

# Adult Training and Education Survey

## Part of the 2019 National Household Education Survey



Administered by

UNITED STATES DEPARTMENT OF COMMERCE  
Economics and Statistics Administration  
U.S. Census Bureau



**NHES-ATES**  
(xx/xx/xxxx)

# Instructions

- ♦ **In response to the survey you answered earlier, we recorded that the person listed below is between the ages of 16 to 65, is not in high school, and lives in this household. If this information is not correct, please call us toll-free at 1-888-xxx-xxxx to let us know.**
- ♦ **These questions should be filled out by:**

**No one else in the household should fill out the survey.**

- ♦ **To answer a question, simply mark the box [X] that best represents your answer.**
- ♦ **Use a black or blue pen, if available, to complete this survey.**
- ♦ **Please return the completed survey using the postage-paid envelope provided.**

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The National Center for Education Statistics (NCES), within the U.S. Department of Education, is authorized to conduct this study by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543). The U.S. Census Bureau is administering this survey on behalf of NCES. You do not have to provide the information requested. However, the information you provide will help the Department of Education's ongoing efforts to learn more about the educational experiences of children and families. There are no penalties should you choose not to participate in this study. All of the information you provide may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (20 U.S.C. §9573 and 6 U.S.C. §151). Your responses will be combined with those from other participants to produce summary statistics and reports.

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 voluntary survey is xxxx-xxxx. The time required to complete this survey is estimated to average 10 minutes per response, including the time to review instructions, gather the data needed, and complete and review the survey. If you have any comments concerning the accuracy of the time estimate, suggestions for improving this survey, or any comments or concerns regarding the status of your individual submission of this survey, please write to: National Household Education Survey, National Center for Education Statistics, Potomac Center Plaza, 550 12th St., SW, 4th floor, Washington, DC 20202. Do not return the completed form to this address.

## Education

### 1. What is the highest degree or level of school you have COMPLETED?

Mark [X] ONE only.

- ☐ Elementary or high school, but no high school diploma or GED®
- ☐ High school diploma
- ☐ GED® or alternative high school credential
- ☐ Some college credit but less than one year of college credit
- ☐ 1 or more years of college credit, no degree
- ☐ Associate's degree (for example, AA, AS)
- ☐ Bachelor's degree (for example, BA, BS)
- ☐ Master's degree (for example, MA, MS, MEng, MEd, MSW, MBA)
- ☐ Professional degree beyond a bachelor's degree (for example, MD, DDS, DVM, LLB, JD)
- ☐ Doctorate degree (for example, PhD, EdD)

### 2. Which ONE of the following best describes the field of study for the highest level of school you have completed?

Mark [X] ONE only.

If there was more than one, please choose the one you consider most important.

- ☐ General studies, no major, or undeclared major
- ☐ Accounting, finance, insurance, or real estate
- ☐ Administrative support
- ☐ Broadcasting, multimedia, or graphic technologies
- ☐ Business management, administration, or marketing
- ☐ Communications or journalism
- ☐ Computer science or information technology
- ☐ Construction, manufacturing, or production
- ☐ Cosmetology
- ☐ Education
- ☐ Engineering or architecture
- ☐ English language or literature
- ☐ Fine arts or music
- ☐ Healthcare
- ☐ Law or legal studies
- ☐ Law enforcement, security, or firefighting
- ☐ Liberal arts
- ☐ Psychology
- ☐ Religious vocations or theology
- ☐ Science or mathematics
- ☐ Social or human services or public administration
- ☐ Social sciences, political science, economics, or history
- ☐ Transportation
- ☐ Other — Specify: 

## Certifications and Licenses

3. Do you have a **CURRENTLY ACTIVE** professional certification or a state or industry license? Do **NOT** include business licenses, such as a liquor license or vending license.

A professional certification or license shows you are qualified to perform a specific job and includes things like licensed realtor, certified medical assistant, certified teacher, or an IT certification.



- ☐ Yes  
☐ No

**GO TO question 24**

4. If yes, how many **CURRENTLY ACTIVE** certifications and licenses do you have?

Count each separately.

 

number of certifications and licenses

5. The next few questions ask about the certification or license that you consider to be your most important. What is the name of your **MOST IMPORTANT** certification or license?

6. What kind of work is your most important certification or license for?

7. Is your most important certification or license required by a federal, state, or local government agency (such as a state board) in order to do that kind of work?

- ☐ Yes  
☐ No

8. Is your most important certification or license for your current job?

- ☐ Yes  
☐ No  
☐ I am not currently working

9. In the process of getting your most important certification or license, did you do any of the following?

Mark [X] ONE box for EACH ITEM below.

|                                                                                            | No                       | Yes                      |
|--------------------------------------------------------------------------------------------|--------------------------|--------------------------|
|                                                                                            | ▼                        | ▼                        |
| a. Take classes related to this field of work during high school?.....                     | <input type="checkbox"/> | <input type="checkbox"/> |
| b. Take classes from a college, technical school, or trade school?.....                    | <input type="checkbox"/> | <input type="checkbox"/> |
| c. Take classes or training from a company, association, or other organization?.....       | <input type="checkbox"/> | <input type="checkbox"/> |
| d. Earn a certificate or degree program from a college, technical school, or trade school? | <input type="checkbox"/> | <input type="checkbox"/> |
| e. Participate in an internship, practicum, clerkship, externship, or apprenticeship?..... | <input type="checkbox"/> | <input type="checkbox"/> |

10. Did you prepare for your most important certification or license through a FREE state or city program?

- ☐ Yes
- ☐ No

11. How useful has your most important certification or license been for each of the following?

**a. Getting a job**

- ☐ Very useful
- ☐ Somewhat useful
- ☐ Not useful
- ☐ Too soon to tell

**b. Increasing your pay**

- ☐ Very useful
- ☐ Somewhat useful
- ☐ Not useful
- ☐ Too soon to tell

**c. Keeping you marketable to employers or clients**

- ☐ Very useful
- ☐ Somewhat useful
- ☐ Not useful
- ☐ Too soon to tell

**d. Improving your work skills**

- ☐ Very useful
- ☐ Somewhat useful
- ☐ Not useful
- ☐ Too soon to tell

12. Do you have a second CURRENTLY ACTIVE certification or license?



- ☐ Yes
- ☐ No



**GO TO question 24**

13. We have some questions about your SECOND-MOST-IMPORTANT certification or license. Is your second-most-important certification or license the same as your most important one, but in a different state?

- ☐ Yes
- ☐ No



**GO TO question 17**

14. What is the name of your SECOND-MOST-IMPORTANT certification or license?

15. What kind of work is your second-most-important certification or license for?

16. Is your second-most-important certification or license required by a federal, state, or local government agency (such as a state board) in order to do that kind of work?

- ☐ Yes
- ☐ No
- ☐ Don't know

17. Is your second-most-important certification or license for your current job?

- ☐ Yes
- ☐ No
- ☐ I am not currently working

18. Do you have a third CURRENTLY ACTIVE certification or license?

☐ Yes

☐ No

GO TO question 24

19. We have some questions about your THIRD-MOST-IMPORTANT certification or license. Is your third-most important certification or license the same as your most important one or second most important one, but in a different state?

Mark [X] ALL that apply.

☐ Yes, same as my most important certification or license, but in a different state

GO TO question 23

☐ Yes, same as my second-most important certification or license, but in a different state

GO TO question 23

☐ No

20. What is the name of your THIRD-MOST-IMPORTANT certification or license?

21. What kind of work is your third-most-important certification or license for?

22. Is your third-most-important certification or license required by a federal, state, or local government agency (such as a state board) in order to do that kind of work?

☐ Yes

☐ No

☐ Don't know

23. Is your third-most-important certification or license for your current job?

☐ Yes

☐ No

☐ I am not currently working

## Preparation for New Certifications and Licenses

24. Are you currently working on RENEWING a professional certification or license?

☐ Yes

☐ No

25. Are you currently working on getting a NEW professional certification or license?

☐ Yes

☐ No

GO TO question 30

26. What is the name of the MOST IMPORTANT new certification or license that you are working on?

27. What kind of work is this certification or license for?

28. Is this certification or license required by a federal, state, or local government agency (such as a state board) in order to do that kind of work?

☐ Yes

☐ No

29. In preparing for your MOST IMPORTANT new certification or license, are you currently participating in or have participated in any of the following activities?

Mark [X] ALL that apply.

- ☐ Taking a class from a college, university, technical school, or trade school
- ☐ Taking a class from a company, association, or other organization
- ☐ Earning a certificate or degree from a college, technical school, or trade school
- ☐ Participating in an internship, practicum, clerkship, externship, apprenticeship, or similar program
- ☐ Studying on my own
- ☐ Working in the field

## Employment

30. Are you currently employed for pay at a job or business?

If you are temporarily absent from a job or business (on vacation, temporarily ill, on maternity leave, etc.), answer "Yes."



☐ Yes

☐ No



**GO TO question 34**

31. How many jobs do you have?

number of jobs

32. Do you work at a full-time job (a job where you usually work 35 hours or more per week)?

☐ Yes

☐ No

33. Do you work at a part-time job (a job where you usually work fewer than 35 hours per week)?

☐ Yes

☐ No



**GO TO question 35**

34. During the LAST 4 WEEKS, have you been ACTIVELY looking for work?

☐ Yes

☐ No



**GO TO question 36**

35. The next series of questions is about the type of employment you have.

If you have more than one job, describe the one at which you work the most hours

a. Which one of the following best describes your current employment?

**PRIVATE SECTOR EMPLOYEE**

- ☐ **For-profit** company or organization
- ☐ **Non-profit** organization (including tax-exempt and charitable organizations)

**GOVERNMENT EMPLOYEE**

- ☐ **Local government** (for example: city or county school district)
- ☐ **State government** (including state colleges/universities)
- ☐ **Active duty** U.S. Armed Forces or Commissioned Corps
- ☐ **Federal government** civilian employee

**SELF-EMPLOYED OR OTHER**

- ☐ **Owner of** business, professional practice, or farm
- ☐ Work **without pay** in a **for-profit** family business or farm for 15 hours or more per week

b. What is the name of your employer, business, agency, or branch of the Armed Forces?

c. What kind of business or industry is this?

Include the main activity, product, or service provided at the location where employed. (For example: elementary school, residential construction)

d. What is your main occupation? (For example: 4th grade teacher, entry level plumber)

e. Describe your most important activities or duties (For example: instruct and evaluate students and create lesson plans, assemble and install pipe sections and review building plans for work details)

**36.** The U.S. Department of Education is also interested in learning about the child care provider workforce. These next two questions ask about adults who watch children in a home.

**Do you spend 5 or more hours each week IN YOUR HOME looking after any children under age 13 who are not your own?**



☐ Yes

☐ No



**GO TO the end of the survey**

**37. Are you paid for watching those children?**

☐ Yes

☐ No

## **Thank You.**

*Please return this questionnaire in the postage -paid envelope provided. If you have lost the envelope, mail the completed questionnaire to:*

**National Household Education Survey  
[RETURN ADDRESS HERE]**

## **Commonly Asked Questions**

### **Q: How was my household chosen?**

A: Your address was randomly selected from among all of the home addresses in the nation. It was selected using scientific sampling methods to represent other U.S. households. The sample was designed so that surveys of only a few thousand people will accurately describe the educational experiences of almost all Americans.

### **Q: Why should I participate? Do I have to do this?**

A: Your answers are very important to the success of this study. You represent thousands of other adults like yourself, and you cannot be replaced. This survey is voluntary. You may choose not to answer any or all questions in this survey, but in order for the survey to be representative, it is important that you complete and return it. Those who do not return the survey will not be represented in statistics used by policymakers and researchers. There are no penalties should you choose not to participate in the study.

### **Q: Will the information I provide be kept confidential? Will my privacy be protected?**

A: Your responses will be combined with those from other adults to produce statistical summaries about education and training in the United States. Your individual data will not be reported. All of the information you provide may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (20 U.S.C. §9573 and 6 U.S.C. §151).

### **Q: How will my response help the Federal Government?**

A: The U.S. Departments of Education and Labor want to understand how adults acquire and maintain the skills they need for work. This survey is the only way these Departments can learn about the education and training that adults receive from schools, employers, and other training sponsors. The survey will allow policymakers and researchers to better understand the demand for education and training programs, and can help direct national policy in these areas. Your responses will be combined with those from other households to inform educators, policymakers, and schools about how adults in the U.S. learn the skills needed for work.

### **Q: Who is conducting this study?**

A: The National Center for Education Statistics (NCES), within the U.S. Department of Education, is authorized to conduct this study by the Education Sciences Reform Act of 2002 (ESRA 2002, 20 U.S.C. §9543). The U.S. Census Bureau is administering this survey on behalf of NCES. This study has been approved by the Office of Management and Budget (OMB), the office that reviews all federally sponsored surveys.

### **Q: What if I have other questions?**

A: If you have any questions about the study, you may send e-mail to [xxxx@census.gov](mailto:xxxx@census.gov) or you may call the Census Bureau toll-free at 1-800-xxx-xxxx