

## Imported Block 1 - Sep 25, 2020

The U.S. State Department's Bureau of Educational and Cultural Affairs (ECA) would like to ask you a few questions about your experiences in the Intern/Trainee program. The goal is to better understand both successes and challenges of this program.

Please complete this survey by November 30. The survey has 20-25 questions and should take less than 30 minutes to complete.

Your responses will be anonymous and aggregated with other responses for the reporting purposes. The results of this survey are for internal ECA use only, and will not be shared publicly.

The only instances when your name may be used are for the purpose of follow-up on specific problems identified in this survey. The Department of State works with Intern/Trainee exchange visitors when they have serious concerns about their placement and their sponsor is unwilling or unable to assist them. In these cases, a member of our team may contact you for additional details and possible follow-up.

Your participation in this survey is voluntary, and you are free to choose not to answer any question. Your completion of the survey will not affect your eligibility for future Intern/Trainee or other ECA programs.

Contact the ECA Evaluation team (ecaevaluation@state.gov) for technical support with the survey system or inquiries about specific questions.

By clicking "Yes" you confirm that you have read the above consent information and agree to voluntarily participate in this survey.

$\bigcirc$	Yes - take me to the survey
$\bigcap$	No - exit the survey

## Please enter the following information

First Name	
Middle Name	
Last Name	
Date of Birth (mm-dd-yyyy)	
Email Address	

Please select your country of citizenship.



Please enter SEVIS ID number. (Found in top right-hand corner of your DS-2019 form) Please enter current U.S. city

## Please select current U.S. state



Please select occupational category.

0	Agricultural/Forestry/Fishing
0	Arts & Culture
0	Construction/Building Trades
0	Education/Social Science/Library Science/Counseling/Social Services
0	Health-Related Occupations
0	Hospitality & Tourism
0	Information Media & Communications
$\bigcirc$	Management/Business/Commerce/Finance

<ul> <li>Public Administration &amp; Law</li> <li>Sciences/Engineering/Architecture/Mathematics/Industrial Occupation</li> </ul>	
Do you currently have access to a computer or cell phone?  Yes  No	
Please specify your device. Check all that apply.  Cell phone Smart phone Tablet Computer with microphone Computer with microphone and camera Other (please describe)	
How long have you participated in the Intern/Trainee program? Please indicate number of months.	
Number of months as Intern/Trainee	

	Given current COVID-19 r	estrictions, what cultural activities have you participated
	Virtual meet and greets Virtual meetings with other A Virtual meetings with other I Socially distanced outdoor a Celebrating holidays  None	ntern/Trainees
0 0	Do you feel safe and comf Yes No	ortable in your housing?
F	Please explain why you do	o not feel safe and/or comfortable. Check all that apply.
	Rent too high	
	Not enough bedrooms	
	Too far from host organization	on
	Far away from public transp	
	Far away from local attraction	ons
	Doors do not lock	
	Neighborhood is unsafe	.011 ( )
		Other (please describe)

Please indicate your level of satisfaction with the training activities at your host site
<ul> <li>Extremely satisfied</li> <li>Somewhat satisfied</li> <li>Neither satisfied nor dissatisfied</li> <li>Somewhat dissatisfied</li> <li>Extremely dissatisfied</li> </ul>
Please explain why you are dissatisfied. Check all that apply.
☐ Training activities do not match training plan
☐ Have not advanced to different phases in accordance with training plan
Performing unskilled labor
Used as substitute for American employees
Other (please describe)
Does your training plan match with what you are doing at the host site?  Always  Most of the time  About half the time  Sometimes  Never
Do you feel your program is providing you with genuine training, regular work, or is it some of both?
O Genuine training

Other (please describe)

How much did participation in the program change your understanding or knowledge of the following topics?

	No change	Minimal change	Moderate change	Substantial change
United States values and culture	0	0	0	0
Daily life in the United States	0	0	0	0
Religious and ethnic diversity in the United States	0	0	0	0
Freedom of speech and press in the United States	0	0	0	0
Overall, how would you Extremely positive Somewhat positive Neither positive nor negative Somewhat negative Extremely negative	·	ur Intern/Traine	e program experi	ence?
Please select the prima	ry reason(s)	for your negativ	re experience. C	heck all that
Host organization concerns Training plan concerns Supervisor concerns		ase describe)		

ро у	ou have any additional comments of concerns you would like to share with
us?	Please describe.

Please take note of the below emergency contact information:

**Exchange Visitor Program** 

Emergency Hotline: 24/7 toll-free: 1-866-283-9090

Email/General Inquires: Jvisas@state.gov

Regulations: J-1 Visa Program Website: http://j1visa.state.gov



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