**Trade Adjustment Assistance Community College and Career Training (TAACCCT)**

**College Survey**

Thank you for taking the time to participate in the Survey of TAACCCT Colleges.

• **Who is administering this survey?** The Urban Institute, a nonprofit, nonpartisan research organization, is under contract to Abt Associates, Inc. to conduct an evaluation of the Round 4 TAACCCT grant program for the U.S. Department of Labor (DOL), Chief Evaluation Office (CEO) in partnership with the Employment and Training Administration (ETA). The evaluation includes this survey.

• **What is the purpose of the survey?** This survey will collect information from all institutions of higher education that received a TAACCCT grant and/or were a part of a TAACCCT consortium to document the range of goals, activities, and outcomes that emerged from the TAACCCT grant and will provide information about promising strategies for developing effective training programs.

• **How long will it take to complete?** This survey will take approximately 90 minutes.

• **Is participation mandatory?** Please note that the solicitation for grant applications requires grantees to participate in evaluation activities sponsored by DOL, including any that occur after the expiration of the grant.

• **Who will see my responses?** The evaluation team treats the information you provide as private. All reports based on the survey will report findings at the aggregate level, and responses to the survey will not be identified by organization or person in any publication. DOL staff will not have access to your individual responses.

• **Who can I contact with questions?** If you have any questions please email [TAACCCTsurveys@urban.org](mailto:TAACCCTsurveys@urban.org%20) or call our Help Desk toll-free at (855) 353-4982.

**IMPORTANT:** We recognize that your institution may be a grant recipient or consortium member for multiple

TAACCCT grants. Your institution is required to complete a survey for each grant received. Thank you again for participating in this survey. We greatly appreciate your time and assistance.

***Please complete by XXXX.***

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 XXXX-XXXX and expires on XXXX XX, XXXX. The time required to complete this information collection is estimated to average 90 minutes, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate or suggestions for improving this form, please write to: U.S. Department of Labor, Chief Evaluation Office, Room N-5641 Frances Perkins Building, Attention: Janet Javar, 200 Constitution Ave., NW, Washington, DC 20210.

**Instructions:**

*Technical Instructions:*

• **This web-based survey can be saved and completed over several sessions** by simply clicking the "Next" button at the bottom of the page to save your work. Upon reentering the survey, you will be routed to the last completed question.

• **The survey allows for multiple respondents**, which allows you to delegate sections of the survey to individuals who might have more in-depth information on a particular program or section. To share the survey, simply forward on your username and password. Two users, however, cannot simultaneously enter information from different computers at the same time.

*Survey Contents:* The survey is divided into the following sections:

A. Respondent contact information

B. Your TAACCCT grant

C. Local/regional context

D. Participant recruitment

E. Development of TAACCCT programs of study

F. Progress to date for TAACCCT participants

G. Partnering within and outside your institution

H. Employer relationships

I. Sustainability of programming

J. Accomplishments

*Suggested Reference Documents:* It may be necessary or helpful to have the following documents on hand while completing the survey, particularly:

* the original grant application and any modifications;
* internal planning documents; and
* performance reports and other documentation.

*Scope of Questions:* Unless otherwise indicated, survey questions all refer to TAACCCT-funded projects (including educational and training programs operated) conducted by your institution, as a Round 4 grant recipient. If your institution is the lead institution for a consortium grant, please answer questions as a college grant recipient, not as the consortium lead, unless otherwise specified. We recognize that your TAACCCT activities may be part of a larger effort by your organization but please answer the questions to the best of your ability as they are *directly* related to the TAACCCT activities.

**Section A. Respondent Contact Information**

**A1. Name of primary person completing the survey:**

**A2. Job title:**

**A3. Name of institution or organization:**

**A4. Integrated Postsecondary Education Data System (IPEDS) Number (To find your college’s IPEDS number, you may use the Department of Education’s College Navigator website:** [**http://nces.ed.gov/collegenavigator/**](http://nces.ed.gov/collegenavigator/)**)**

**A5. TAACCCT grant number:**

**A6. TAACCCT grant round:**

Select:

**A7. Part of a consortium?**

Yes

No

**A8. Lead institution of a consortium? [If A7=Yes, then show.]**

Yes

No

**A9. Contact information**

|  |  |  |
| --- | --- | --- |
| Mailing address: |  |  |
| Phone number:  Email address: | | |
| Website: |  |  |

**A10. Name, title, and organization of individual responsible for managing the grant for**

**your institution (if different than survey respondent):**

|  |  |  |
| --- | --- | --- |
| Full name: |  |  |
| Title:  Organization:  Website:  Phone number: | | |
| Email address: |  |  |

**Section B. Basic Information about Your TAACCCT Grant**

The purpose of this section is to confirm and obtain general information about the TAACCCT grant your institution is leading.

**B1. Based on TAACCCT grant documentation, your grant amount is @@CustomField004.**

CustomField004 will be auto-populated based upon grant amounts described in the proposal.

Information is correct.

Information is not correct. Enter in the correct budget

**B2. As the lead grantee institution for a consortium, what amount of the grant funding goes specifically to your institution? [If A8=yes, then show]**

This is to differentiate between the overall grant amount, and the amount going to the lead institution.

**B3. What was the dollar amount you received from your TAACCCT consortium for your grant activities? [If A7=yes and A8=no, then show]**

*(Note: Enter only the amount that your institution receives in TAACCCT funding.)*

**B4. Under your TAACCCT grant, what type of geographical area is served by your institution? Check only one.**

*(Note: If involved in a consortium, identify only the geographic area being served directly by your institution under the grant.)*

Single County

Multiple counties but not all counties within a state

All counties within a state

Multiple states

**Please identify the name of the geographical area served by your organization.**

**B5. Under your TAACCCT grant, how would you characterize the geographic areas being served by your grant. Check all that apply.**

*(Note: If involved in a consortium, identify only the geographic area being served directly by your institution under the grant.)*

Urban

Suburban

Rural

**B6. Based on your grant documentation, the period of performance for your TAACCCT grant is:**

**Begin Date (MM/DD/YYYY): @@CustomField006**

**End Date (MM/DD/YYYY): @@CustomField007**

Information is correct

Information is not correct

Custom Fields 6 and 7 will auto-populate with the original start and conclusion of the performance period.

**[If B6=Information is not correct, then the below date box will appear.]**

**The correct period of performance is:**



Begin Date (MM/DD/YYYY):

End Date (MM/DD/YYYY):

**B7. If DOL has issued a grant modification to the end date for your grant, what is the**

**new end date (MM/DD/YYYY)**



**Section C. Local/Regional Economy**

The purpose of this section is to learn about the local area or region that your grant activities serve. If you are a lead institution for a consortium, please answer these questions from the perspective of your institution only. Do not include information that pertains to your consortium partners.

**C1. Of the industry sectors listed below, which are the three with the highest employment in the service area of your TAACCCT grant?**

Drag from the list on the lift, and drop into the box on the right. Rank in order by 1, 2, 3.

Survey participants will, as the instructions say, drag the industry sectors into this box. Within the box they can drag and order.

Accommodation and Food Services

Administrative and Support and Waste Management and Remediation Services

Agriculture, Fishing, and Hunting

Arts and Recreation

Construction

Educational Services

Finance and Insurance

Health Care and Social Assistance

Information

Management of Companies and Enterprises

Manufacturing

Mining, Oil, and Gas Extraction

Real Estate and Rental and Leasing

Retail Trade

Professional and Technical Services

Public Administration

Transportation and Warehousing

Utilities

Wholesale Trade

Other Services (except Public Administration)

**C2. What is/are the focus industry/industries for your institutions’ TAACCCT grant? Check all that apply.**

Accommodation and Food Services

Administrative and Support and Waste Management and Remediation Services

Agriculture, Forestry, Fishing and Hunting

Arts, Entertainment, and Recreation

Construction

Educational Services

Finance and Insurance

Health Care and Social Assistance

Information

Management of Companies and Enterprises

Manufacturing

Mining, Quarrying, and Oil and Gas Extraction

Professional, Scientific, and Technical Services

Public Administration

Other Services (except Public Administration)

Real Estate and Rental and Leasing

Retail Trade

Transportation and Warehousing

Utilities

Wholesale Trade

Other (please specify):

**C3a. According to our records, your institution has developed or enhanced the following of programs of study under the TAACCCT grant. Is this information correct?**

**Is this your institution's program of study?**

Yes No

@@CustomField018

@@CustomField019

Through

@@CustomField036

@@CustomField037

Customfield018 through Customfield037 are auto-populated with programs of study as identified by data shared by Department of Labor. For example, if an institution had four programs of study as identified by the dataset, four lines containing the programs of study will appear.

**Were all of your programs of study listed above?**

Yes

No

**Please list all additional programs of study not listed above here: [If C3a. Were all….listed above= No, then show]**

**Program of Study**

1.

2.

Through

14.

15.

**C3b. Which programs of study did your institution develop under the TAACCCT grant?**

If no programs of study were listed with an institution within the DOL provided data, then Custom Fields 018 through 037 will be blank. To ensure While C3a asks for confirmation of programs, C3b. simply asks institutions whose data is missing to name all of their programs of study.

**Program of Study**

1.

2.

Through

19.

20.

**C4. How have employment opportunities for these occupations changed in your region since the start of your grant?**

Increased a lot

Increased somewhat

About the same

Decreased somewhat

Decreased a lot

Don't know/unsure

**C5. To what extent has the geographic area served by your TAACCCT programs been impacted by major employer plant closings/layoffs in the five years prior *to your grant*?**

Substantial effect

Some effect

Little or no effect

Don't know/unsure

**C6. To what extent has the geographic area served by your TAACCCT programs been impacted by major employer plant closings/layoffs in the year *since the start of your grant*?**

Substantial effect

Some effect

Little or no effect

Don't know/unsure

**C7. Please identify significant factors over the past three years that have influenced the design or implementation of your TAACCCT programs. Check all that apply.**

Economic recovery/expansion in the region/locality

Increase/decrease in Trade Adjustment Assistance-certified plant closings

Loss of funding/grants by your institution

Organizational/management changes or restructuring

Receipt of new funding/grants by your institution

Population/demographic changes in the region/locality

Other (please specify):

**Section D: Participant Recruitment**

The purpose of this section is to learn about how your institution recruited new participants/students for the TAACCCT-funded education and training program(s). If you are a lead institution for a consortium, please answer these questions from the perspective of your institution only. Do not include information that pertains to your consortium partners.

**D1. Which of the following groups of individuals do your institution’s TAACCCT programs actively recruit or target? Has your institution previously targeted any of these groups for similar programs of study? Check all that apply for your institution.**

*Note: Categories below are not mutually exclusive.*

Yes, actively recruits Targeted Group Previously?

Ex-offenders/court involved

Immigrants/refugees/first-generation Americans

Incumbent workers

Low skill or education

Limited English proficiency

Long-term unemployed

Low-income/disadvantaged

Minorities – racial/ethnic

New entry-level workers Older workers

People with disabilities Underemployed Unemployed/dislocated workers Unemployment insurance claimants Veterans

Workers eligible for Trade Adjustment Assistance

Women

Men

Other (please specify)

**D2. What are the enrollment requirements for non-TAA participants for your TAACCCT grant program? Check all that apply.**

High school diploma or GED

College entrance exam (such as SAT, ACT, COMPASS)

Basic skills (such as TABE, CASS, BEST)

Interview

Background check

Drug test

Aptitude test

Other:

**D3. Which of the following recruitment strategies does your TAACCCT program use? Check all that apply.**

Did not have a recruitment strategy

Direct mail campaigns

Distribution of flyers, posters or other self-produced educational/informational materials

Door-to-door outreach

In-person presentations in the community (e.g., at schools, neighborhood centers, libraries)

Informational websites

Media outreach campaigns (e.g., TV, radio, newspapers, professionally prepared ads on buses/bus shelters)

Partnerships with employers and industry associations

Referrals from community- or faith-based organizations

Referrals from the workforce system

Toll-free information hotlines

Other (please specify)

**D4. For each of the following recruitment strategies, how effective did you find each strategy for recruiting into your TAACCCT program? Rate a given strategy “effective” if you would recommend it without reservation to an operator of a similar program in the future.**

For each recruitment strategy category checked in D3, the custom field will appear below.

Effective Somewhat effective Not effective

Direct mail campaigns

Distribution of flyers, posters or other self-produced educational/informational materials

Door-to-door outreach

In-person presentations in the community (e.g., at schools, neighborhood centers, libraries)

Informational websites

Media outreach campaigns (e.g., TV, radio, newspapers, and professionally prepared ads on buses/bus shelters)

Partnerships with employers and industry associations

Referrals from community- or faith-based organizations

Referrals from the workforce system

Toll-free informational hotlines

Other (please specify)

**D5. On a scale of “A great challenge/problem” to “Not a challenge/problem at all”, do any of the following potential problems or barriers affect your recruitment or enrollment of TAACCCT participants? Check all that apply for each program.**

*(Note: If your TAACCCT programs do not have or include the specific factors listed or an “other” factor, please check the "Not applicable" box.)*

A great challenge/

problem

Somewhat of a challenge/problem

A minor challenge/problem

Not a challenge/

problem at all Not applicable

Changing economic and labor market conditions that don’t align with programs of study offered

Child care

Conflict between work and school hours

Difficulties with identifying and finding eligible participants

Insufficient referrals from partner community-based organizations

Insufficient referrals from partner employers or employer organizations

Insufficient referrals from partner(s) in the workforce system

Insufficient resources devoted to outreach and recruitment

Lack of effectiveness of selected outreach strategies

Low or inadequate basic skill levels of applicants

Negative perceptions of or a lack of interest in particular occupations by potential participants

Participants’ lack of access to reliable transportation

Tuition cost

Other (please specify)

**Section E. Development of TAACCCT Programs of Study**

This section asks about the training activities undertaken during the grant period and how these activities were structured to meet the grant’s objectives. If you are a lead institution for a consortium, please answer these questions from the perspective of your institution only. Do not include information that pertains to your consortium partners.

**E1. You listed the following programs of study for which your TAACCCT program(s) prepare participants. Please indicate whether these programs were newly introduced or were existing programs that were enhanced under the TAACCCT grant.** If a survey respondent responds yes to C3a, or provides the program of study in the follow up to 3a or to the question C3b, then the program of study names will appear below. We show only 4 of the program of study rows that would be auto-populated by the responses to C3a and C3b.

**Newly introduced program Enhanced existing program**

@@CustomField018

@@CustomField019

Through

@@064834

@@064836

**E2. Are the programs for which participants are trained part of a career pathway your institution has developed as part of the grant or did you build on an established career pathway?** If a survey respondent responds yes to C3a, or provides the program of study in the follow up to C3a or to the question D3b, then the program of study names will appear below. We show only 4 of the program of study rows that would be auto-populated by the responses to C3a and C3b.

Newly Developed Pathway Existing Pathway

@@CustomField018

@@CustomField019

Through

@@064820

@@064822

**E3. Did the programs build on efforts or use resources such as developed under previous TAACCCT grants such as curriculum, technology, transferability or articulation agreements, standardized credentials, or assessments?**

Curriculum Technology Transferability Standardized Assessments

& Articulation Credentials

Agreements

@@CustomField018

@@CustomField019

Through

@@064820

@@064822

**E4. Are the programs for which participants are trained providing credits for course completion? If yes, how many credits are awarded for each program?** If a survey respondent responds yes to C3a, or provides the program of study in the follow up to C3a or to the question C3b, then the program of study names will appear below. We show only 4 of the program of study rows that would be auto-populated by the responses to C3a and C3b.

Yes No If yes, provide number of credits:

@@CustomField018

@@CustomField019

Through

@@064820

@@064822

**E5. For which occupations (or job titles) in the TAACCCT grant is your institution developing TAACCCT-funded education and training programs?**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **List of Occupations Please provide any more specific detail here.**  1. Select:  2. Select:  3. Select:  4. Select:  5. Select:  6. Select:  7. Select:  8. Select:  9. Select:  10. Select:  11. Select:  12. Select:  13. Select:  14. Select: | | | | |
| 15. | Select: |  |  |  |

**Were you able to list all of the occupations focused on by your TAACCCT program?**

Yes

No

**[If E5. Were you….TAACCCT program = No, then the below text box will appear.]**

**Please list all remaining occupations here.**

*Separate occupations by commas.*

**E6. What credential(s) do participants receive upon completing training for each of the following programs of study?**

*Check all that apply.*

If a survey respondent responds yes to C3a, or provides the program of study in the follow up to C3a or to the question C3b, then the program of study names will appear below. We show only 4 of the program of study rows that would be auto-populated by the responses to C3a and C3b.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | | | | | | |  | |
|  | Applied Associate’s degree | Associate’s degree | Certificate of completion from college (more than one year) | Certificate of completion from college (less than one year) | Certification from an accrediting body | License from a regulating body (e.g. state agency) | None |  |  |
| @@CustomField018 |  |  |  |  |  |  |  |  |  |
| @@CustomField019 |  |  |  |  |  |  |  |  |  |
| Through |  |  |  |  |  |  |  |  |  |
| @@064828 |  |  |  |  |  |  |  |  |  |
| @@064830 |  |  |  |  |  |  |  |  |  |

**E7. Which credentials has your institution developed (or helped to develop) for your TAACCCT program(s)?**

Newly developed Adapted/enhanced based on previous credential

Certificates of completion for programs of less than one year duration

Certificates of completion for programs of one to two years duration

Academic degrees

Occupational degrees

Licenses

Professional / Industry certifications

Other credentials (Please specify):

**E8. With TAACCCT funding, has your institution implemented any new types of articulation or transfer policies or agreements? Check all that apply.**

Articulation between continued education and degree programs

New prior learning assessments that allow for credits to be counted towards program of study

New transfer policies/agreements with four-year institutions

No new types of articulation or transfer policies or agreements

Other transfer/articulation agreements (please specify)

**E9. What specific education and training approaches or strategies have been implemented under your TAACCCT-funded initiative? Check all that apply.**

Implemented Under TAACCCT-Funded Initiative

**Accelerated Learning**

Asynchronistic scheduling

Competency-based learning

Credits for prior learning or work experience

Prior learning assessments

Self-paced learning (e.g., fast-track programs)

Modular (or “chunked”) courses

Curriculum mapping

Other accelerated learning strategies (please specify)

**Career Pathways**

Design of new career pathway program

Articulation from programs to more advanced programs

Industry competency models

Development of industry-recognized credentials

Creation of stackable or latticed credentials

Other career pathway approaches (please specify)

**Technology-Enabled Learning**

Assessment technology

Hybrid learning strategies (combining traditional and online strategies)

On-line teaching/learning

Real-time on-line instruction

Simulations

Other technology-enabled learning strategies (please specify)

**Enhanced Career and Academic Support**

Contextualized learning

Team teaching

Improvements to basic skills/adult basic education

Improvements to English as a second language instruction

Restructuring of developmental education

Enhanced academic support (such as personalized instruction, tutoring)

Career coaching or counseling (e.g., career “navigators”)

Industry mentors

Peer support groups or peer mentors Other enhanced support services (please specify)

**Work-Based Learning**

DOL-approved registered apprenticeships

Clinical placements

Job shadowing

Internships

On-the-job training other than registered apprenticeship

Cooperative education or work-study program

Other work-based learning approaches (please specify)

**Other Activities**

Development of knowledge, skills, abilities, and other characteristics (KSAO)

Improvement of financial aid processes

Other preparatory classes (e.g., pre-apprenticeship, occupational boot camps)

Other activities (please specify)

**E10. In addition to education and training activities, what *existing* support services has your institution leveraged for TAACCCT participants, either within your institution or from partners? Check all that apply.**

At your institution From a partner

Child care assistance

Coordination with public assistance

Emergency assistance (e.g., rental or utility assistance)

Pell grants

Other financial aid

Financial counseling

Case management or proactive or intrusive advising

Peer support groups

Personal/family counseling

Transportation assistance

None

Other (please specify):

**E11. What *existing* career or employment services does your institution or its partners make available for TAACCCT participants? Check all that apply.**

At your institution From a partner

Employment/career counseling

Interviewing skills/résumé workshops

Job readiness/soft skills training

Job search assistance

Referrals to job openings

Job retention services

None

Other (please specify):

**F. Progress to Date for TAACCCT Participants**

This section asks about your program’s overall goals and progress to date.

**F1. In each area: What was the original goal for your TAACCCT grant activities for your institution (including all programs of study)?**

*If you are part of a consortium, only provide the original goals for your institution.*

Total unique TAACCCT participants served/enrolled

Total number of participants who have completed a TAACCCT-funded program

Total number of participants still retained in their program of study or another TAACCCT-funded program

Total number of participants completing credit hours

Total number of participants earning credentials

Total number of participants enrolled in further education after grant-funded program of study completion

Total number of participants employed after grant-funded program of study completion

Total number of participants retained in employment after program of study completion

Total number of those participants employed at enrollment (for purposes of this reporting, “incumbent workers”) who receive a wage increase post-enrollment.

**F2. In each area: What is your institution's progress as of [INSERT DATE] for your TAACCCT grant activities (including all programs of study)?**

*If you are part of a consortium, only provide the original goals for your institution.*

Total unique TAACCCT participants served/enrolled

Total number of participants who have completed a TAACCCT-funded program

Total number of participants still retained in their program of study or another TAACCCT-funded program

Total number of participants completing credit hours

Total number of participants earning credentials

Total number of participants enrolled in further education after grant-funded program of study completion

Total number of participants employed after grant-funded program of study completion

Total number of participants retained in employment after program of study completion

Total number of those participants employed at enrollment (for purposes of this reporting, “incumbent workers”) who receive a wage increase post-enrollment.

**Section G. Partnering with Within and Outside Institution**

This section includes questions about the partners engaged in TAACCCT activities and their roles. If you are a lead institution for a consortium, please answer these questions from the perspective of your institution only. Do not include information that pertains to your consortium partners.

**G1. With which departments or offices in your institution have you developed new or expanded existing partnerships with for the TAACCCT grant?**

|  |  |
| --- | --- |
|  | Developed new partnership Expanded current partnership Partnership unchanged No partnership |
| Adult education/remedial education services |  |
| Career services |  |
| College administration |  |
| Financial aid |  |
| Information technology/computer services |  |
| Student support services |  |
| Tutoring/academic support centers |  |
| Other academic departments |  |
| Other workforce/career and technical education departments |  |
| Other (specify) |  |

**G2. What resources and/or services did departments or offices in your institution provide to TAACCCT participants?**

Academic support and tutoring

Access/referral to support services

Assistance with tuition waivers

Career navigation and information

Counseling on program selection/enrollment

Curriculum development (course specify instructional design and content)

Development of articulation agreements

Development of prior learning assessments

Enrollment processes

Financial counseling and aid

Leadership/oversight

Job search assistance

Program development (e.g., career pathways, course sequencing, modularization of courses, incorporation of technology-enabled tools, internships)

Purchase and operation of technology, equipment, or other learning tools

Remediation

Testing for college readiness

Student recruitment/outreach

Other (please specify):

**G3. On a scale of 1 to 5, with 1 being *definitely not* and 5 being *definitely will*, which services** developed specifically for the TAACCCT grant **are likely to continue after the end of the grant?**

1 Will not continue 2 Not likely to continue 3 Unsure 4 Likely to continue 5 Will continue

Adult education/remedial education services

Career services

Financial aid

Information technology/computer services

Student support services

Tutoring/academic support centers

Other academic departments

Other workforce/career and technical education programs

Other (please specify):

**G4. Of the services that you identified will continue, will these services continue at the same, reduced, or greater intensity than under the TAACCCT grant? (Programmer: populate those selected as “will continue” from G3 for the respondent to make selection among the following)**

Same intensity Reduced intensity Greater intensity

(Prepopulated list)

**G5. With what types of organizations external to your institution have you developed new or enhanced current partnerships during your TAACCCT grant? Check all that apply.**

Developed new partnership Enhanced current partnership Partnership unchanged No partnership

Career or job centers (other than American Job Centers; One-Stops)

Community or technical colleges other than those in your consortium (if applicable)

Community-based organizations or other social services agencies

Economic development organizations

Faith-based organizations

Industry associations, employers, or chambers of commerce

Local government

Local workforce development boards (LWDB)/ American Job Centers

Philanthropic community

(e.g., foundations)

School districts (K-12)

Seed and venture capital organizations or individuals, investor networks, or entrepreneurs

State government agencies

Unions

Universities or other four- year institutions

Vocational or trade schools

State workforce development boards

Other (please specify):

**G6. What resources and/or services does (did) the public workforce system (e.g. through American Job Centers/One-Stops) provide to your TAACCCT activities? Check all that apply.**

Access to financial support for participants (e.g., Individual Training Accounts)

Career or skill assessments

Advisory committee/steering committee participation

Connections to employers or industry associations

Curriculum development

Direct funding/training contracts

Internships or other work experience activities

Job placement services

Job readiness/soft skills training

Mentoring

Operation of training activities

Referral to or assistance developing registered apprenticeships

Referrals to your institution’s TAACCCT programs

TAA program services (e.g. case management)

Use of facilities (e.g., space for training activities, meetings with employers, job fairs)

Use of staff as counselors/navigators

None

Other (please specify):

**G7. What resources do employers or industry associations provide to the TAACCCT activities? Check all that apply.**

Advisory committee/steering committee participation

Apprenticeships

Curriculum development

Financial resources for students

Equipment or space donated

Instructors

Internships/clinical placements

Interviews of program graduates

Job shadowing opportunities

Mentoring

Operation of training programs

Paid time for incumbent workers in training

Referrals of employees to your training program

Referrals of individuals outside partner organization to your training program

Support services

Use of facilities

Use of staff/employees as instructors

None

Other (please specify):

**G8. What roles do organizations other than consortium partners (if any) play in the implementation of the project? Check all that apply.**

Advisory committee/steering committee participation

Curriculum development

Financial resources for students

Internships/clinical placements

Mentoring

Operation of training programs

Referrals of participants to your TAACCCT program

Support services

Use of facilities

Use of staff/employees as instructors

None

Other (please specify):

**G9. On a scale of 1 to 5, with 1 being *definitely not* and 5 being *definitely will*, which partnerships are likely to continue after the end of the grant?**

[**If G4 element =/ No partnership, then show**]

Only types of partnerships listed by the survey respondent will appear here.

Definitely will not

continue 1 Not likely to continue 2 Unsure 3 Likely to continue 4 Definitely will continue 5

Career or job centers (other than American Job Centers)

Community or technical colleges other than

those in your consortium

(if applicable)

Community-based organizations or other social services agencies

Economic development organizations

Faith-based organizations

Industry associations, employers, or chambers of commerce

Local government

Local workforce development boards/American Job Centers

Philanthropic community

(e.g., foundations) School districts

Seed and venture capital organizations or individuals, investor networks, or entrepreneurs

State government agencies

Unions

Universities or other four-year colleges

Vocational or trade schools

State workforce development boards

**G10. To date, how successful has your institution been in working with partners? Rate all that apply.**

|  |  |
| --- | --- |
|  | Not at all Somewhat  successful A little successful successful Very successful Too soon to tell Not applicable |
| Accessing planned leveraged resources |  |
| Engaging partners throughout the grant period |  |
| Communicating with partners |  |
| Working with partners while making program changes |  |
| Other (please specify): |  |

**G11. In your opinion, how successful has your program been in supporting and in strengthening partnerships with the following institutions?**

*If your TAACCCT grant program does not have experience in the listed dimensions or an “other” dimension, please check the "Not applicable" box.*

Not at all

successful A little successful

Somewhat

successful Very successful Too soon to tell Not applicable

Secondary schools (high schools)

Institutions of higher education (four-year colleges and universities, community and technical colleges

Other training providers (community-based organizations, trade schools, etc.)

Employers or industry associations

Public workforce system

Other organizations:

**Section H. Employer Relationships**

This section asks about your relationships with your employer partners, an important component of the Round 4 TAACCCT grants. Here, we ask you to identify up to five employer partners with which you have the strongest relationships. We ask you to use employers’ names here to help populate a series of questions to understand how you partnered with each of them. We may follow up with you at a later date to further explore your relationships with employers.

If you are a lead institution for a consortium, please answer these questions from the perspective of your institution only. Do not include information that pertains to your consortium partners.

**H1. Who are the employer partners for your TAACCCT project with whom you believe you have the strongest relationships? You may list *up to five employers* by their company or organizational name. Your responses here will be used to populate the questions below.**

|  |  |
| --- | --- |
| 1 | [Name of First Company or Organizational Partner] |
| 2 | [Name of Second Company or Organizational Partner] |
| 3 | [Name of Third Company or Organizational Partner] |
| 4 | [Name of Fourth Company or Organizational Partner] |
| 5 | [Name of Fifth Company or Organizational Partner] |

H2. Which of these employer partners did you have a relationship with prior to your TAACCCT-funded project? Check all employer partners with which you had a previous relationship.

* [Company or Organization #1]
* [Company or Organization #2]
* [Company or Organization #3]
* [Company or Organization #4]
* [Company or Organization #5]

**H3. Was this earlier partnership for another TAACCCT-funded project or other workforce training program or initiative the college was involved in, or both?**

Populate with employer partners based on answer to H2.

Part of another Part of another workforce

TAACCCT grant training program or initiative

[Company or Organization #1]

[Company or Organization #2]

[Company or Organization #3]

[Company or Organization #4]

[Company or Organization #5]

**H4. Which of your employer partners have sent their employees to your TAACCCT-funded project to learn new or upgrade their current skills?**

* [Company or Organization #1]
* [Company or Organization #2]
* [Company or Organization #3]
* [Company or Organization #4]
* [Company or Organization #5]

**H5. Which if your employer partners have hired (or intend to hire) TAACCCT participants that were not already their employees?**

* [Company or Organization #1]
* [Company or Organization #2]
* [Company or Organization #3]
* [Company or Organization #4]
* [Company or Organization #5]

**H6. For each of your employer partners, what types of activities have they participated in for your TAACCCT-funded project? Check all that apply.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | [Company or Organization #1] | [Company or Organization #2] | [Company or Organization #3] | [Company or Organization #4] | [Company or Organization #5] |
| Helping implement program strategies and goals | ○ | ○ | ○ | ○ | ○ |
| Developing the overall program design(s) | ○ | ○ | ○ | ○ | ○ |
| Identifying and mapping the necessary skills and competencies for the program(s) | ○ | ○ | ○ | ○ | ○ |
| Assisting with curriculum development and designing education/training program(s) | ○ | ○ | ○ | ○ | ○ |
| Assisting with the design of an assessment or credential that will address industry skill needs | ○ | ○ | ○ | ○ | ○ |
| Developing industry-recognized credentials needed for targeted jobs | ○ | ○ | ○ | ○ | ○ |
| Providing resources to support education/ training (e.g., equipment, facilities, and instructors) | ○ | ○ | ○ | ○ | ○ |
| Speaking to TAACCCT participants or engage in other activities such as job fairs or facility tours to increase awareness of career opportunities | ○ | ○ | ○ | ○ | ○ |
| Providing support to TAACCCT participants (e.g., scholarships, tuition assistance, time off from work) | ○ | ○ | ○ | ○ | ○ |
| Committing to hire, promote, and/or retain qualified TAACCCT participants | ○ | ○ | ○ | ○ | ○ |
| Providing rigorous work-based training opportunities (e.g., apprenticeship, internships, on-the-job training) to TAACCCT participants | ○ | ○ | ○ | ○ | ○ |
| Other (Please specify) | ○ | ○ | ○ | ○ | ○ |

**H7. To what degree do your employer partners play the following roles on your TAACCCT-funded project? On a scale of 1 to 5 (with “1” being does not play this role at all and “5” being is highly active in playing this role), please indicate the degree to which each employer partner played these roles.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | [Company or Organization #1] | [Company or Organization #2] | [Company or Organization #3] | [Company or Organization #4] | [Company or Organization #5] |
| ***Advising***  Examples: discusses hiring needs, skills, and competencies with college; advises on or reviews curricula; hires graduates) |  |  |  |  |  |
| ***Capacity building***  Examples: provides job site tours, speakers, mock interviews, internships, needs assessment to TAACCCT participants; loans or donates equipment and facilities; helps to recruit TAACCCT participants |  |  |  |  |  |
| ***Co-designing***  Examples:Works closely with college staff to develop curricula and college and career pathways; has employees serving as adjunct faculty and preceptors for work-based learning opportunities for TAACCCT participants |  |  |  |  |  |
| ***Convening***  Examples: Participates in a college-employer sectoral partnership; serves as a trusted provider and collaborator to the college |  |  |  |  |  |
| ***Leading*** Examples:takes on a leadership role for a multi-employer/ multi-college partnership; serves as full strategic partner to the college |  |  |  |  |  |

**H8. Is there anything else that would be important to know about your relationships with employers for your TAACCCT-funded programs?**

**Section I. Sustainability of Programming**

This section asks about the efforts underway to continue your TAACCCT-funded activities after the end of the grant period. If you are a lead institution for a consortium, please answer these questions from the perspective of your institution only. Do not include information that pertains to your consortium partners.

**I1. Which of your grant-funded programs of study do you plan to continue operating (have you continued operating) after the end of the TAACCCT grant period?**

If a survey respondent responds yes to C3a, or provides the program of study in the follow up to C3a or to the question C3b, then the program of study names will appear below. We show only 4 of the program of study rows that would be auto-populated by the responses to C3a and C3b.

Yes No Unknown

@@CustomField018

@@CustomField019

Through

@@064820

@@064822

**I2. What aspects or elements of your TAACCCT programs will you maintain after the grant ends?**

**[If E9 element = Implemented Under TAACCCT-Funded Initiative, then show**]

Only elements which the survey responded selected Yes to in question E9 will appear here.

**Program element**

Yes No Do not know

**Accelerated Learning**

Asynchronistic scheduling

Competency-based learning

Credits for prior learning or work experience

Prior learning assessments

Self-paced learning (e.g., fast-track programs)

Modular or “chunked” courses

Curriculum mapping

Other accelerated learning strategies (please specify)

**Career Pathways**

Design of new career pathway program

Articulation from programs to more advanced programs

Industry competency models

Development of industry-recognized credentials

Creation of stackable or latticed credentials

Other career pathway approaches (please specify)

**Technology-Enabled Learning**

Assessment technology

Hybrid learning strategies (combining traditional and online strategies)

On-line teaching/learning

Real-time on-line instruction

Simulations

Other technology-enabled learning strategies (please specify)

**Enhanced Career and Academic Support**

Contextualized learning

Team teaching

Improvements to basic skills/adult basic education

Improvements to English as a second language instruction

Restructuring of developmental education

Enhanced academic support (such as personalized instruction, tutoring)

Career coaching or counseling (e.g., career “navigators”)

Industry mentors

Peer support groups or peer mentors Other enhanced support services (please specify)

**Work-Based Learning**

DOL-approved registered apprenticeships

Clinical placements

Job shadowing

Internships

On-the-job training other than registered apprenticeship

Cooperative education or work-study program

Other work-based learning approaches (please specify)

**Other Activities**

Development of knowledge, skills, abilities, and other characteristics (KSAO)

Improvement of financial aid processes

Other preparatory classes (e.g., pre-apprenticeship, occupational boot camps)

Other activities (please specify

**I3. What are the major challenges to sustaining your TAACCCT funded training activities after the TAACCCT grant ends?**

Changes in the industry of focus

Insufficient funding

Insufficient partner support

Lack of potential participants/students

Staff time/experience in fundraising

No major challenges

Other, please specify:

**I4. What specific role will the public workforce system (workforce development boards and American Job Centers/One-Stops) play in sustaining programming after the TAACCCT grant ends? Check all that apply.**

Access to financial support for participants (e.g., Individual Training Accounts)

Access to support services

Career or skill assessments

Advisory committee/steering committee participation

Connections to employers or industry associations

Curriculum development

Direct funding/training contracts

Internships or other work experience activities

Job placement services

Job readiness/soft skills training

Mentoring

Operation of training activities

Referral to or assistance developing registered apprenticeships

Referrals to your institution’s TAACCCT programs

TAA program services (e.g. case management)

TAA training

Use of facilities (e.g. space for training activities, meetings with employers, or job fairs)

Use of staff as counselors/navigators

None

Other, please specify:

**I5. What specific role will (are) employer or industry association partners play (playing) in sustaining programming after the TAACCCT grant ends? Check all that apply.**

Advisory committee/steering committee participation

Apprenticeships

Curriculum development

Financial resources for students

Hiring of graduates

Internships/clinical placements

Interviews of program graduates

Job shadowing opportunities

Mentoring

Operation of training programs

Paid time for incumbent workers in training, or other incentives to workers for training

Referrals of employees to your training program

Referrals of individuals outside partner organization to your training program

Support services

Use of facilities

Use of staff/employees as instructors

None

Other, please specify:

**I6. What specific role will (are) other partner organizations play (playing) in sustaining programming after the TAACCCT grant ends? Check all that apply.**

Advisory committee/steering committee participation

Curriculum development

Financial resources for students

Internships/clinical placements

Mentoring

Operation of training programs

Referrals of participants to your TAACCCT program

Support services

Use of facilities

Use of staff/employees as instructors

None

Other, please specify:

**Section J. Accomplishments**

If you are a lead institution for a consortium, please answer these questions from the perspective of your institution only. Do not include information that pertains to your consortium partners.

**J1. In your opinion, what were the greatest accomplishments of your program?**

*(Please list. Examples include, but are not limited to: development and operation of programs of study, internal and external partnerships, student support services, coordination with other colleges, third party evaluations, etc.)*

1st.

2nd.

3rd.

**J2. What were the biggest challenges and/or obstacles that your organization encountered as you tried to accomplish goals?**

*(Please list. Examples include, but are not limited to: development and operation of programs of study, internal and external partnerships, student support services, coordination with other colleges, third party evaluations, etc.)*

1st.

2nd.

3rd.

**Please feel free to share anything else we may not have asked you about.**

**Thank you for taking the time to complete this survey!**