

American Apprenticeship Initiative (AAI) Evaluation Participant Survey
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Section 0. Background Prior to Apprenticeship

The first set of questions verifies your identity and covers basic information on your apprenticeship program.

0.a.1 Is your name, [FIRST AND LAST NAME]?

1. Yes [SKIP TO 0.a.2]
2. No [READ THANK YOU]

THANK YOU. It looks like I may not be speaking to the person I intended to reach. Thank you for your time.

0.a.2 Please select the most accurate description of your current status with your apprenticeship program:

[READ, SINGLE RESPONSE]

- ₁ Currently registered as an apprentice
- ₂ Completed the apprenticeship program
- ₃ Employer or sponsor ended my apprenticeship
- ₄ I left the apprenticeship before completing
- ₅ I never enrolled in an apprenticeship

[IF 0.a.2= 5, “I have never enrolled in an apprenticeship” ASK 0.a.3, ELSE SKIP TO 0.a.4.]

0.a.3 Did you ever receive classroom training, on the job training, employment, or other services at [EMPLOYER NAME]/ your current employer?

- ₁ YES [GO TO 0.a.3.b]
- ₂ NO [READ DISCONTINUATION TEXT AND END]

0.a.3.b Since you received these services, for the purpose of this survey, we will consider these services as your apprenticeship program. Please select the most accurate description of your current status with your apprenticeship program:

[READ, SINGLE RESPONSE]

- ₁ Currently registered as an apprentice
- ₂ Completed the apprenticeship program
- ₃ Employer or sponsor ended my apprenticeship
- ₄ I left the apprenticeship before completing

[GO TO 0.a.4]

DISCONTINUE. “It looks like our information is not correct and you may not have enrolled in an apprenticeship program. Since, this is a survey for people who have enrolled in an apprenticeship program, you will not be able to complete the survey. Thank you for your time.”

[INTERVIEWER NOTE: FOR THE REMAINING ITEMS IN THIS SECTION, USE PRESENT TENSE IF 0.a.2 = 1, “Currently registered as an apprentice,” OTHERWISE USE PAST TENSE.]

0.a.4 What [is/was] the name of the employer of your apprenticeship program?

0.a.5 In what occupation [is/was] your apprenticeship training?

[NOTE: QUESTION 0.A.5 WILL BE A DROP-DOWN MENU FOR RESPONDENTS TO SELECT AMONG THE OCCUPATIONS OFFERED BY THEIR GRANTEE

0.a.6 How long [have you been/were you] in the apprenticeship program?

[RECORD IN YEARS AND MONTHS]

___ Years ___ Months

[IF 0.a.2= 2, “Completed the apprenticeship program,” SKIP TO 1.a.1 ELSE CONTINUE.]

0.a.7 How many months (or years) [do/did] you have left to complete your apprenticeship program?

[RECORD IN YEARS AND MONTHS]

___ Years ___ Months

Section 1. Background Prior to Apprenticeship

Topic 1.a. Recruitment into Apprenticeship

The next set of questions are about how you learned about apprenticeships and your motivation for choosing an apprenticeship program.

1.a.1 How much did you know about apprenticeship before you heard about the apprenticeship opportunity with [NAME OF EMPLOYER FROM 0.A.4]?

- | | | |
|-------------|--------------------------|-------------------|
| QUITE A BIT | <input type="checkbox"/> | 1 |
| SOME | <input type="checkbox"/> | 2 |
| VERY LITTLE | <input type="checkbox"/> | 3 |
| NONE | <input type="checkbox"/> | 4 (SKIP TO 1.a.3) |

1.a.2 How did you learn about this apprenticeship opportunity with [NAME OF EMPLOYER FROM 0.A.4]?

- 1 RECRUITER
 - 2 JOB POSTING, ONLINE (e.g., LinkedIn, Monster, CareerBuilder) [SKIP to 1.b.1]
 - 3 JOB POSTING, PRINTED [SKIP to 1.b.1]
 - 4 FRIEND OR ACQUAINTANCE [SKIP to 1.b.1]
 - 5 THROUGH MY SCHOOL / COLLEGE [SKIP to 1.b.1]
 - 6 THROUGH MY MILITARY BASE / MILITARY JOB [SKIP to 1.b.1]
 - 7 THROUGH MY CIVILIAN EMPLOYER AT THE TIME [SKIP to 1.b.1]
 - 8 EMPLOYMENT SERVICE OFFICE / AMERICAN JOB CENTER [SKIP to 1.b.1]
 - 9 OTHER, SPECIFY: [SKIP to 1.b.1]
-

1.a.3 Were you working for [NAME OF EMPLOYER FROM 0.A.4] before starting the apprenticeship?

- | | | |
|-----|--------------------------|---|
| YES | <input type="checkbox"/> | 1 |
| NO | <input type="checkbox"/> | 2 |

Topic 1.b. Motivation to choose apprenticeship rather than other type of educational or employment option

1.b.1 How important were each of the following considerations in your decision to become an apprentice, rather than pursue other employment or education options?

(READ EACH ITEM FOLLOWED BY ANSWER CATEGORIES)

	Most important	Of secondary importance	OR Least important or not important
a. I could earn while I learned	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
b. I could train for an occupation with high earning potential	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
c. I was confident that the skills and credentials I gained would be valued by employers	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
d. I could avoid student debt	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
e. I would have a concrete job opportunity after completing training	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
g. I could train for a career, not just a job	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

1.b.2 How much of a concern were the factors below when you were considering whether or not to become an apprentice?

(READ EACH ITEM FOLLOWED BY ANSWER CATEGORIES)

	a Strong concern	Moderate concern	OR Not a concern
a. Having to take time for training, rather than getting right to work	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
b. The difficulty of the classroom training	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
c. The difficulty of the on-the-job training	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
d. Committing so strongly to a single career path	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
e. Unsure if I would like the work	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃
f. Unsure what the experience would be like	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃

Topic 1.c. Past experiences in labor market

The next set of questions ask about your employment experience before you began your apprenticeship. If you were working for the same employer before your apprenticeship as during your apprenticeship, please use that job, even if your job title did not change after your apprenticeship began.

1.c.1 Which of the following best describes your employment status immediately before you started your apprenticeship?

(READ LIST; SINGLE MENTION)

- Employed in the military ₁
- Employed as a civilian, one job ₂
- Employed as a civilian, multiple jobs ₃
- Not working for pay, and actively searching for a job ₄[SKIP TO 1.c.3]
- Not working for pay, not actively searching for a job ₅[SKIP TO 1.c.3]

1.c.2 [IF EMPLOYED (1.c.1 = 1,2,3)]

How many hours per week on average did you work? (include all jobs)

___ ___ HOURS / WEEK

[SKIP TO 1.c.6]

1.c.3 [IF 1.c.1=NOT WORKING FOR PAY (1.c.1 = 4,5)]

Had you worked for pay previously?

- YES
- NO (SKIP TO 1.d.1)

1.c.4 How many hours per week on average did you work in your most recent job before the apprenticeship? (Include all jobs)

___ ___ HOURS / WEEK

1.c.5 Before starting the apprenticeship, how many months had it been since you last worked for pay? (Round to the nearest number of months. If less than half a month, enter "0")

___ ___ MONTHS

1.c.6 About how much did you typically earn per hour before taxes in your most recent job before starting this apprenticeship? (Answer for your main job if more than one)

\$ ___ ___ . ___ ___ PER HOUR IN CURRENT/MOST RECENT JOB (SKIP TO 1.c.8)

- REFUSED (SKIP TO 1.c.8)
- DON'T KNOW

1.c.7 [IF R DOESN'T KNOW HOURLY RATE] Can you tell me how much you typically earned for some other time period, such as per day, per week, every two weeks, or month? (Answer once for whatever time period is most appropriate)

- \$ ___ ___ ___ ___ PER DAY
- \$ ___ ___ ___ ___ PER WEEK
- \$ ___ ___ ___ ___ EVERY 2 WEEKS
- \$ ___ ___ ___ ___ TWICE MONTHLY
- \$ ___ ___ ___ ___ EVERY MONTH
- \$ ___ ___ ___ ___ ANNUALLY

1.c.8 How long were you employed in your most recent job before starting this apprenticeship (in years or months)?

- ___ ___ YEARS
- ___ ___ MONTHS

1.c.9 What were your total earnings—wages, salary, commissions, bonuses, or tips—from all jobs (before taxes), including self-employment, in the 12 months before starting your apprenticeship?

\$ ___ ___ ___ , ___ ___ ___ ANNUALLY

1.c.10 How many different jobs have you held in the three years before starting your apprenticeship?

- 1
- 2-3
- 4-6
- More than 6

1.c.11 In the three years before starting your apprenticeship, how many months were you unemployed and looking for work?

___ ___ MONTHS

1.c.12 Were any of the jobs you had in the past in a similar field to the apprenticeship?

- YES ₁
- NO ₂

1.c.13 Are you a veteran or have you had any prior military service?

- YES ₁
- NO ₂

Topic 1.d. Was part of pre-apprenticeship?

The next question is about pre-apprenticeship.

1.d.1 A pre-apprenticeship is a work-based learning program that teaches basic skills for an occupation and could lead to an apprenticeship. Were you in a pre-apprenticeship program prior to your apprenticeship?

YES

₁ (ASK 1.d.2)

NO

₂ (SKIP TO 1.e.1)

1.d.2 [IF 1.d.1= 1, YES:] Did the employer you are apprenticed with also provide work experience for that pre-apprenticeship program?

YES

₁

NO

₂

Topic 1.e. Demographics

The following set of questions are about your own background.

- 1.e.1 Which of the following best describes your relationship status when you began your apprenticeship?

(READ LIST, SINGLE RECORD)

- | | | |
|---------------|--------------------------|---|
| Married | <input type="checkbox"/> | 1 |
| Widowed | <input type="checkbox"/> | 2 |
| Divorced | <input type="checkbox"/> | 3 |
| Separated | <input type="checkbox"/> | 4 |
| Never married | <input type="checkbox"/> | 5 |

- 1.e.2 At the time you began your apprenticeship, did you live at least half time with...?

(READ LIST, MULTIPLE RECORD)

- | | | |
|---|--------------------------|---|
| Your spouse | <input type="checkbox"/> | 1 |
| Your unmarried partner | <input type="checkbox"/> | 2 |
| Your child/children (or other children you support financially) | <input type="checkbox"/> | 3 |
| Your father | <input type="checkbox"/> | 4 |
| Your mother | <input type="checkbox"/> | 5 |

- 1.e.3 At the time you began your apprenticeship, how many children did you live with at least half of the time with and were responsible for caring for or supporting financially?

_____ children

- 1.e.4 At the time you began your apprenticeship, what level of education had you attained? (SELECT HIGHEST LEVEL)

- | | | |
|--|--------------------------|---|
| BACHELOR'S (4-YEAR) DEGREE OR HIGHER | <input type="checkbox"/> | 1 |
| ASSOCIATE'S (2-YEAR) DEGREE | <input type="checkbox"/> | 2 |
| TECHNICAL, TRADE OR VOCATIONAL CREDENTIAL | <input type="checkbox"/> | 3 |
| SOME COLLEGE CREDIT, BUT NO DEGREE OR OTHER CREDENTIAL | <input type="checkbox"/> | 4 |
| HIGH SCHOOL GRADUATE | <input type="checkbox"/> | 5 |
| GED OR OTHER HIGH SCHOOL EQUIVALENCY | <input type="checkbox"/> | 6 |
| 12 TH GRADE OR LESS, NO DIPLOMA | <input type="checkbox"/> | 7 |

Section 2. Apprenticeship Experiences

Topic 2.a: Nature of the Apprenticeship

[INTERVIEWER NOTE: USE PRESENT TENSE VERBS IF 0.a.2 = 1, “Currently registered as an apprentice,” OTHERWISE USE PAST TENSE.]

The next set of questions will ask about your experiences during your apprenticeship.

2.a.1. [Is/Was] your apprenticeship time-based, competency-based, or a combination of both (a “hybrid”)?

[SINGLE RESPONSE]

- Time-based (apprentices complete a required number of hours in on-the-job training and related instruction) ₁
- Competency-based (apprentices demonstrate skills and knowledge through proficiency tests but are not required to meet a certain number of hours) ₂
- Combination/ Hybrid (programs have minimum and maximum number of hours and the successful demonstration of competencies) ₃

2.a.2. How long [is/was] your apprenticeship expected to be?
_____ years, and _____ months

[IF 2.a.1= 1, “Time-based” THEN SKIP TO 2.a.4; ELSE, ASK 2.a.3]

2.a.3. Were you informed about the specific competency elements you needed to learn to complete the apprenticeship?

- YES ₁
- NO ₂

2.a.4. [Do/Did] you or your mentor log hours for each occupational competency area of the apprenticeship?

- YES ₁
- NO ₂

Topic 2.b: Classroom instruction

This next set of questions are about the classroom instruction you [are receiving/received] as part of your apprenticeship.

2.b.1. Please specify the best description of your classroom instruction (also known as related technical instruction or “RTI”), either at the work site or at a separate facility, for the apprenticeship program:

(READ LIST, SINGLE MENTION)

- All classroom instruction is completed before on-the-job training starts ₁
- Classroom instruction occurs at the same time as on-the-job training, but is completed before on-the-job training finishes ₂
- Classroom instruction occurs at the same time as on-the-job training and is ongoing throughout the apprenticeship program ₃
- Classroom instruction occurs at different times over the course of the apprenticeship program (e.g., block scheduling) ₄
- I don’t know ₅
- Other. (Please specify): _____ ₆

2.b.2. Who [is providing/provided] the classroom instruction for your apprenticeship program?

(MULTIPLE RECORD, DO NOT READ)

- A FOUR-YEAR COLLEGE ₁
- A COMMUNITY COLLEGE, TWO-YEAR COLLEGE, OR TECHNICAL COLLEGE ₂
- A UNION ₃
- AN EMPLOYER ₄
- A NONPROFIT ORGANIZATION ₅
- A PRIVATE, FOR-PROFIT TRAINING PROVIDER ₆
- OTHER (PLEASE SPECIFY): _____ ₇

2.b.3. How many college credits have you earned or will you earn as a part of the classroom instruction for your apprenticeship program (if all of your classes are not for credit, please write zero)?

_____ credits

2.b.4. What subjects or topics [are you covering/did you cover] in the classroom instruction for your apprenticeship program?

(MULTIPLE RECORD, READ LIST)

- Use of tools, equipment, or specialized skills required for the apprenticeship occupation 1
- Reading and math skills relevant to the apprenticeship occupation 2
- Computer science or information technology 3
- Engineering or engineering technology 4
- Business management skills (e.g., project management, accounting, industry background) 5
- Critical thinking and problem solving skills 6
- Managing time effectively 7
- Professional skills (e.g., appropriate dress, punctuality, interaction with supervisors and colleagues) 8
- Other. (Please specify): _____ 9

2.b.5. To what degree [are you using/did you use] what you learned in the classroom in your work on the job in your apprenticeship program?

(READ LIST; SINGLE MENTION)

- I did not use what I learned in the classroom on the job 1
- I used some of what I learned in the classroom on the job 2
- I used most of what I learned in the classroom on the job 3
- I used everything I learned in the classroom on the job 4

Topic 2.c: Payment for tuition and tools

The next set of questions are about financial costs you incurred as part of your apprenticeship.

- 2.c.1. How much have you paid or will you pay in tuition, fees, and books for the apprenticeship program's classroom instruction? (Do not include expenses that your sponsor or employer paid or that was paid for with a grant. Do include expenses paid with a student loan.)

_____ dollars

- 2.c.2. How much have you paid or will you pay for tools or equipment for the apprenticeship program (Do not include tuition or expenses that your sponsor or employer paid or that was paid for with a grant. Do include tuition paid with a student loan)?

_____ dollars

- 2.c.3. How much of your tuition, fees, and books was paid or will be paid for through a grant (such as a Pell Grant) or scholarship (Do not include tuition or expenses that your sponsor or employer paid or that was paid with a student loan)?

_____ dollars

Topic 2.d: Mentorship

The following questions are about the mentoring you received during your apprenticeship.

- 2.d.1. Thinking of your primary on-the-job mentor (the mentor you [spend/spent] the most time with in a typical week), how many hours per week [do/did] you usually work with that mentor?

_____ hours per week

- 2.d.2. How important [is/was] your primary mentor for helping you succeed in your apprenticeship—taking into account their help with classroom training, on-the-job components of the occupation (such as tools and techniques), and on-the-job professional skills (e.g., appropriate dress, punctuality, or professional interaction with supervisors)? (IF NECESSARY: Your primary mentor is the one you spend/spent the most time with in a typical week.)

(READ LIST; SINGLE MENTION)

- | | |
|--------------------|---------------------------------------|
| Very Important | <input type="checkbox"/> ₁ |
| Important | <input type="checkbox"/> ₂ |
| Somewhat Important | <input type="checkbox"/> ₃ |
| Not Important | <input type="checkbox"/> ₄ |

- 2.d.3. How satisfied [are/were] you with the primary mentor that worked with you for the apprenticeship program? (IF NECESSARY: Your primary mentor is the one you spend/spent the most time with in a typical week.)

(READ LIST; SINGLE MENTION)

- | | |
|--------------------|---------------------------------------|
| Very Satisfied | <input type="checkbox"/> ₁ |
| Satisfied | <input type="checkbox"/> ₂ |
| Somewhat Satisfied | <input type="checkbox"/> ₃ |
| Not Satisfied | <input type="checkbox"/> ₄ |

Topic 2.e: Apprentice wages

The following questions will ask about the compensation and other support received during your apprenticeship.

[IF 0.A.2 = 1, “Currently registered as an apprentice,” ASK 2.e.1; ELSE, SKIP TO 2.e.4]

2.e.1. What hourly wage do you currently earn as an apprentice, before taxes?

\$ ____ . ____ PER HOUR (SKIP TO 2.e.2)

REFUSED (SKIP TO 2.e.2)

DON'T KNOW

2.e.1.a [IF R DOESN'T KNOW HOURLY RATE] Can you tell me how much you currently earn for some other time period, such as per day, per week, every two weeks, or month? (Answer once for whatever time period is most appropriate)

\$ ____ PER DAY

\$ ____ PER WEEK

\$ ____ EVERY 2 WEEKS

\$ ____ TWICE MONTHLY

\$ ____ EVERY MONTH

\$ ____ ANNUALLY

2.e.2. How many paid hours do you typically work per week as an apprentice?

_____ hours

2.e.3. How many wage increases have you received in the apprenticeship program since you started as an apprentice?

_____ wage increases

[SKIP TO 2.f.1]

2.e.4. What hourly wage did you earn at the time that your apprenticeship was completed or cancelled, before taxes?

\$ ____ . ____ PER HOUR (SKIP TO 2.e.5)

REFUSED (SKIP TO 2.e.5)

DON'T KNOW

2.e.5.a [IF R DOESN'T KNOW HOURLY RATE] Can you tell me how much you earned for some other time period, such as per day, per week, every two weeks, or month? (Answer once for whatever time period is most appropriate)

\$ ___ ___ ___ ___ PER DAY

\$ ___ ___ ___ ___ PER WEEK

\$ ___ ___ ___ ___ EVERY 2 WEEKS

\$ ___ ___ ___ ___ TWICE MONTHLY

\$ ___ ___ ___ ___ EVERY MONTH

\$ ___ ___ ___ ___ ANNUALLY

2.e.6. How many paid hours did you typically work per week at the time that your apprenticeship was completed or cancelled?

_____ hours

2.e.7. How many wage increases did you receive during your apprenticeship program?

_____ wage increases

Topic 2.f: Other Supports

2.f.1. [Are you receiving/Did you receive] any of the following supports through your apprenticeship program?

(READ LIST, MULTIPLE RECORD)

- Academic/career counseling 1
- Tutoring 2
- Basic skills or remedial/developmental training in math and/or English (as opposed to occupation-specific math or English training) 3
- Introductory information technology training 4
- Tuition assistance 5
- Assistance with costs for tools, equipment, books, supplies, and/or other materials 6
- Child care 7
- Flexible scheduling 8
- Transportation assistance 9
- Other (Please specify): _____ 10
- None 11

Topic 2.g: Recommendation

2.g.1. Would you recommend this apprenticeship program to a family member or friend who wants to work in this field?

YES

 ₁

NO

 ₂

Section 3. Skills and Knowledge Gained

Topic 3.a. Skill level before starting the apprenticeship

Apprenticeships typically aim to help participants develop a range of different skills. The questions below aim to learn more about that skill development process.

- 3.a. Below is a list of skills that apprenticeship training often seeks to develop. For each one, please rate how well-developed your skills were before you began your apprenticeship. (If the skill is not applicable to the work performed on the job during your apprenticeship, mark “N/A”)

(READ EACH ITEM FOLLOWED BY ANSWER CATEGORIES)

(RANDOMIZE THE ORDER OF ITEMS, THEN USE THE SAME ORDER FOR 3.A THROUGH)

	Highly skilled	Somewhat skilled	OR Not very skilled	N/A
1. Use of tools, equipment, or specialized skills required for the apprenticeship occupation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
2. Reading and math skills relevant to the apprenticeship occupation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
3. Computer science or information technology	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
4. Engineering or engineering technology	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
5. Business management skills (e.g., project management, accounting, industry background)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
6. Critical thinking and problem-solving skills	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
7. Working and communicating effectively with others	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
8. Managing time effectively	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

Topic 3.b. Level of skill development

3.b How well has the classroom and on-the-job training you received through the apprenticeship prepared you with the skills needed to operate at a high level in your occupation? Please rate each of the following skills. (If the skill is not applicable to the work performed on the job during your apprenticeship, mark “N/A”)

(READ EACH ITEM FOLLOWED BY ANSWER CATEGORIES)

		Very well prepared	Well prepared	Somewhat prepared	Not well Prepared	N/A
1.	Use of tools, equipment, or specialized skills required for the apprenticeship occupation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
2.	Reading and math skills relevant to the apprenticeship occupation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
3.	Computer science or information technology	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
4.	Engineering or engineering technology	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
5.	Business management skills (e.g., project management, accounting, industry background)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
6.	Critical thinking and problem-solving skills	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
7.	Working and communicating effectively with others	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅
8.	Managing time effectively	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄	<input type="checkbox"/> ₅

Topic 3.c. What was most helpful in learning skills?

3.c Which aspects of the apprenticeship—classroom learning, guidance from an on-the-job mentor, OR work experience (learning by doing)—contributed the most to help you develop your skills?

Please choose one for each of the following skills. (If the skill is not applicable to the work performed on the job during your apprenticeship, please tell me)

(READ EACH ITEM FOLLOWED BY ANSWER CATEGORIES)

		Classroom learning	On-the-job mentor guidance	OR Work experience	N/A
1.	Use of tools, equipment, or specialized skills required for the apprenticeship occupation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
2.	Reading and math skills relevant to the apprenticeship occupation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
3.	Computer science or information technology	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
4.	Engineering or engineering technology	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
5.	Business management skills (e.g., project management, accounting, industry background)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
6.	Critical thinking and problem-solving skills	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
7.	Working and communicating effectively with others	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
8.	Managing time effectively	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

Topic 3.d. Sufficiency and relevance of classroom learning

3.d.1 Thinking about the skills you developed during your apprenticeship, could you have developed a high level of competence in these skills through classroom instruction alone?

YES

_1

NO

_2

[ASK 3.d.2 IF 0.a.1 IS NOT EQUAL TO 1, “Currently registered as an apprentice,” ELSE SKIP TO 3.e]

3.d.2 Overall, how relevant was your classroom training to the work you do in your current job?

(READ LIST)

Very relevant

_1

Somewhat relevant

_2

Not relevant

_3

Topic 3.e. Value of skills

3.e How important are each of those skills to succeed in your job? Please rate each of the following skills.

(READ EACH ITEM FOLLOWED BY ANSWER CATEGORIES)

	Very important	Moderately important	Slightly important	Not at all important
1. Use of tools, equipment, or specialized skills required for the apprenticeship occupation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
2. Reading and math skills relevant to the apprenticeship occupation	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
3. Computer science or information technology	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
4. Engineering or engineering technology	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
5. Business management skills (e.g., project management, accounting, industry background)	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
6. Critical thinking and problem-solving skills	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
7. Working and communicating effectively with others	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄
8. Managing time effectively	<input type="checkbox"/> ₁	<input type="checkbox"/> ₂	<input type="checkbox"/> ₃	<input type="checkbox"/> ₄

3.f. Do you think you did better or worse in your classroom work because of your participation in the apprenticeship than you would have done if you were enrolled in the same class(es) but were not an apprentice?

- Did better ₁
- Did worse ₂
- No difference ₃

Section 4. Outcomes

Topic 4.a: Reasons for non-completion

These next questions ask about completing your apprenticeship and any credentials or certifications you may have earned.

[IF 0.a.2 = 1, “Currently registered as an apprentice,” ASK 4.a.1

IF 0.a.2 = 3, “Employer or sponsor ended my apprenticeship,” ASK 4.a.2

IF 0.a.2 = 4, “I left the apprenticeship before completing,” ASK 4.a.3

ELSE, SKIP TO 4.b.1]

4.a.1. Which of the following best describes your current status in the apprenticeship program?

(READ LIST, MULTIPLE RECORD)

I am still registered and on track to complete the apprenticeship by the expected completion date ₁

I am still registered but will not complete on time due to delays in my progress through classroom instruction ₂

I am still registered but will not complete on time due to delays in my progress through on-the-job training ₃

I am still registered but will not complete on time due to personal or family problems ₄

I am still registered but will not complete on time due to a shortage of available work from my employer ₅

Other. (Please specify): _____ ₆

[SKIP TO 4.b.2]

4.a.2. Which of the following best describes why your employer cancelled your registered apprenticeship?

(READ LIST, MULTIPLE RECORD)

Lack of work ₁

They went out of business ₂

My poor performance on the job ₃

For reasons that I am not aware of ₄

Other. (Please specify): _____ ₅

[SKIP TO 4.b.2]

4.a.3. Which of the following best describes your reasons for not completing the registered apprenticeship at this time?

(READ LIST, MULTIPLE RECORD)

- | | | |
|---|--------------------------|---|
| I lost interest in the occupation | <input type="checkbox"/> | 1 |
| I found a better paying job | <input type="checkbox"/> | 2 |
| I disliked the employer or the apprenticeship program | <input type="checkbox"/> | 3 |
| Personal or family problems | <input type="checkbox"/> | 4 |
| Other. (Please specify): _____ | <input type="checkbox"/> | 5 |

[SKIP TO 4.b.2]

Topic 4.b: Certificates and credentials

4.b.1. Please indicate whether or not you received a certification of apprenticeship completion from the following:

(READ LIST, MULTIPLE RECORD. OPTION 3 IS MUTUALLY EXCLUSIVE.)

- Certificate of apprenticeship completion from the U.S. Department of Labor, Office of Apprenticeship ₁
- Certificate of apprenticeship completion from a state apprenticeship agency ₂
- I did not receive a certificate of apprenticeship completion ₃
- [PRETEST ONLY] Certificate from elsewhere (Specify) _____ ₄

4.b.2. Did you receive any degrees, certificates, or professional licenses as a result of the apprenticeship program?

- YES ₁
- NO ₂

[IF 4.b.2=1 “YES”, ask 4.b.2.a and 4.b.3; ELSE SKIP TO 4.b.4.]

4.b.2.a. What is the name of the degree, certificate, or professional license that you received?
Please list up to three.

- 1. _____
- 2. _____
- 3. _____

4.b.3. Are any of the credentials (degree, license certification) earned through your apprenticeship portable to other employers?

- YES ₁
- NO ₂

4.b.4. Are you currently in an occupation where a license is required?

- YES ₁ (ASK 4.b.5)
- NO ₂

[IF 4.b.4 = 1, Yes, ASK 4.b.5; ELSE, SKIP TO 4.b.7]

4.b.5. Do you have a license in your occupation?

YES ₁ (ASK 4.b.6)
NO ₂

[IF 4.b.5 = 1, Yes, ASK 4.b.6; ELSE, SKIP TO 4.b.7]

4.b.6. Did you earn that license as a result of your apprenticeship program?

YES ₁
NO ₂

4.b.7. Are you currently in an occupation where a certification is available?

YES ₁ (ASK 4.b.8)
NO ₂

[IF 4.b.7 = 1, Yes, ASK 4.b.8; ELSE, SKIP TO 4.b.10]

4.b.8. Do you have a certification in your occupation?

YES ₁ (ASK 4.12)
NO ₂

[IF 4.b.8 = 1, Yes, ASK 4.b.9; ELSE, SKIP TO 4.b.10]

4.b.9. Did you earn that certification as a result of your apprenticeship program?

YES ₁
NO ₂

**[IF 0.a.2 = 1, “Currently registered as an apprentice,” OR
2, “Completed the apprenticeship program,” ASK 4.b.10-4.b.11.
IF 0.a.2 = 3, “Employer or sponsor ended my apprenticeship,” OR
4, “I left the apprenticeship before completing” , SKIP TO 4.b.12]**

4.b.10. Do you consider what you [accomplished/have accomplished] in your apprenticeship as achieving a high level of expertise in a profession or occupation?

YES ₁
NO ₂

4.b.11. What level of expertise do you believe you have achieved relative to an experienced worker in your apprenticeship occupation?

(READ LIST, SINGLE RESPONSE)

10% ₁
25% ₂
50% ₃
75% ₄
90% ₅
100% ₆

[IF 0.a.2 = 1, “Currently registered as an apprentice,” SKIP TO END1, ELSE CONTINUE.]

Topic 4.c: Employment

The following questions are about your current employment status.

4.c.1. Are you currently employed?

- YES ₁ (ASK 4.c.2)
- NO ₂ (ASK 4.c.3)

4.c.2. Are you employed with the same employer that operated your apprenticeship program?

- YES ₁
- NO ₂

**[IF 4.c.1=NO AND 0.a.2 = 2, “Completed the apprenticeship program,” ASK 4.c.3
ELSE IF 4.c.2=NO, ASK 4.c.3
ELSE SKIP 4.c.3]**

4.c.3. Why are you no longer employed with the employer that operated your apprenticeship program?

(DO NOT READ, MULTIPLE RECORD)

- I FOUND A BETTER PAYING JOB ₁
- I FOUND A JOB THAT OFFERED BETTER HOURS ₂
- I FOUND A JOB THAT OFFERED BETTER SCHEDULING ₃
- PERSONAL OR FAMILY REASONS ₄
- THE EMPLOYER THAT OPERATED MY APPRENTICESHIP PROGRAM IS NO LONGER IN BUSINESS ₅
- THE EMPLOYER THAT OPERATED MY APPRENTICESHIP PROGRAM DID NOT HAVE ADDITIONAL WORK FOR ME AND THEREFORE DID NOT MAKE A JOB OFFER ₆
- THE EMPLOYER THAT OPERATED MY APPRENTICESHIP PROGRAM DID NOT MAKE A JOB OFFER BECAUSE OF MY PERFORMANCE ₇
- OTHER (SPECIFY): _____ ₈

[IF 4.c.1=NO THEN SKIP TO END1, ELSE CONTINUE]

4.c.4. Is your current job title or occupation the same title you started with at the beginning of your apprenticeship?

- YES ₁
- NO ₂

[IF 4.c.4 = 2, No, ASK 4.c.5]

4.c.5. What kind of work do you do in your current job, that is, what is your occupation? If you have more than one job, please answer for your main job.

4.c.6. What are your usual activities or duties at this job? For example, typing, keeping account books, filing, selling cars, operating printing press, taking blood samples.

4.c.7. What is your job title?

End of Survey

END1. You have completed the survey! Thank you for sharing your apprenticeship experiences with us.

END2. In appreciation for your time spent completing this interview, we will send you a Visa gift card. You should receive the card in 2-3 weeks.

So that we send the card to the correct person, can you please spell your name for me/us and provide the address where you would like me/us to send the card?

- 1. Yes [COLLECT NAME AND ADDRESS BELOW]
- 2. No, I do not want you to send me anything [GO TO END3]
- 88. DK (VOL) [GO TO END3]
- 99. REF (VOL) [GO TO END3]

INTERVIEWER: COLLECT NAME AND ADDRESS

NAME _____

STREET ADDRESS _____

APT. NO. _____

CITY _____

STATE _____

ZIP _____