Baseline 11th-grade Student Survey

INSTRUCTIONS

This survey asks about your involvement in school and the community, learning and study habits, and plans for the future. The survey should take about 35 minutes. Your answers are very important to us and will not be shared with anyone in your school, family, or community. This is not a test. There are no right or wrong answers. You may skip any question you do not wish to answer. If you have a question about the survey, raise your hand and someone will help you.

SECTION A: BACKGROUND	
1. What school do you go to?	School name
2. How many years have you been in the Roads to Success program?	0 1 2 or more
3. What grades do you typically get in school?	1 Mostly As 2 As and Bs 3 Mostly Bs 4 Bs and Cs 5 Mostly Cs 6 Cs and Ds 7 Mostly Ds 8 Ds and Fs 9 Mostly Fs
4. Please indicate whether you agree or disagree with the following statements:	 a. There is no point in deciding on a job when the future is so uncertain. b. I can't seem to become very concerned about my future occupation. c. I seldom think about the job that I want to enter. d. I'm not going to worry about choosing an occupation until I am out of school. e. As far as choosing an occupation is concerned, something will come along sooner or later. f. I really can't find any work that has much appeal to me.
 5. Different people have different strengths. No one is good at everything, and each of us emphasizes some strengths more than others. Please rate how strongly you have developed each of the following abilities using the scale below: 1 (Not strong) to 5 (Strongest) 	a. Keeping upbeat b. Making decisions by myself c. Taking responsibility for my actions d. Sticking up for my beliefs e. Counting on myself f. Doing what's right for me.
SECTION B: POSTSECONDARY PLANNING6. Do you know what math course (if any) you will take in your senior year? If yes, please list the course name.	1 Yes 0 No Name of course (or no course):
7. Do you know what science course (if any) you will take in your senior year? If yes, please list the course name.	1 Yes 0 No Name of course (or no course):
8. Do you plan to take a foreign language course in your senior year? If yes, please list the language and year.	1 Yes 0 No Name of course:

9. Have you visited a college, university, or other postsecondary school? If yes, how many? If no, skip the next question.	1 Yes 0 No Number visited:
10. What kind of school(s) have you visited? Please check all that apply.	1 Community college or 2-year school 2 4-year college or university 3 Technical or trade school
11. Have you taken or registered for a workforce test such as the ACT WorkKeys, Armed Services Vocational Aptitude Battery (ASVAB), or the Test of Adult Basic Education (TABE)? Please check all that apply.	1 Yes, ACT WorkKeys 2 Yes, ASVAB 3 Yes, TABE 4 Yes, Other (please name): 5 No
12. Have you participated in any of the following? Please check all that apply	 Job shadowing Job or career fair Internship Apprenticeship School-based business or enterprise
13. Do you have an up-to-date resume?	1 Yes O No
14. What are your main plans for after school? Are you:	 Going to college (Go to Section C) Starting a full-time job (Go to Section D) Starting a part-time job (Go to Section D) Joining the military (Go to Section D) No current plans (Go to Section E)
SECTION C: COLLEGE PLANS AFTER HIGH SCHOOL If you are planning to attend college after high school, plea	ase answer the following questions.
15. What type of college do you plan to attend?	1 2-year college 2 4-year college or university 3 Technical or trade school List name of school:
16. Where will you prefer to live?	1 in campus housing (dorm) 2 in off campus housing (apartment) 3 at home
17a. Do you have a major you are interested in? If no, skip the next two questions. 17b. If yes, what is that major?	1 Yes 0 No Planned major (survey-assisted):
17c. How interested are you in this major?	1 (not very) 2 3 4 5 (very)
18. How much do you expect to college to cost? Please provide your best guess.	1 Tuition and Fees 2 Room & Board 3 Books & Supplies 4 Misc
19. Do you plan to work while you are in school? If yes, got to SECTION D. If no, please go to SECTION E.	1 Yes 2 No 3 Not sure

20. Do you have a current job? If so, please list the job title. If yes, go to the next question. If no, go to question 25.	1 Yes 0 No Job title (survey-assisted):
21. Is this job:	Part-time (How many hours?:) Full-time
22. Do you plan to work in this job after high school? If yes, go to the next question. Otherwise, skip the next question.	1 Yes 0 No
23. Do you plan to work in this job:	Part-time (How many hours?:) Full-time Freelance
24. Do you plan to apply for a job for after you complete high school? If yes, please go to the next question. Otherwise, skip the next question.	1 Yes 0 No
25. Do you know what job(s) you plan to apply for? If yes, please list the job title(s).	1 Yes 0 No Job title (survey-assisted):
SECTION E: FUTURE PLANS AND ATTITUDES	
26a. Do you have an interest in a specific career? If no, skip the next two questions. 26b. If yes, what career?	1 Yes 0 No List career (survey-assisted)
26c. How interested are you in this career?	1 (not very) 2 3 4 5 (very)
27. How far in school do you think you will get?	 Some high school GED High school graduate Technical or trade school Associates degree (2 year college degree) Bachelor's degree (4 year college degree) Master's degree or equivalent Ph.D., MD or other advanced degree (like a medical or law degree) Other (Please describe) d Don't know
28. What is the job or occupation you expect or plan to have at age 30?	Job / occupation name (survey-assisted) 0 I don't know

29. How much education do you think you need to get the job or occupation you expect or plan to have at age 30?	 Some high school GED High school graduate Technical or trade school Associates degree (2 year college degree) Bachelor's degree (4 year college degree) Master's degree or equivalent Ph.D., MD or other advanced degree (like a medical or law degree) Other (Please describe) d Don't know
SECTION F: DEMOGRAPHICS	
30. When were you born?	(Month / Day / Year)
31. Are you:	1 Male?
	2 Female?
 32. How do you describe yourself? 1 American Indian or Alaskan Native 2 Asian 3 Black or African-American 4 Hispanic or Latino/Latina 5 Native Hawaiian or Other Pacific Islander 6 White 7 Other (Please describe) 	Mark all that apply
33. What is the highest level of education completed by your mother or female guardian?	 Some high school GED High school graduate Technical or trade school Associates degree (2 year college degree) Bachelor's degree (4 year college degree) Master's degree or equivalent Ph.D., MD or other advanced degree (like a medical or law degree) Other (Please describe) d Don't know
34. What is the highest level of education completed by your father or male guardian?	 1 Some high school 2 GED 3 High school graduate 4 Technical or trade school 5 Associates degree (2 year college degree) 6 Bachelor's degree (4 year college degree) 7 Master's degree or equivalent 8 Ph.D., MD or other advanced degree (like a medical or law degree) 9 Other (Please describe) d Don't know
35. What is the main language spoken at home?	1 English 2 Spanish 3 English and Spanish equally 4 Other (Please describe)
36. Do you or your parents have any of the following at home? Check all that apply	1 Air conditioner/air conditioning 2 Car

	3 Computer 4 DVD player 5 Multiple cell phones 6 Motorcycle 7 Your own room
	8 Multiple televisions 9 A washing machine
37. Do you have any siblings or anyone else in your home	1 Yes
who currently attends college?	0 No

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 is 1830-NEW. The time required to complete this information collection is estimated to average 35 minutes per respondent, including the time to review instructions, gather the data needed, and complete and review the information collected. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202. If you have comments or concerns regarding the status of your individual submission of this form, write directly to: U.S. Department of Education, Office of Career, Technical, and Adult Education, 400 Maryland Avenue, SW, Washington, DC 20202-7100.