

# **APPENDIX Q**

## **The 2022 NTEWS Bridge Panel Web Questionnaire**

## Bridge Panel Questionnaire for NTEWS-like population

[consent page]

### **INTRODUCTION**

In this series of questions, we are going to ask about your degrees and credentials so that we can better understand the U.S. workforce and the pathways they took to their current job. First, we'd like to ask about that job or jobs.

### **WORK: Are you currently working for pay or profit?**

*If you are temporarily absent from a job because you are on vacation, out sick, on maternity leave, etc., please answer "Yes".*

Yes - Go to Question **NUMJOB**

No- Go to Question **NOTWORK**

(if **WORK** = No) **NOTWORK: What is your MAIN reason for not working?**

*Select one answer.*

Retired

On layoff

Student

Family responsibilities (e.g., childcare, eldercare)

Chronic illness or permanent disability

Suitable job not available

Do not need or want to work

Other - Specify \_\_\_\_\_

(Go to Question **ENROLLED**)

(if **WORK** = Yes) **NUMJOB**: How many jobs do you have?

*If you receive paychecks from different companies, count each job separately. E.g., If you work for both Uber and Lyft, that is 2 jobs.*

*If you own your own business (e.g., you are a consultant), count this as one job even though you may have multiple customers.*

NUMBER OF JOBS \_\_\_\_\_

(if **WORK** = Yes) **JOBLIST**: Please list each of your jobs. Enter one job per box and use all boxes.

*For example: 4th grade teacher, entry-level plumber, web develop, etc.*

[show only the number of boxes as indicted in previous question, **NUMJOB**, up to 9 jobs]

Job 1: \_\_\_\_\_

Job 2: \_\_\_\_\_

Job 3: \_\_\_\_\_

Job 4: \_\_\_\_\_

(if **WORK** = Yes) **MAIN**: Of the jobs you listed, which do you consider to be your MAIN job?

*Select one answer.*

[show list provided by R in previous question, **JOBLIST**, with radio button for each]

.....

....

(if more than one job, if **NUMJOB**>1) **WHYMAIN**: Why do you consider this to be your MAIN job?

*Select one or more.*

I work the most hours at this job

I've had this job the longest

I have the most responsibility at this job

I make the most money at this job

Most of my training and education was for this type of job

I enjoy this job the most

I plan to stay in this job long-term

This is my family's business

Other: \_\_\_\_\_

(if **WHYMSIN** has>1 response) **MOSTIMP**: Of the considerations you listed, which of these is the most important?

Select one answer.

[show list provided by R in previous question, **WHYMAIN**, with a radio button for each]

.....

....

(if more than one job, if **NUMJOB**>1) **CONFIRMMAIN**: When people ask what you do for work, which job or jobs do you mention in your answer?

Select one or more.

[show list provided by R in earlier question, **JOBLIST**, with a radio button for each + **Other**]

.....

....

Other: \_\_\_\_\_

**ENROLLED**: Are you currently enrolled in or taking courses from a college, university, technical or trade school, or other school after high school?

Yes

No - Go to Question **HIGHDEG**

(if **ENROLLED** = Yes) **ENROLLDP**: Are you currently enrolled in a degree program?

Yes

No - Go to Question **HIGHDEG**

(if **ENROLLDP** = Yes) **CURRDP: What degree are you working toward?**

Select one answer.

Associate degree (e.g., AA, AS)

Bachelor's degree (e.g., BA, BS)

Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA)

Professional degree beyond a Bachelor's degree (e.g., MD, DDS, DVM, LLB, JD)

Doctorate degree (e.g., PhD, EdD)

Other - Specify: \_\_\_\_\_

(if yes) **CURRDPFIELD: What is your primary field of study?**

FIELD OF STUDY \_\_\_\_\_

(if **ENROLLED** = Yes, show this version) **HIGHDEG: As of today, what is the highest degree or level of school that you have COMPLETED?**

(everyone else, not currently enrolled, **ENROLLED** = No, show this version) **HIGHDEG: What is the highest degree or level of school that you have COMPLETED?**

Select one answer.

Elementary, middle, or high school, but no high school diploma or alternative high school credential (e.g., GED)

High school diploma - **Go to Question HIGHDEGYR**

Alternative high school credential (e.g., GED) - **Go to Question HIGHDEGYR**

Some college credit, no degree - **Go to Question HIGHDEGYR**

Vocational certificate or diploma - **Go to Question HIGHDEGYR**

Associate degree (e.g., AA, AS) - **Go to Question HIGHDEGYR**

Bachelor's degree (e.g., BA, BS) - **Go to Question HIGHDEGYR**

Master's degree (e.g., MA, MS, MEng, MEd, MSW, MBA) - **Go to Question HIGHDEGYR**

Professional degree beyond a Bachelor's degree (e.g., MD, DDS, DVM, LLB, JD) - **Go to Question HIGHDEGYR**

Doctorate degree (e.g., PhD, EdD) - **Go to Question HIGHDEGYR**

(If **HIGHDEG** =elementary, middle, or high school, but no high school diploma or alternative high school credential ) **HIGHSCH: Are you currently enrolled in high school?**

Do not include programs to earn an alternative high school credential (e.g., GED).

Yes - **Go to Question DOB**

No - **Go to Question DOB**

(if **HIGHDEG** = high school diploma or higher) **HIGHDEGYR: In what year did you earn your [insert highest degree **HIGHDEG**]?**

*If you have more than one of this degree, please answer for the most recent.*

YEAR                    

(if **HIGHDEG** < Associates Degree, **Go to Question INTRO1**)

(if **HIGHDEG** = Associates Degree or higher) **HIGHDEGFIELD: What was the field of study for your [insert highest degree **HIGHDEG**]?**

*If you have more than one of this degree, please answer for the most recent.*

FIELD OF STUDY \_\_\_\_\_

(if **HIGHDEG** =Associates Degree or higher) **WHYHIGHDEG: Thinking back to when you enrolled in your [insert highest degree **HIGHDEG**] program, why did you choose to pursue [insert **HIGHDEGFIELD**]?**

\_\_\_\_\_  
\_\_\_\_\_

(if currently working, **WORK** = Yes; if **HIGHDEG** = Associates Degree or higher) **USEDEG: How often do you use the knowledge and skills you gained while getting your [insert highest degree **HIGHDEG**] for your MAIN job a/an {insert **MAIN**}?**

Select one answer.

- Every day
- At least once a week
- At least once a month
- At least once a year
- Never

**INTRO1:** Next, we are going to ask you about credentials that you might that are not college degrees (like an Associate or Bachelor's degree). These include **professional certifications, industry licenses, transportation licenses, certificates, vocational certificates, badges, diplomas**. Collectively, we'll call them **Credentials** in the questions below.

**CREDLIST:** Please list all of the non-degree Credentials, like those listed above, that you currently hold.

*These can be things like a: Teaching license, Nurse-Midwife certification, Cisco Certified Network Associate, Master Plumber license, Airframe & Powerplant license, etc.*

Enter each Credential in a separate box.

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I have no Credentials like this - **Go to Question DOB**

**We are going to ask you about the Credentials you listed. If you listed three or more Credentials, we will only ask about two of them.**

**First, we will ask about this Credential:**

{Show **first** credential listed in **CREDLIST**}

**CREDWORK:** What kind of work does this Credential allow you to do?

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{Show **first** credential listed in **CREDLIST**}

**CLASSCRED: What kind of Credential is this?**

*Select one answer.*

Industry License

Professional Certification

Certificate

Vocational Certificate or Diploma

Badge

Other: \_\_\_\_\_

{Show **first** credential listed in **CREDLIST**}

**CREDCOLL: To get the skills and knowledge needed for this Credential, did you take classes from a college, university, technical or trade school, or other school after high school?**

Yes

No

{Show **first** credential listed in **CREDLIST**}

**CREDCRE: Did you complete an internship, apprenticeship, clerkship, externship, residency, clinical experience, student teaching, or similar program to obtain this Credential?**

Yes

No

{Show **first** credential listed in **CREDLIST**}

**CRECREQ: Were you legally required to have this Credential in order to work?**

Yes

No



{Show **first** credential listed in **CREDLIST**}

**CREDISSUE: Who issued this Credential?**

*Select one answer.*

City or county government agency (e.g., County Electrical Licensing Board, County Department of Land Use)

State government agency (e.g., State Board of Education or other state board)

Federal government agency (e.g., OSHA, FAA)

Professional or trade association (e.g., American Culinary Federation, CompTIA)

Business or company (e.g., Xerox, 3M Company)

MOOC – Massive online open course like Coursera or Khan Academy

4-year college or university

Community or technical college

Vocational, trade, or business school

High school

Other—Specify: \_\_\_\_\_

{Show **first** credential listed in **CREDLIST**}

(if **CREDISSUE** <> MOOC) **CREDUS: Did you obtain this Credential outside of the United States?**

Yes

No

{Show **first** credential listed in **CREDLIST**}

**CREDRENEW: Does this Credential need to be renewed?**

Yes

No – **Go to Question CREDYR**

{Show **first** credential listed in **CREDLIST**}

(if **CREDRENEW** = Yes) **CREDRENEW2: How often does it need to be renewed?**

*Select one answer.*

Every year

Every two years

Other – Specify: \_\_\_\_\_

{Show **first** credential listed in CREDLIST}

(if CREDRENEW = Yes, does need to be renewed, show this version) CREDYR: In what year did you first get this Credential, not counting renewal years?

(if CREDRENEW = No, does not need to be renewed, show this version) CREDYR: In what year did you get this Credential?

YEAR \_ \_ \_ \_

{Show **first** credential listed in CREDLIST}

(If working, WORK = Yes) CREDUSE: How often do you use the knowledge and skills you gained while getting this Credential for your MAIN job as a/an {insert MAIN}?

*Select one answer.*

- Every day
- At least once a week
- At least once a month
- At least once a year
- Never

{Show **first** credential listed in CREDLIST}

CREDMOVE: To obtain this Credential, did you have to relocate temporarily (e.g., stay in a hotel or short-term rental, or with a friend)?

- Yes
- No

{Show **first** credential listed in CREDLIST}

CREDONLINE: How much of the required work for this Credential did you complete online or through distance learning?

- All
- Some
- Very little
- None

{Show **first** credential listed in CREDLIST}

**CREFIN: To obtain this credential, did you have any of the following financial support?**

*Select one answer for each item.*

My own money

Loans from a spouse, partner, or family member

Money from a spouse, partner, or family member that does not need to be repaid

Financial support or reimbursement from an employer

Loans from the government or private lenders

Grants or scholarships from someplace other my employer

Financial support from a professional association

Some other financial support - Specify: \_\_\_\_\_

None of the above

{Show **first** credential listed in CREDLIST}

**EMPC: When you enrolled in this credential, were you employed?**

Yes

No - **Go to Question REAS2B**

{Show **first** credential listed in CREDLIST}

(if EMPC = Yes) **SELF: When you enrolled in this credential, were you self-employed, working for someone else, or both?**

*Select one answer.*

Self-employed

Working for someone else

Both

{Show **first** credential listed in CREDLIST}

(if **EMPC** = Yes) **CREDEMPSUP1: To obtain this credential, did your employer at the time provide any of the following support to cover the cost of the training?**

*Select one or more answers.*

My employer:

- provided an internal group training for me and other employees at no cost
- provided an internal individual training for just me at no cost
- paid all of the fees for an external training
- paid some of the fees for an external training
- reimbursed all of the fees that I paid for an external training
- reimbursed some of the fees that I paid for an external training
- helped me find a grant or other support to cover some or all of the fees
- None of these

{Show **first** credential listed in CREDLIST}

(if **EMPC** = Yes) **CREDEMPSUP2: Besides paying for the training itself, did your employer at the time provide any of the following other kinds of support to obtain this credential?**

*Select one or more answers.*

My employer:

- provided work-experience or internship credit
- paid me to complete some or all of the training during my regular duty hours
- paid or reimbursed costs for books and materials
- paid or reimbursed costs for travel (e.g., lodging, transportation, mileage, food)
- paid or reimbursed costs for the exam(s)
- paid or reimbursed costs for issuing the Credential (e.g. license fee)
- Other: \_\_\_\_\_
- None of these

{Show **first** credential listed in CREDLIST}

(if EMPC =yes) **REAS1: Why did you choose to get this Credential in this particular specialty, as it relates to the job you had at the time?**

*Select one or more answers.*

It was required for the job I was already doing.

It allowed me to do more in the job I was already doing.

It allowed me to move up in my job.

It allowed me to earn more money in my job.

It attracted new clients or customers.

It helped me to do my job better.

Some other reason related to my job – Specify: \_\_\_\_\_

None of these reasons

{Show **first** credential listed in CREDLIST}

(if EMPC = Yes) **REAS2A: Did you choose to get this Credential for any of these other reasons?**

(if EMPC = No) **REAS2B: Why did you choose to get this Credential in this particular specialty?**

*Select one or more answers.*

It was required to get a new job I wanted.

It wasn't required but would help me get a new job I wanted.

It allowed me to start a business.

It was a new or emerging area in my field.

It was a subject I was passionate about.

It allowed me to explore potential interest in a new job or field.

Someone recommended this field or type of job to me.

It was a free or inexpensive opportunity.

Some other reason – Specify: \_\_\_\_\_

None of these reasons

{Show **first** credential listed in CREDLIST}

**CREDNEWJ: Once you received this Credential, did you look for a new job?**

Yes

No – Go to INTRO2

(if CREDNEWJ =Yes) **JOBMOVE**: At that time, were you considering job opportunities that would have required you to move?

Yes  
No

(if JOBMOVE =Yes) **MOVEFAR**: Where were you willing to move for a new job?

*Select one or more answers.*

Within the state where you lived at the time  
Surrounding states  
Other regions of the U.S.  
Anywhere in the U.S.  
Another country

{Show **first** credential listed in CREDLIST}

**CREDNEWJ**: As a direct result of receiving this Credential, did you receive any of the following benefits?

*Select one or more answers.*

Entered the job market  
Salary or wage increase  
Job promotion at same or new employer  
New job tasks assigned  
Improved performance at your job  
New clients or customers  
Expansion of services offered  
Other [specify]  
No noticeable direct results

[Once the order and questions are decided for the first credential, repeat all for 2<sup>nd</sup> credential]

**INTRO2**: Now we are going to ask you about another Credential that you listed.

**We will ask about this Credential**: {Insert randomly selected credential from 2-10 from CREDLIST, if applicable}

**What kind of work does this Credential allow you to do?**

\_\_\_\_\_  
\_\_\_\_\_

**DEMO:**

**DOB: What is your birthdate?**

MM\_\_ DD\_\_ YYYY\_\_\_\_\_

**SEX: What sex were you assigned at birth, on your original birth certificate?**

Male  
Female  
Don't know

**GEN: What is your current gender identity?**

*Select one or more answer.*

Male  
Female  
Transgender  
Gender non-conforming  
Non-binary  
Genderfluid  
Genderqueer  
Other gender identity - specify \_\_\_\_\_  
Prefer not to answer

**SO: Regardless of your sexual experience, what is your sexual identity or orientation?**

*Select one or more answer.*

Lesbian or gay  
Straight, that is, not gay  
Bisexual  
Asexual  
Pansexual  
Fluid  
Queer  
Other sexual identity - specify \_\_\_\_\_  
Prefer not to answer

**RACE: What is your race or origin?**

Select one or more answer.

- White or European American (German, Irish, English, Italian, etc.)
- Black or African American (African American, Jamaican, Haitian, Nigerian, etc.)
- American Indian or Alaska Native (Navajo, Blackfeet, Nome Eskimo Community, etc.)
- Hispanic or Latino (Mexican, Cuban, Guatemalan, Brazilian, etc.)
- Asian (Asian Indian, Chinese, Vietnamese, Japanese, Cambodian, etc.)
- Middle Eastern (Lebanese, Egyptian, Iranian, etc.)
- Native Hawaiian or Other Pacific Islander (Samoan, Fijian, Tongan, etc.)
- Some other race [Specify]

**ENG: Is English your first language?**

- Yes
- No

(if currently working, **WORK**=Yes) **SPEAKE: How well do you need to speak English for your MAIN job as a/an{insert **MAIN**}?**

Select one answer.

- I don't need to speak English for this job
- I need to be able to use single words or short phrases
- I need to be able to reply to or ask simple questions
- I need to be able to easily carry a conversation

(if currently working, **WORK**=Yes) **SPEAKS: How well do you need to speak Spanish for your MAIN job as a/an{insert **MAIN**}?**

Select one answer.

- I don't need to speak Spanish for this job
- I need to be able to use single words or short phrases
- I need to be able to reply to or ask simple questions
- I need to be able to easily carry a conversation



**UNION:** Are you currently a member of a labor union or an employee association similar to a union (e.g. AFL/CIO, Change to Win Federation, NEA)?

- Yes
- No

**MAR:** Which best describes your current marital status?

*Select one answer.*

- Married
- Not married but in a domestic partnership
- Previously married (e.g., widowed, divorced, separated)
- Never married

**HH1:** Including yourself, how many adults, 18 years old or older, live in your household? Please count people who live in your household half of the time or more.

\_\_ people

**HH2:** How many children, younger than 18 years old, live in your household half of the time or more?

\_\_ children

**HH3:** Do other adults or children in your household depend on your income to pay their expenses or contribute to household expenses?

- Yes
- No

**MIL:** Have you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard?

*Select one answer.*

- Never served in the military
- Only on active duty for training in the Reserves or National Guard
- Now on active duty
- On active duty in the past, but not now

**CIT: Are you a U.S. citizen?**

Yes

No

**DIS: This next question will help us better understand the career paths of individuals with different types of limitations. What is the USUAL degree of difficulty you have with...**

*Select one answer for each item.*

None    Slight    Moderate    Severe    Unable to do

SEEING words or letters in ordinary newsprint  
(with glasses/contact lenses, if you usually wear them)?

DEPTH PERCEPTION to judge distance from  
objects, moving or stationary (with glasses/contact  
lenses, if you usually wear them)?

HEARING what is normally said in conversation  
With another person (with a hearing aid, if you  
usually wear one)?

WALKING without human or mechanical  
Assistance or using stairs?

LIFTING or CARRYING something as heavy  
as 10 pounds, such as a bag of groceries?

CONCENTRATING, REMEMBERING, or MAKING  
DECISIONS because of a physical, mental,  
or emotional condition?

FINE DEXTERITY and FINGER NIMBLENESS such  
as picking a dime off a table?

TOUCH SENSITIVITY that allows you to feel  
attributes of objects (e.g., hot, rough) without  
needing to use another sense, like vision,  
to confirm?

HAND STRENGTH such as opening a jar that  
has never been opened?

**ACCOM:** Does your current employer(s) provide any special equipment to you to accommodate a physical limitation that you have? Please do not include safety and protective equipment.

Yes  
No

(if **ACCOM** = Yes) **Accom2:** What does your employer provide to you?

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**CONTACT:** Because we are interested in how education and employment change over time, we might contact you in the future. To help us contact you, please list an email address and phone numbers where you can be reached. We will not share your information.

Email address \_\_\_\_\_

Home phone number ( ) \_\_\_\_\_ - \_\_\_\_\_

Cell phone number ( ) \_\_\_\_\_ - \_\_\_\_\_

← Select this box to give consent to receive text messages for follow-up purposes only.

**CONCL:** Thank you for taking the time to complete this survey. If you have any additional comments that you'd like to share with us, please write them below.

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[End of Web Survey]