missed days),..... 4
- Didn't have or like opportunities for advancement,..... 5
- Didn't like location,..... 6
- Transportation issues or problems (no car or public transportation available, transportation cost too much),..... 7
- Decided to go to school,..... 8
- Had child care responsibilities (including being pregnant),..... 9
- Had other family or personal reasons,..... 10
- Had physical or mental health issues or problems, or..... 11
- Something else?..... 99

Specify

**7a – I: REPEAT SERIES OF QUESTIONS IN Q6a - I, IF TWO JOBS GIVEN IN ITEM 5.**

**The next questions are about your job at (FILL JOB 2).**

**7a. Are you currently working at [FILL JOB 2]?**

- Yes..... 1
- No..... 0

*Interviewer: Fill (is/was) and (do/did) in this section based on the response to 7a.*

**7b. What kind of work (do/did) you do, or what (is/was) your job title? For example: plumber, machinist, food service worker, home health aide, or day laborer.**

WORK PERFORMED/JOB TITLE

**7c. About when did you start working at [FILL JOB 2]?**

START DATE

MONTH / YEAR

- Don't remember..... d

IF 7a = 0

**7d. When did your job at [INSERT JOB 2] job end?**

END DATE

 

MONTH / YEAR

- Still work there / job hasn't ended..... 1
- Don't remember..... d

IF 7c = d or 7d = d

**7e. About how long did you work at that job?**

*Select one only*

- Less than 3 months..... 1
- Between 3 and 6 months..... 2
- Between 7 and 12 months..... 3
- More than a year..... 4

**7f. What type of job (is/was) this? Was it...**

*Select one only*

- Regular,..... 1
- Temporary, such as seasonal or contract, or..... 2
- Don't remember..... d

**7g. How many hours (do/did) you usually work at [INSERT JOB 2] during a typical week?**

TOTAL HOURS WORKED IN A TYPICAL WEEK

(0-99)

- Hours (vary/varied) each week..... n
- Don't remember..... d

IF 7g = N OR D

**7h. About how many hours (do/did) you work at [INSERT JOB 2] in a typical week?**

*Select one only*

- 1 - 19 hours..... 1
- 20 -29 hours..... 2
- 30 - 34 hours..... 3
- 35 - 40 hours..... 4
- Over 40 hours..... 5
- Don't remember..... d

IF 7g < 30 OR 7h = 1 or 2

**7i. What is your main reason for working less than 30 hours in a typical week?**

*Select one only*

- Employer reduced hours..... 1
- Could only find part-time work..... 2
- Full-time is less than 30 hours..... 3
- That is what was available..... 4
- Child care problems (including being pregnant)..... 5
- Other family/personal obligations..... 6
- Health/medical limitations..... 7
- School/training..... 8
- Didn't want/need more hours..... 9
- Other..... 99

Specify

**7j. How much (are/were) you paid at [INSERT JOB 2]?**

\$  RATE OF PAY

*Select one only*

- Hourly..... 1
- Weekly..... 2
- Monthly..... 3
- Yearly..... 4
- Don't remember..... d

IF 7a = 0

**7k. What was your reason for leaving [INSERT JOB 2]?**

*Select one only*

- Layoff, company downsized, or plant closed..... 1
- Fired..... 2
- Quit..... 3
- Became disabled..... 4
- Moved away from that area..... 5
- Job was temporary and ended..... 6
- Other..... 99

Specify

IF 7k = 2 or 3

**7I. Why did you (quit/get fired from) your last job? Was it because you...**

*Select all that apply*

- Didn't like supervisor or co-workers,..... 1
- Didn't like job duties,..... 2
- Didn't like job earnings,..... 3
- Had difficulty getting to work on time (late or missed days),..... 4
- Didn't have or like opportunities for advancement,..... 5
- Didn't like location,..... 6
- Transportation issues or problems (no car or public transportation available, transportation cost too much),..... 7
- Decided to go to school,..... 8
- Had child care responsibilities (including being pregnant),..... 9
- Had other family or personal reasons,..... 10
- Had physical or mental health issues or problems, or..... 11
- Something else? (SPECIFY)..... 99

Specify

**Section C: Searching for Work and Barriers**

ASK IF: If not currently employed or working less than 30 hours. (3=0 or (3=1 and 6g<30) or (3=1 and 6h=1 or 2) or (3=1 and 7g<30) or (3=1 and 7h=1 or 2)). Otherwise go to Q16.

**The next questions are about searching or looking for a job, even if you haven't been looking a lot lately.**

**9. Have you looked for a job in the last 12 months?**

- Yes..... 1
- No..... 0 GO TO Q14

**10. Please indicate what you have been doing to find a job, or to find a better one, in the last 12 months. Have you...**

*Select all that apply*

- Contacted employer directly and/or have interviewed.....1
- Contacted employment agency or school employment center.....2
- Sent out resumes/filled out applications.....3
- Looked at ads in newspapers or job listings online (e.g. Monster or Craigslist).....4
- Attended job training programs, or.....5
- Something else?.....99

Specify

**11. What types of jobs have you looked or applied for in the past 12 months?**

*Select all that apply*

- Building and grounds cleaning and maintenance.....1
  - Business and financial operations.....2
  - Community and social service.....3
  - Construction and extraction.....4
  - Education, training, and library.....5
  - Farming, fishing, and forestry.....6
  - Food preparation and serving related.....7
  - Healthcare.....8
  - Installation, maintenance, and repair.....9
  - Management.....10
  - Office and administrative support.....11
  - Personal care and service.....12
  - Sales and related.....13
  - Transportation and material moving.....14
  - Something else.....99
- Specify
- Don't know.....d

**12. Have you gotten any job offers in the past 12 months, whether you took the job or not?**

- Yes.....1
- No.....0 GO TO Q14

**13. In what type(s) of business(es) were you offered (a job/jobs)?**

*Select all that apply*

- Building and grounds cleaning and maintenance.....1
- Business and financial operations.....2
- Community and social service.....3
- Construction and extraction.....4
- Education, training, and library.....5
- Farming, fishing, and forestry.....6
- Food preparation and serving related.....7
- Healthcare.....8
- Installation, maintenance, and repair.....9
- Management.....10
- Office and administrative support.....11
- Personal care and service.....12
- Sales and related.....13
- Transportation and material moving.....14
- Something else.....99

Specify

- Don't know..... d

**14. What problems have you had getting or keeping a job?**

*Select all that apply*

- Physical or mental health issues.....1
- Need to care for family members with physical/mental health issues.....2
- Finding quality or affordable child or dependent care.....3
- Transportation issues or problems (no car or public transportation available, or transportation costs too much).....4
- Speaking, reading, and/or writing English.....5
- Immigration or citizenship restrictions.....6
- Certification/license not valid where you live now or expired.....7
- Don't have enough education.....8
- Can't get along with bosses/coworkers.....9
- Substance abuse issues.....10
- Criminal record.....11
- Housing problems (homelessness, unstable housing, no affordable housing).....12
- Other.....99

Specify

- None..... 0

15. When you were looking for a job, did you feel that you faced any discrimination because of your ...

SELECT ONE PER ROW

	YES	NO
a. Gender/sex?	1 <input type="radio"/>	0 <input type="radio"/>
b. Race?	1 <input type="radio"/>	0 <input type="radio"/>
c. Ethnicity?	1 <input type="radio"/>	0 <input type="radio"/>
d. Age?	1 <input type="radio"/>	0 <input type="radio"/>
e. National origin?	1 <input type="radio"/>	0 <input type="radio"/>
f. Religion?	1 <input type="radio"/>	0 <input type="radio"/>
g. Sexual orientation?	1 <input type="radio"/>	0 <input type="radio"/>
h. Something else?	1 <input type="radio"/>	0 <input type="radio"/>



**Section D: SNAP and the SNAP Employment & Training Program**

**16. Our records show that you are currently receiving SNAP benefits. Did the state agency tell you to participate in SNAP E&T to keep your benefits (in a letter or some other way), did you volunteer to participate, or are you not participating in an employment and training program?**

*Select one only*

- Participating because it is required to keep benefits.....1 GO TO  
16b.....
- Volunteered to participate.....2 GO TO  
16b
- Got told I had to participate, but I didn't do it.....3 GO TO  
16a
- Didn't want to volunteer.....4 GO TO  
16a
- Never got told I had to participate.....5 GO TO  
34
- Participated in the past but not in the last 12 months.....6 GO TO  
34

**16a. Why didn't you participate in the program?**

*Select all that apply*

- Location not on public transportation routes.....1 GO TO  
34
- Inconvenient or unsafe location.....2 GO TO  
34
- Transportation issues or problems (no car or public transportation,  
transportation costs too much) .....3 GO TO  
34.....
- Too expensive to get there.....4 GO TO  
34.....
- Need to care for child or others.....5 GO TO  
34.....
- Program at a bad time.....6 GO TO  
34.....
- Didn't sound useful.....7 GO TO  
34.....
- Their program wasn't about something I wanted to learn.....8 GO TO  
34.....
- Was in a program before and didn't like it.....9 GO TO  
34.....
- Other.....99 GO TO  
34

Specify

**16b. What were your main reasons for participating in SNAP E&T?**

*Select all that apply*

- Keep SNAP benefits,..... 1
- Get childcare,..... 2
- Get other benefits,..... 3
- Improve my English,..... 4
- Gain job search skills,..... 5
- Learn about self employment,..... 6
- Earn a certification/credential/license,..... 7
- Learn a new skill/industry,..... 8
- Get promoted,..... 9
- Get a raise,..... 10
- Get a job, ..... 11
- Find a better job, or..... 12
- Something else?..... 99

Specify

**17. Have you either begun participating in an employment and training program through SNAP or recently completed a SNAP E&T program?**

- Yes..... 1
- No..... 0 GO TO 34

**18. Are you still attending the program, or have you completed it?**

*Select one only*

- Still attending the program..... 1 GO TO 19
- Completed the program..... 2
- Left before the end of the program..... 3

*Interviewer: Use the response to Q18 to fill (do/did) in the upcoming questions.*

**18a. When did you complete the program or stop attending the program?**

MONTH YEAR

- Don't remember..... d

IF 17 = 1

19. What is the name of this SNAP employment and training program?

SNAP E&T PROGRAM NAME

20. When did you enroll in [INSERT PROGRAM NAME]?

START

MONTH YEAR

21. How many days a week (do/did) you participate in the program?

DAYS PER WEEK

22. How many hours a day (do/did) you participate in the program?

HOURS PER DAY

23. How many weeks (will/did) the program last?

NUMBER OF WEEKS

Program doesn't end/ Ongoing while getting SNAP.....1

24. Where (do/did) you go to participate in that program?

Select all that apply

- American Job Center (AJC)/One-Stop/Workforce Center.....1
- Welfare office.....2
- Community center.....3
- Church or other religious building.....4
- High school.....5
- Community college.....6
- College/University.....7
- Job site.....8
- Online.....9
- Vocational institute.....10
- State unemployment office.....11
- Other.....99

Specify

**25. What difficulties have you had, if any, in accessing this program?**

*Select all that apply*

- Location not on public transportation routes..... 1
- Inconvenient or unsafe location..... 2
- Transportation issues or problems (no car or public transportation, transportation costs too much) ..... 3
- Too expensive to get there..... 4
- Need to care for child or others..... 5
- Program at a bad time..... 6
- None..... 0
- Other..... 99

Specify

**26. What types of activities (did you participate/are you participating) in through this SNAP E&T program?**

*Select all that apply*

- GED preparation/testing..... 1
- Post-secondary education,..... 2
- Skills assessment,..... 3
- ESL/English classes,..... 4
- Job search training/assistance,..... 5
- Job specific training,..... 6
- On the job training (OJT),..... 7
- Vocational skills training,..... 8
- Certification or licensing preparation or testing,..... 9
- Credential transfer assistance,..... 10
- Internships,..... 11
- Apprenticeship,..... 12
- Workfare or Community Service, or ..... 13
- Something else?..... 99

Specify

**27. What support services did you receive through the program?**

*Select all that apply*

- Onsite childcare,..... 1
- Childcare vouchers or funds,..... 2
- Transportation assistance,..... 3
- Tutoring,..... 4
- Assistance applying for government benefits,..... 5
- Referrals to other organizations,..... 6
- Legal aid,..... 7
- Housing assistance,..... 8
- Domestic violence assistance,..... 9
- Counseling/therapy,..... 10
- Clothing/work equipment/tools,..... 11
- Medical assistance, or..... 12
- Something else?..... 99
- Specify
- None..... 0 GO TO 28

**27a. How important were these support services for you to be able to participate in the program?**

*Select one only*

- Very important,..... 1
- Not so important, or..... 2
- Didn't matter at all?..... 0

**28. Did you find a job after (completing/you stopped attending) the program?**

*Select one only*

- Yes, found a job through the program,..... 1
- Yes, found a job on my own without help from the program,..... 2
- No, didn't find a job after the program, or..... 3
- Stopped attending the program because I found a job?..... 4
- Don't remember..... d

**29. Why did you stop attending the SNAP E&T program?**

*Select all that apply*

- Wasn't learning anything..... 1
- Didn't like the program..... 2
- Program doesn't match needs..... 3
- Didn't think the program would help to find a job..... 4
- Got a job/reemployed..... 5
- Too far from home..... 6
- Transportation issues or problems (no car or public transportation,  
transportation costs too much)..... 7
- Started (other) school/training..... 8
- Child care problems, got pregnant, or had a baby..... 9
- Own physical or mental health problems..... 10
- Caring for family members physical or mental health problems..... 11
- .....
- SNAP case closed, no longer required ..... 12
- Received a good cause exemption..... 13
- Moved..... 14
- Arrested/incarcerated..... 15
- Other..... 99

Specify

IF 18 = 2 or 3

**30. Did you receive a certificate or degree/diploma from the program?**

- Yes..... 1
- No..... 0 GO TO Q31
- Don't know..... d GO TO Q31

**30a. What kind of certificate or degree/diploma did you receive?**

*Select one only*

- Participation/attendance..... 1
- GED..... 2
- High school diploma..... 3
- Associate's degree..... 4
- English proficiency certification/ TOEFL..... 5
- Certificate or license (e.g. - food handler, forklift operator, hairdressing, plumbing, CDL)..... 6
- Other..... 99

Specify

IF 18 = 2

**31. After you finished the program, what other activities did you participate in with this organization?**

*Select all that apply*

- Follow-up or refresher courses ..... 1
- Supplemental training after getting a job..... 2
- Reemployment orientation..... 3
- Other..... 99

Specify

- No other activities after finishing the program..... 4

**32. How satisfied (are/were) you with this program overall?**

*Select one only*

- Very satisfied,..... 1
- Somewhat satisfied, or..... 2
- Not satisfied?..... 3

**33. What do you think would make the program better for your needs?**

*Select all that apply*

- A more convenient location..... 1
- More training programs for specific jobs..... 2
- More convenient times..... 3
- Provide childcare..... 4
- Develop a work plan..... 5
- Provide transportation service to training or work..... 6
- Provide online training..... 7
- Provide more post training services/activities..... 8
- Something else..... 9
- Specify
- Nothing..... 0

The next few questions are about previous SNAP E&T programs.

**34. IF Q17 = 0: Have you been in any SNAP employment and training programs in the past 24 months?**

IF Q18 = 2 or 3: Besides the recently completed program, have you been in other SNAP employment and training programs in the past 24 months?

IF 18 = 1: Besides the program you are currently in, have you been in other SNAP employment and training programs in the past 24 months?

- Yes..... 1
- No..... 0 GO TO END
- Don't remember..... d GO TO END

**34a. IF Q17 = 1: Excluding the (current/ most recently completed) participation in a SNAP E&T program which we have discussed, how many separate times in the past 24 months have you participated in a SNAP E&T program?**

*Select one only*

- 1..... 1
- 2..... 2
- 3..... 3
- 4..... 4
- 5..... 5
- 6 or more..... 6
- None..... 0





IF 34a > 0

**35. How long ago did the SNAP E&T program prior to the one you (are currently/were/ most recently) in end?**

*Select one only*

- Within the past 3 months..... 1
- Between 3 and 6 months ago..... 2
- 7 to 12 months ago..... 3
- More than a year ago..... 4

**36. In the (current/most recently completed) SNAP E&T program, did you participate in activities similar to ones you participated in before?**

- Yes..... 1 GO TO Q37
- No..... 0
- Don't remember..... d

IF 36 = 1

**37. What types of activities did you participate in through these other SNAP employment and training programs?**

*Select all that apply*

- GED preparation/testing..... 1
- Post-secondary education..... 2
- Skills assessment..... 3
- ESL/English classes..... 4
- Job search training/assistance..... 5
- Job specific training..... 6
- On the job training (OJT)..... 7
- Vocational skills training ..... 8
- Certification or licensing preparation or testing..... 9
- Credential transfer assistance..... 10
- Internships..... 11
- Apprenticeship..... 12
- Workfare or Community Service ..... 13
- Something else..... 99

Specify

**38. How helpful were the previous SNAP E&T programs in getting you a job?**

*Select one only*

- Very helpful,..... 1
- Somewhat helpful, or..... 2
- Not helpful at all?..... 3

**END**

**Thank you for participating in this important study.**

**We will be sending a gift card in appreciation of your participation. Please enter your name and the address you would like the gift card mailed to. Please enter your phone number and email address so we may contact you if we have any questions.**

First Name:

Middle Initial:

Last Name:

Street Address 1:

Street Address 2:

City:

State:

Zip:

Telephone:

Email Address:

