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MATHEMATICA
Policy Research

Youth CareerConnect (YCC) Evaluation

Grantee Survey 2014-2015 School Year

January 13, 2015

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INTRODUCTION

Mathematica Policy Research and its research partner Social Policy Research Associates (SPR) are conducting an evaluation of the Youth CareerConnect (YCC) program on behalf of the U.S. Department of Labor (DOL). As part of the evaluation, we are asking YCC grantees to complete a short survey about their program. Participation is mandatory for anyone receiving a grant and will help DOL better understand how YCC programs function.

The survey covers several topics including the organizational and administrative structure of your program, program partners, program features and support services and program curriculum. If your grant includes multiple YCC programs, we ask that you answer most questions based on the YCC program that starts in 9th grade. If you do not have a program that starts in 9th grade, we ask that you answer questions for the program that starts in the earliest grade.

This evaluation will help us better understand the impact of YCC on participants' education and employment outcomes as well as gain a better understanding of how YCC is implemented in programs across the country. Individual responses to this survey will not be attributed to specific individuals or organizations. Responses to this data collection will be used only for statistical purposes. The reports prepared from this information provided as part of this survey will be summarized across all YCC sites and individual forms will not be available to anyone outside the study team, except as required by law.

The survey should take approximately 35 minutes to complete for grantees with only one YCC program and about 90 minutes for grantees with more complex program structures. If there are questions you are not able to answer, please feel free to draw on the expertise and knowledge of others within your program. You may also want to refer to program documentation such as your budget, Memorandum of Understanding (MOUs) and course offerings. If you have any questions as you complete this questionnaire, please contact Lisbeth Goble at Mathematica Policy Research at 1-312-994-1016 or LGoble@mathematica-mpr.com.

A. ORGANIZATIONAL AND ADMINISTRATIVE STRUCTURE

Name of organization awarded Youth CareerConnect (YCC) grant:

A1. What is the name(s) of the YCC program(s) associated with the grant? Please list all program name(s) below:

1. _____
2. _____
3. _____
4. _____
5. _____

If you have more than one program:

- Please answer the rest of the survey for the program that starts in 9th grade.
- If none start in 9th grade, use the program with earliest start grade (for example, the one starting in 10th grade).
- If you have more than one starting in 9th grade, use the program with the largest student enrollment.

A1a. Please list which YCC program you will be describing:

A2. In what grade do students enter [Program Name]?

MARK ONE ONLY

- 1 9th grade
- 2 10th grade
- 3 11th grade
- 4 12th grade
- 5 13th grade

A3. When students start in the grade entered in A2, how many years should it take them to complete the program?

MARK ONE ONLY

- 1 1 years
- 2 2 years
- 3 3 years
- 4 4 years

5 More than 4 years

A4. In how many school districts was [Program Name] offered during the 2014-2015 school year?

|_|_|_| DISTRICTS

A5. In how many schools was [Program Name] offered during the 2014-2015 school year?

|_|_|_| SCHOOLS

A5a. If [Program Name] was only offered in one school, please provide the name of the school and district below.

If [Program Name] was offered in more than one school, please provide the name of the school with the largest enrollment in [Program Name] and the associated district.

SCHOOL NAME

SCHOOL DISTRICT

INSTRUCTIONS:

IF [PROGRAM NAME] OPERATES ONLY IN ONE SCHOOL, PLEASE ANSWER THE REMAINING QUESTIONS ABOUT THE PROGRAM IN THAT SCHOOL.

IF [PROGRAM NAME] OPERATES IN MORE THAN ONE SCHOOL, PLEASE ANSWER THE REMAINDER OF THE SURVEY ABOUT IT AS IT OPERATES IN THE **SCHOOL WITH THE LARGEST ENROLLMENT, THE ONE LISTED IN A5a.**

A6. Do all students in this school participate in [Program Name in School Name]?

1 Yes

0 No

A6a. Did [Program Name] exist somewhere in the district prior to receiving YCC funds from the DOL?

1 Yes

0 No → GO TO A7

A6b. In what year was [Program Name] established? Your best guess is fine.

|_|_|_|_| YEAR

A7. We are interested in the number of years of experience [Program Name in School Name] and [Grantee] has with a variety of activities.

Please enter the number of years of experience [District] has with each activity as of the 2014-2015 school year in the first column.

Please enter the number of years of experience [Program Name in School Name] has with each activity as of the 2014-2015 school year in the first column.

Please enter the number of years of experience [Grantee] has with each activity as of the 2014-2015 school year in the second column

Enter “0” if no experience or less than 1 year of experience.

Enter “d” if you do not know the level of experience.

Your best estimate is fine.

	YEARS OF EXPERIENCE		
	[DISTRICT NAME]	[PROGRAM NAME]	[GRANTEE]
a. Providing career and technical education courses.....	_ _	_ _	_ _
b. Integrating academic and career technical curriculum.....	_ _	_ _	_ _
c. Engaging employers in school-based programs.....	_ _	_ _	_ _
d. Providing individualized career counseling.....	_ _	_ _	_ _
e. Providing individualized academic counseling.....	_ _	_ _	_ _
f. Providing work-based learning or exposure to the world of work outside school.....	_ _	_ _	_ _
g. Providing internships outside school.....	_ _	_ _	_ _
h. Offering small learning communities.....	_ _	_ _	_ _
i. Providing wraparound support services.....	_ _	_ _	_ _

A8. Think about all of the staff who currently work for [Program Name in School Name]. How many of the following staff were part of the program in the 2014-2015 school year? Please indicate the number of staff in full-time and the number in less than full-time positions. For example, if you have 1 full time full time and 2 part time program coordinators in the school and none in the central office, you would put a 1 in the full time column and a 2 in the part time category in the [School Name] column and put 0 in both the full time and part time columns in the [Central Administration/office] column.

Note: We realize counselors/coaches/advisors are an integral part of many programs. We do not ask about them in this section but will ask about them in Section G. Please do not include them in your response to this question.

MARK ALL THAT APPLY

	[SCHOOL NAME]			[CENTRAL ADMINISTRATION/OFFICE]		
	NUMBER FULL TIME	NUMBER LESS THAN FULL TIME	CHECK IF DON'T KNOW	NUMBER FULL TIME	NUMBER LESS THAN FULL TIME	CHECK IF DON'T KNOW
a. Program director.....	_ _	_ _	^d <input type="checkbox"/>	_ _	_ _	^d <input type="checkbox"/>
b. Program coordinator.....	_ _	_ _	^d <input type="checkbox"/>	_ _	_ _	^d <input type="checkbox"/>
c. Work-based learning coordinator.....	_ _	_ _	^d <input type="checkbox"/>	_ _	_ _	^d <input type="checkbox"/>
d. Career-technical teacher.....	_ _	_ _	^d <input type="checkbox"/>	_ _	_ _	^d <input type="checkbox"/>
e. Data specialist.....	_ _	_ _	^d <input type="checkbox"/>	_ _	_ _	^d <input type="checkbox"/>
f. Other (<i>specify</i>):..... _____ (job title)	_ _	_ _	^d <input type="checkbox"/>	_ _	_ _	^d <input type="checkbox"/>
g. Other (<i>specify</i>):..... _____ (job title)	_ _	_ _	^d <input type="checkbox"/>	_ _	_ _	^d <input type="checkbox"/>
h. Other (<i>specify</i>):..... _____ (job title)	_ _	_ _	^d <input type="checkbox"/>	_ _	_ _	^d <input type="checkbox"/>

A9. Please indicate the career focus of [Program Name in School Name] for the 2014-2015 school year.

MARK ALL THAT APPLY

1 AGRICULTURE, FOOD & NATURAL RESOURCES

- 2 Agribusiness Systems
- 3 Animal Systems
- 4 Environmental Service Systems
- 5 Food Products & Processing Systems
- 6 Natural Resources Systems
- 7 Plant Systems
- 8 Power, Structural & Technical Systems

9 ARCHITECTURE & CONSTRUCTION

- 10 Construction
- 11 Design/Pre-Construction
- 12 Maintenance/Operations

13 ARTS, AUDIOVISUAL TECHNOLOGY & COMMUNICATIONS

- 14 Audio Visual Technology & Film
- 15 Journalism & Broadcasting
- 16 Performing Arts
- 17 Printing Technology
- 18 Telecommunications
- 19 Visual Arts

20 BUSINESS MANAGEMENT & ADMINISTRATION

- 21 Administrative Support
- 22 Business Information Management
- 23 General Management
- 24 Human Resources Management
- 25 Operations Management

26 EDUCATION & TRAINING

- 27 Administration & Administrative Support
- 28 Professional Support Services
- 29 Teaching/Training

30 FINANCE

- 31 Accounting
- 32 Banking Services
- 33 Business Finance
- 34 Insurance

35 SECURITY & INVESTMENTS

36 GOVERNMENT & PUBLIC ADMINISTRATION

- 37 Foreign Service
- 38 Governance
- 39 National security
- 40 Planning
- 41 Public Management & Administration
- 42 Regulation
- 43 Revenue & Taxation

44 HEALTH SCIENCES

- 45 Biotechnology Research & Development
- 46 Diagnostic Services
- 47 Health Informatics
- 48 Support Services
- 49 Therapeutic Services

50 HOSPITALITY & TOURISM

- 51 Lodging
- 52 Recreation, Amusements & Attractions
- 53 Restaurants & Food/Beverage Service
- 54 Travel & Tourism

55 HUMAN SERVICES

- 56 Consumer Services
- 57 Counseling & Mental Health Services
- 58 Early Childhood Development & Services
- 59 Family & Community Services
- 60 Personal Care Services

61 INFORMATION TECHNOLOGY

- 62 Information Support & Services
- 63 Network Systems
- 64 Programming & Software Development
- 65 Web & Digital Communications

66 LAW, PUBLIC SAFETY, CORRECTIONS & SECURITY

- 67 Correction Services
- 68 Emergency & Fire Management Services
- 69 Law Enforcement Services
- 70 Legal Services
- 71 Security & Protective Services

72 MANUFACTURING

- 73 Health, Safety & Environmental Assurance
- 74 Logistics & Inventory Control
- 75 Maintenance, Installation & Repair
- 76 Manufacturing Production Process Dev.
- 77 Production
- 78 Quality Assurance

79 MARKETING

- 80 Marketing Communications
- 81 Marketing Management
- 82 Marketing Research
- 83 Merchandising
- 84 Professional Sales

85 SCIENCE, TECHNOLOGY, ENGINEERING, & MATHEMATICS

- 86 Engineering & Technology
- 87 Science & Mathematics

88 TRANSPORTATION, DISTRIBUTION & LOGISTICS

- 89 Facility & Mobile Equipment Maintenance
- 90 Health, Safety & Environmental Management
- 91 Logistics Planning & Management Services
- 92 Sales & Service
- 93 Transportation Operations
- 94 Transportation Systems/Infrastructure Planning, Management & Regulation
- 95 Warehousing & Distribution Center Operations

96 OTHER

- 97 Other (*specify*) _____
- 98 Other (*specify*) _____
- 99 Other (*specify*) _____

These next questions ask about resources for [Program Name in Program School]. Please consider all resources used specifically for [Program Name in Program School].

A10. First, we would like to understand the different sources of financial and in-kind resources provided to [Program Name in School Name].

In addition to DOL funding, use the first column of the table to mark the entities that provided funding and/or resources—either financial or in-kind—during the 2014-2015 school year.

In the second column, please indicate the funding and/or resource type.

M A R K O N E P E R R O W	S E L E C T A L L T H A T A P P L Y I N E A C H R O W
A. DID THIS TYPE OF ENTITY PROVIDE RESOURCES?	B. IF Y E S, M A R K T H E T Y P E O F F U N D I N G B E L O W

	Y E S	N O	DON'T KNOW	FINANCIAL	I N - K I N D	D O N ' T K N O W
a. Pri vat e fou nd ati on		1	0			
b. St ate or loc al go ver nm ent		1	0			
c. E mp loy ers		1	0			
d. Ins titu tes of Hi gh er Ed uc ati on		1	0			
e.		1	0			

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A11. What was [Program Name in School Name]'s total operating budget for the 2014-2015 school year? Your best guess is fine.

\$ |__|__| , |__|__|__| , |__|__|__| TOTAL OPERATING BUDGET

Don't know

B. PROGRAM PARTNERS

B1. Please provide the following details for each type of partner to the [Program Name in School Name] for the 2014-2015 school year.

In row a, indicate the number of partners you currently have of each type. If you did not have any partners of this type, enter a 0.

In the columns in which you name at least one partner in row a, please answer questions b through e for partners in those columns.

If the number of partners is 0 in row a, move to the next column.

If you have a key partner that is not captured in the table below, please list that partner in the “other” column.

The partnerships included below do not need to be exclusive to your YCC program, but should reflect the ones you consider to be critical to your program.

	I N S T I T U T I O N S O F H I G H E R E D U C A T I O N	E M P L O Y E E S	S U P P O R T I V E S E R V I C E O R G A N I Z A T I O N	W O R K F O R C E I N V E S T M E N T B O A R D S O R A M E R I C A N J O B C E N T E R	O T H E R P A R T N E R (<i>s p e c i f y</i>)
a. Number of partners.....	 	 	 	 	
	N U M B E R	N U M B E R	N U M B E R	N U M B E R	N U M B E R

	B E R d <input type="checkbox"/>	d <input type="checkbox"/> Don't know	N U M B E R d <input type="checkbox"/>	d <input type="checkbox"/> Don't know	N U M B E R d <input type="checkbox"/>
	D o n' t k n o w		D o n' t k n o w		D o n' t k n o w

b. How many partners are new as a result of the YCC program?.....

	N U M B E R d <input type="checkbox"/>	N U M B E R d <input type="checkbox"/>	N U M B E R d <input type="checkbox"/>	N U M B E R d <input type="checkbox"/>	N U M B E R d <input type="checkbox"/>
	D o n' t k n o w	D o n' t k n o w	D o n' t k n o w	d <input type="checkbox"/> Don't know	D o n' t k n o w

c. For partnerships that existed prior to receipt of the YCC grant, how many months has the **longest** partnership been in place?.....

	N U M B E R d <input type="checkbox"/>	N U M B E R d <input type="checkbox"/>	N U M B E R d <input type="checkbox"/>	N U M B E R d <input type="checkbox"/>	N U M B E R d <input type="checkbox"/>
	D o n' t k n o w	D o n' t k n o w	D o n' t k n o w	d <input type="checkbox"/> Don't know	D o n' t k n o w
	N U M B E R d <input type="checkbox"/>	N U M B E R d <input type="checkbox"/>	N U M B E R d <input type="checkbox"/>	d <input type="checkbox"/> Don't know	N U M B E R d <input type="checkbox"/>
	D o n' t k n o w	D o n' t k n o w	D o n' t k n o w	o <input type="checkbox"/> N/A	D o n' t k n o w

	<input type="checkbox"/> Don't know <input type="checkbox"/> N/A	know <input type="checkbox"/> N/A	B E R d <input type="checkbox"/> Don't know <input type="checkbox"/> N/A	B E R d <input type="checkbox"/> Don't know <input type="checkbox"/> N/A
--	---	---	---	---

d. How many partners have a signed MOU or letter of agreement (LOA) in place?.....

	N U M B E R d <input type="checkbox"/> Don't know	N U M B E R d <input type="checkbox"/> Don't know	N U M B E R d <input type="checkbox"/> Don't know	N U M B E R d <input type="checkbox"/> Don't know
--	---	---	---	---

e. How many of your existing partners do you think will continue to work with you after the DOL grant ends?.....

	N U M B E R d <input type="checkbox"/> Don't know	N U M B E R d <input type="checkbox"/> Don't know	N U M B E R d <input type="checkbox"/> Don't know	N U M B E R d <input type="checkbox"/> Don't know
--	---	---	---	---

	MEMBER d <input type="checkbox"/> Don't know	ER d <input type="checkbox"/> Don't know	NUMBER d <input type="checkbox"/> Don't know	d <input type="checkbox"/> Don't know ER	NUMBER d <input type="checkbox"/> Don't know
--	--	--	--	---	--

C. PROGRAM FEATURES

The next two questions ask about the recruitment and application process for [Program Name in School Name].

C1. Which of the following methods were used to recruit students into [Program Name in School Name] for the 2014-2015 school year?

MARK ALL THAT APPLY

- 1 Flyers posted in high schools
- 2 Flyers posted in middle or junior high schools
- 3 Word-of-mouth referrals from people in the community or former/current participants
- 4 Community outreach
- 5 Self-referrals or walk-ins
- 6 Enrollment fairs
- 7 School assemblies
- 8 Counselors
- 9 We didn't actively recruit students into our program
- 10 Certain students were automatically enrolled in the program
- 11 Recruit some other way (*specify*) _____

C2. Which of the following did the [Program Name in School Name] consider when reviewing a student's application for the 2014-2015 school year? →

MARK ALL THAT APPLY

- 1 Nothing, we didn't have a formal application **GO TO QUESTION C3**

ACADEMICS & SKILLS

- 2 Grades above a minimum threshold/
- 3 Grades below a threshold
- 4 Pre-requisite courses (successful completion)
- 5 Test scores (for example, placement test, admission test, standardized achievement test)
- 6 Special aptitudes, skills or talents

BACKGROUND/CHARACTERISTICS

- 7 Good attendance record
- 8 Poor attendance record
- 9 Grade level
- 10 Interest in subject area/career
- 11 Interview with staff member
- 12 Personal statement
- 13 Special student needs (for example, those with disabilities)
- 14 English language learners
- 15 Recommendation

OTHER

16 Other (*specify*) _____

C3. For each activity or service listed below, please check if it was offered to students in the [Program Name in School Name] during the 2014-2015 school year in column A.

In column B, please check if the activity or service was offered for all, some, or none of the similar students not enrolled in the YCC program at the same school during the 2014-2015 school year. If all students in the school were enrolled in [Program Name], then please answer the questions about students in similar schools in the same district that were not in YCC.

Please indicate below whether you are comparing the YCC students to students in the same school, same district or if all students in the district were in the YCC program.

- 1 School comparison used in column B
- 2 District comparison used in column B
- 3 All students in district in [Program Name] → **SKIP COLUMN B**

MARK ONE PER ROW			MARK ONE PER ROW			
A · O F F E R E D · F O R · Y C C · S T U D E N T S			B · O F F E R E D · F O R · N O N - Y C C · S T U D E N T S			
	Y E S	N O	D O N ' T · K N O W	A L L	S O M E	N O N E
1. Workforce-related Activities Job Shadowing, Mentoring and Internships						

MARK ONE PER ROW			MARK ONE PER ROW						
A · O F F E R E D F O R Y C C S T U D E N T S			B · O F F E R E D F O R N O N - Y C C S T U D E N T S						
							Y E S	N O	D O N ' T K N O W
a.	Brought in speakers to describe workplaces and careers								
b.	Field trips to workplaces								
c.	Attendance at conferences for trade associations or professional organizations								
d.	Job shadowing for individual students								
e.	Group job shadowing								
f.	Individual mentor								
g.	Group mentoring								
h.	<u>Paid</u> internships								

MARK ONE PER ROW			MARK ONE PER ROW			
A · O F F E R E D F O R Y C C S T U D E N T S			B · O F F E R E D F O R N O N - Y C C S T U D E N T S			
Y E S	N O	D O N ' T K N O W	A L L	S O M E	N O N E	D O N ' T K N O W
i. <u>Unpaid</u> internships						
j. Required internships at a place of work						
k. Internships at a place of work, but not required						
l. Virtual internships						
Job Search Preparation						
m. Mock interviews by industry professionals						
n. Resume writing workshops						
Workforce Preparation						
o. Apprenticeship						

MARK ONE PER ROW			MARK ONE PER ROW					
A · O F F E R E D F O R Y C C S T U D E N T S			B · O F F E R E D F O R N O N - Y C C S T U D E N T S					
							Y E S	N O
p.	Skill badges							
q.	Courses that lead to an industry-recognized credential							
r.	Stackable credentials							
s.	Preparation for a certification exam							
t.	Connecting students to a training program							
u.	Occupational skills training							
v.	Work readiness assessment (for example, WorkKeys or other job skills assessment tools)							

MARK ONE PER ROW			MARK ONE PER ROW						
A · O F F E R E D F O R Y C C S T U D E N T S			B · O F F E R E D F O R N O N - Y C C S T U D E N T S						
							Y E S	N O	D O N ' T K N O W
w.	Referral to programs at American Job Center								
x.	Career assessment/interest inventory								
	Leadership Development								
y.	Peer-centered activities such as peer mentoring or tutoring								
z.	Organizational and team work training								
aa.	Training in decision-making and determining priorities								
bb.	Citizenship training, including life skills								

MARK ONE PER ROW			MARK ONE PER ROW				
A · O F F E R E D F O R Y C C S T U D E N T S				B · O F F E R E D F O R N O N - Y C C S T U D E N T S			
	Y E S	N O	D O N · T K N O W		A L L	S O M E	N O N E
such as parenting, work behavior, and budgeting of resources							
Other Workforce Preparation Activities							
cc. Individual development plans							
dd. Community service learning							
ee. Other workforce or job related training (<i>specify</i>)							
2. Post-secondary Enrollment							

MARK ONE PER ROW			MARK ONE PER ROW			
A · O F F E R E D F O R Y C C S T U D E N T S			B · O F F E R E D F O R N O N - Y C C S T U D E N T S			
	Y E S	N O		D O N · T K N O W	A L L	S O M E

Activities

College Visits

- a. Campus visits to 2-year colleges
- b. Campus visits to 4-year colleges
- c. College faculty or representatives came to high school classes

Post-secondary Preparatory Coursework

- d. College entrance exams preparation courses
- e. Dual enrolled coursework

MARK ONE PER ROW			MARK ONE PER ROW						
A · O F F E R E D F O R Y C C S T U D E N T S			B · O F F E R E D F O R N O N - Y C C S T U D E N T S						
							Y E S	N O	D O N ' T K N O W
f. AP coursework									
g. Courses articulate to a 2 or 4-year college program									
Academic Support									
h. Individualized tutoring									
i. Homework assistance									
j. Developmental or special education									
k. Acceleration strategies to get lower-performing students up to speed by graduation									
Post-secondary Financial									

MARK ONE PER ROW			MARK ONE PER ROW			
A · O F F E R E D F O R Y C C S T U D E N T S			B · O F F E R E D F O R N O N - Y C C S T U D E N T S			
	Y E S	N O		D O N ' T K N O W	A L L	S O M E
Assistance						
l. Tuition or financial assistance						
m. Financial aid planning assistance						
n. Assistance with FASFA completion						
Other Post-secondary Preparation Activities						
o. Other post-secondary education preparation (<i>specify</i>)						
3. Support Services						
Financial Support						

MARK ONE PER ROW			MARK ONE PER ROW						
A · O F F E R E D F O R Y C C S T U D E N T S			B · O F F E R E D F O R N O N - Y C C S T U D E N T S						
							Y E S	N O	D O N · T K N O W
a.	Costs related to credential attainment for individual participants, such as certification exam fees								
b.	Fees associated with other tests or exams (for example SAT or ACT)								
c.	School supplies								
d.	Work clothes or uniforms								
e.	Work-related equipment (for example, personal computer)								
f.	Transportation								

MARK ONE PER ROW			MARK ONE PER ROW				
A · O F F E R E D F O R Y C C S T U D E N T S				B · O F F E R E D F O R N O N - Y C C S T U D E N T S			
	Y E S	N O	D O N ' T K N O W		A L L	S O M E	N O N E
g. Childcare							
h. Other dependent care (for example, elder care)							
Health and Well-being Support							
i. Health care services/referrals							
j. Psychological counseling either in-house or as a referral							
Support for Special Populations							
k. Services for English language learners							
l. Services for students with disabilities							

MARK ONE PER ROW			MARK ONE PER ROW			
A · O F F E R E D F O R Y C C S T U D E N T S			B · O F F E R E D F O R N O N - Y C C S T U D E N T S			
Y E S	N O	D O N ' T K N O W	A L L	S O M E	N O N E	D O N ' T K N O W
m. Services for students from low-income families						
n. Services for pregnant and parenting students						
o. Other support service (specify)						

D. INTEGRATED CURRICULUM

D. INTEGRATED CURRICULUM

D1. To what extent do you agree with the following statements about the curriculum in [Program Name in School Name] during the 2014-2015 school year?

SELECT ONE RESPONSE PER ROW

STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	DON'T KNOW
Standards and Assessments				
Academic Courses				
Career-Technical Courses				
Curriculum Integration				

E. EMPLOYER ENGAGEMENT

E. EMPLOYER ENGAGEMENT

E1. We are interested in the extent you agree with the following statements about employer partners with [Program Name in School Name] during the 2014-2015 school year.

For statements related to “Professional Development and Support”, we are interested in employers who partnered with the central office as well as those that partnered with [Program Name in School Name].

For statements related to “Workforce Preparation Activities”, we are only interested in employers that partnered with [Program Name in School Name].

To what extent do you agree that employer partners...

SELECT ONE RESPONSE PER ROW

	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	DON'T KNOW
Program Development and Support					
a. Helped define the program strategies and goals.....					
b. Assisted with curriculum development and program design					
c. Provided resources to support education/training.....					
d. Actively participated on the program’s advisory board.....					
e. Provided program leadership outside the advisory board..					
f. Served as an informal program advisor.....					
g. Served as outside grader or reviewer of classroom projects					
Workforce Preparation Activities					
h. Provided students with mentors for <u>at least one year</u>					
i. Provided students with mentors for <u>less than one year</u>					
j. Provided field trips to employer’s worksite.....					
k. Spoke at the school to describe career fields.....					
l. Offered job shadowing opportunities.....					
m. Provided project learning opportunities at the workplace. .					
n. Provided <u>paid</u> internships.....					
o. Provided <u>unpaid</u> internships.....					
p. Provided registered apprenticeships or pre-apprenticeships					
q. Gave hiring preference to students who complete the YCC program					

SELECT ONE RESPONSE PER ROW

STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	DON'T KNOW

r. Engaged historically underrepresented populations such as females and minorities

.....

F. WORK-BASED LEARNING

G. WORK-BASED LEARNING

F1. We are interested in the extent you agree with the following statements about the work-based learning skills students were taught in the [Program Name in School Name] during the 2014-2015 school year.

To what extent do you agree that students are taught ...

SELECT ONE
RESPONSE PER
ROW

	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	DON'T KNOW
Workplace Behavioral Expectations					
a. About work expectations for attendance and the need to adhere to them.....					
b. About work expectations for punctuality and the need to adhere to them.....					
c. To dress appropriately for a position and duties.....					
Workplace Culture and Communication					
d. To speak clearly and communicate effectively—verbally and non-verbally.....					
e. To accept direction, feedback, and constructive criticism with a positive attitude and use information to improve work performance.....					
f. To demonstrate understanding of workplace culture and policy.....					
g. To understand of the requirements for career pathways, such as what they need to do in order to attend a two- or four-year college or gain a certificate.....					
Workplace Performance Expectations					
h. To participate fully in a task or project from initiation to completion.....					
i. To meet quality standards at work.....					
j. To exercise sound reasoning and analytical thinking to solve workplace problems.....					
k. To relate positively with co-workers and work productively with individuals and in teams.....					
Technical Skills					
l. To develop career-specific skills needed to enter the field.....					
m. To develop technological (for example, computer) skills.....					

G. CAREER AND ACADEMIC COUNSELING

F. CAREER AND ACADEMIC COUNSELING

The following questions are about academic and career counseling in [Program Name in School Name] during the 2014-2015 school year. We use the term counselor/counseling to include counselors, advisors, and coaches.

G1. Which of the following counselors were part of [Program Name in School Name]?

MARK ALL THAT APPLY

- 1 Academic counselor(s) whose duties were separate from a career counselor
2 Career counselor(s) whose duties were separate from academic counselor
3 Counselor(s) who fulfilled both academic and career counseling duties
4 We did not have academic or career coach or counselors → **GO TO SECTION H**

Please answer the following questions only if you had at least one academic counselor whose duties were distinct from a career counselor's duties. If you did not have (distinct) academic counselors, please enter 0 in G2 and go to question G6.

G2. On average, how many students were assigned per academic counselor? That is, what was the student-to-counselor ratio?

|_|_| STUDENTS ASSIGNED PER ACADEMIC COUNSELOR

d Don't know

G3. Did the academic counselor(s) work exclusively with YCC students?

1 Yes

0 No

d Don't know

G4. Were YCC students required to meet with an academic counselor on a regular basis?

1 Yes

GO TO G6 0 No

d Don't know

G5. How many times a year were YCC students required to meet with their academic counselor?

|_|_| TIMES WITH THEIR ACADEMIC COUNSELOR

d Don't know

Please answer the following questions about career counselors whose duties were separate from academic counselors. If you did not have at least one career counselor, please enter 0 in G6 and go to question G10.

G6. On average, how many students were assigned per career counselor? That is, what was the student-to-counselor ratio?

|_|_|_| STUDENTS ASSIGNED PER CAREER COUNSELOR

d Don't know

G7. Did the career counselor(s) work exclusively with YCC students?

1 Yes

0 No

d Don't know

G8. Were YCC students required to meet with a career counselor on a regular basis?

1 Yes

0 No

GO TO G10 d Don't know

G9. How many times a year were YCC students required to meet with their career counselor?

|_|_|_| TIMES WITH THEIR CAREER COUNSELOR

d Don't know

Please answer the following questions about the counselor fulfilling both academic and career functions. If you did not have any such counselors, please enter 0 in G10 and go to question G14.

G10. On average, how many students were assigned per counselor? That is, what was the student-to-counselor ratio?

|_|_|_| STUDENTS ASSIGNED PER COUNSELOR

d Don't know

G11. Did the counselor work exclusively with YCC students?

1 Yes

0 No

d Don't know

G12. Were YCC students required to meet with a counselor on a regular basis?

1 Yes

0 No

GO TO G14 d Don't know

G13. How many times a year were YCC students required to meet with their counselor?

|_|_|_| TIMES WITH THEIR COUNSELOR

d Don't know

G14. Did any type of counselor in [Program Name in School Name] provide the following services during the 2014-2015 school year? If yes, how often were those provided?

	MARK ONE PER ROW			MARK ONE PER ROW				
	A. DID COUNSELORS PROVIDE THIS SERVICE?			B. HOW OFTEN WERE THESE SERVICES PROVIDED?				
	YES	NO	DON'T KNOW	ONCE A YEAR	ONCE A MONTH	ONCE A WEEK	DAILY	DON'T KNOW
Identifying Educational and Career Goals								
a. Working with students to develop an Individual Development Plan (IDP).....								
b. Reviewing and updating a student's IDP.....								
c. Helping students identify viable educational and career goals.....								
d. Providing occupational information based on local labor market conditions.....								
e. Providing career interest inventories.....								
f. Assessing students ability to identify and obtain employment in chosen career.....								
Educational and Career Goal Planning								
g. Assisting students to select courses to meet career and educational objectives.....								
h. Identifying work-based learning experiences to complement career aspirations.....								
i. Assisting students to select and apply to post-secondary education.....								
j. Assisting students to select and apply to post-secondary training opportunities.....								
k. Working with students to determine ways to finance post-secondary education or training.....								
l. Assisting students with resume preparation or interview skills.....								
m. Helping with job search and placement.....								
n. Facilitating a relationship with or identifying resources at the American Job Centers (AJCs).....								
Supporting Special Populations								
o. Providing for unique needs of students with physical or learning disabilities.....								
p. Providing for unique needs of English language learners.....								
q. Encouraging and supporting low-income and underrepresented students to enroll in the YCC program.....								
r. Other (<i>specify</i>).....								

H. SMALL LEARNING COMMUNITIES

G. WORK-BASED LEARNING

H1. For each of the statements listed below, please check if it applies for students in the [Program Name in School Name] during the 2014-2015 school year in the first column.

In column B, please check if the statement applies for all, some, or none of the similar students not enrolled in the YCC program at the same school during the 2014-2015 school year. If all students in the school were enrolled in [Program Name], then please answer the questions about students in similar schools in the same district that are not in YCC.

Please indicate whether you are comparing the YCC students to similar students in the same school, same district, or if all students in the district were in the YCC program.

1 School used in column B

2 District used in column B

3 All students in district in YCC program → **SKIP COLUMN B**

M A R K O N E P E R R O W	M A R K O N E P E R R O W
A . O F F E R E D T O Y C C S T U D E N T S	B . O F F E R E D T O N O N - Y C C S T U D E N T

				S			
	Y E S	N O	D O , T K N O W	A L L	S O M E	N O N E	D O , T K N O W
a. Students complete a capstone course that brings together knowledge learned							
b. Project-based learning is used in courses							
c. Students are scheduled to take classes together as a cohort at each grade level							
d. Teachers are scheduled to work with a specific group of students							
e. Teachers in a program have a regularly scheduled common planning period							
f. Students attend a school-within-a-school							
g. Students attend a separate small school							
h. Students have a physical space that is only available to them							
i. Other characteristics make for a small learning community (<i>specify</i>)							

I. PROFESSIONAL DEVELOPMENT

J. PROFESSIONAL DEVELOPMENT

11. During the 2014-2015 school year (including those that will be available in summer 2015), on average, how many hours of professional development specific to the YCC program did most staff in the [Program Name in School Name] receive?

|_|_| HOURS PER STAFF DURING 2014-2015

0 None

Thank you for taking the time to complete this survey.

12. What professional development opportunities were/are available during the 2014-2015 school year (including those that will be available in summer 2015) to staff in [Program Name in School Name]?

MARK ALL THAT APPLY

- 1 Industry site-based residencies or externships
- 2 Training on incorporating specific industry focus into core curriculum
- 3 Training in the skills and competencies of program's industry focus
- 4 Intensive industry focused training
- 5 Individualized mentoring or coaching by master teachers or industry experts
- 6 Project-based learning
- 7 Opportunities for collaborating and establishing communities of practice with other teachers or partners
- 8 Other (*specify*)
-

Thank you for taking the time to complete this survey.