

GLOSSARY

Acronym	Definition
RAMY	Random Assignment Month and Year
CAPI	Computer-Assisted Personal Interview Software
CATI	Computer-Assisted Telephone Interview Software
[Name of Organization]	Compass Career Solutions, Sunrise Services, CORE Health, Impact

CATI Introduction

Hello, my name is []. May I please speak with _____?
[IF NECESSARY: [INSERT RESPONDENT FIRST & LAST NAME] has agreed to help with a study about employment programs at [NAME OF ORGANIZATION.]

IF RESPONDENT COMES TO THE PHONE: Hello, my name is []. I'm calling from Abt Associates concerning a study about employment programs at [NAME OF ORGANIZATION] you joined about 15 months ago?

IF PHONE OR IN-PERSON: Thank you for taking the time to talk with me today. I work for Abt Associates, or Abt, which is an independent research company. Abt is helping the Administration for Children and Families in the U.S. Department of Health and Human Services and the Social Security Administration with its evaluation of the Building Evidence on Employment Strategies - or BEES study.

Today, we are contacting you for a survey. You agreed to be in a study about a program offered by [NAME OF ORGANIZATION] called Fast Track to Employment. In this study, we are interested in learning about programs and services that help individuals receiving TANF or SNAP.

This survey will take about 30 minutes. We will be asking you questions about your use of different services that could help you find a job, education and training programs. When we are finished, you will be sent a \$25 gift card, as a thank you.

You agreed to be part of the study around [RAMY] when you signed a consent form to let researchers collect information from you. We need to talk with people who got into the program and those who did not. Your participation in this study will help policymakers and program staff better understand how to help people get better jobs, earn more, and improve general well-being.

[SKIP TO SCREENER/VERIFICATION]

WEB Introduction

Thank you for clicking the link to access your survey.

Abt is helping the Administration for Children and Families in the U.S. Department of Health and Human Services and the Social Security Administration with its evaluation of the Building Evidence on Employment Strategies - or BEES study.

You agreed to be in a study about a program offered by [NAME OF ORGANIZATION] called Fast Track to Employment. In this study, we are interested in learning about programs and services that help individuals receiving TANF or SNAP.

This survey will take about 30 minutes. We will be asking you questions about your use of different services that could help you find a job, education and training programs. When you complete the survey, you will be sent a \$25 gift card, as a thank you.

You agreed to be part of the study around [RAMY] when you signed a consent form to let researchers collect information from you. We need to talk with people who got into the program and those who did not. Your participation in this study will help policymakers and program staff better understand how to help people get better jobs, earn more, and improve general well-being.

Screener/Verification:

CATI: Before we begin, I'd like to confirm that I am speaking with the correct person.

WEB: We need to first confirm that you are the correct person for this survey.

1. In order to do so, could you please provide your date of birth? _____ (MM/DD/YYYY)
2. Again, to confirm that you are the correct person, could you please provide the last 4 digits of your Social Security number?

(IF Q1 does not match sample and Q2 does not match sample, read:)

CAPI DISCONTINUED TEXT Thank you for taking the time to answer these questions. The information you provided does not match our records. I will need to check with my supervisor to determine how to resolve this issue. If we are able to do so, I will give you a call back. Have a nice day – and thank you.

WEB DISCONTINUED TEXT: Thank you for taking the time to answer these questions. The information you provided does not match our records. We will investigate further to determine how to resolve this issue. If we are able to do so, we will contact you again. Have a nice day – and thank you.

INFORMED CONSENT

Thank you for confirming this information.

Next, we would like to start with a few assurances:

- All of your responses will be kept private.
- Your name will not appear in any written reports.
- Your responses to these questions are voluntary.
- You may choose not to answer any question or to stop the survey.
- Your responses will in no way affect your participation in any programs or your receipt of any public benefits or services.

Furthermore, the information you provide will only be used for research about different employment services. By participating, you will help the government learn if and how programs like [PROGRAM___] at [ORGANIZATION NAME] make a difference in people's lives and how to improve them.

According to the Paperwork Reduction Act (PRA), an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB number and expiration date for this collection are OMB #: 0970-0537, Exp: 02/28/2026.

WEB ONLY: Do we have your consent to continue?

- 1 YES [SKIP TO WEB INTRO FOR SECTION A]
- 2 NO [SKIP TO TERMINATION SCRIPT]

CAPI ONLY: And finally, this interview will be recorded for quality control purposes. Do I have your consent to continue?

- 1 YES [SKIP TO SECTION A]
- 2 NO

CAPI ONLY: May I ask if you are declining to consent to the interview because you are concerned about the possibility of being recorded?

- 1 DON'T WANT TO BE RECORDED [*CONTINUE TO RECORDING ISSUE*]
- 2 DON'T WANT TO DO INTERVIEW [*SKIP TO TERMINATION SCRIPT*]

CAPI ONLY RECORDING ISSUE: I understand. I can turn the recorder off and we can continue with the interview. Would that be OK?

- 1 Yes [*DISABLE RECORDER & CONTINUE TO SECTION A*]
- 2 No [*SKIP TO TERMINATION SCRIPT*]

TERMINATION SCRIPT

Thank you for your time. We are sorry that you are not able to participate in our study. If you change your mind, please call 888-474-6121 or email us at beesresearch@abtassoc.com.

WEB INTRO TO SECTION A

Thank you for agreeing to complete the survey. Please note:

- As you finish each screen, use the "Next" button at the bottom of the screen to save your answers and move to the next question.

- You can back up and change your answers on the previous page by using the "Back" button at the bottom of the screen. **Do not use the "Back" button in your browser.**

- If you choose to take a break from the survey, if your computer shuts down, or if you lose your Internet connection, you will be able to start again where you left off. Simply log back on using the link you received from us.

SECTION A: HOUSING

A_INTRO

Throughout this survey we are going to ask you to think about things that have happened in your life since [RAMY] – this is the date you applied to Fast Track to Employment at [NAME OF ORGANIZATION]. We are interested in what's happened in the lives of the people who applied – even if you did not participate or were not accepted into Fast Track to Employment.

To start things off, we would like to ask a few questions about you and where you are currently living and where you have lived since [RAMY] – that is the time you agreed to be a part of this study.

A1.

Which of the following best describes your current housing arrangement? Do you:

- 1 own your own home or apartment
- 2 rent your home or apartment
- 3 live in transitional housing or sober housing
- 4 live in a group home
- 5 live with friends or relatives and pay rent to them
- 6 live with friends or relatives and not pay rent to them
- 7 homeless, living on the street or in your car
- 8 live in emergency or temporary housing, that is in a shelter or are homeless or
- 9 have some other housing arrangement (*Please specify: _____*)
- 97 DON'T KNOW [SKIP TO A6]
- 98 PREFER NOT TO SAY [SKIP TO A6]

A2.

When did you start living here?

Please just give us your best estimate. This helps us understand your housing situation. Please remember all information you provide is private and will not be shared.

_____ (MM/YYYY)

[RANGE MM=1-12, YYYY:1950- PRESENT YEAR]

- 97/9997 DON'T KNOW
98/9998 PREFER NOT TO SAY

A3.

[IF A1=2, ASK A3 and A4, ELSE SKIP TO A5]

How would you describe where you live? Would you say it is:

- 1 Public housing—that is, housing owned by a federal, state or local government agency, such as [INSERT LOCAL NAMES/PROGRAMS]
- 2 Private housing for which part of your rent bill is paid by the government, such as Section 8 or Housing Choice vouchers
- 3 Or private housing paid for by you with no help from the government, that is the entire rent bill is paid without any help from the government to pay the rent.
- 7 DON'T KNOW

8 PREFER NOT TO SAY

A4

Do you live in a building where you had to apply based on your income?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

(ASK ALL)

A5.

Do you ever fear for your, or your family's, safety while staying here?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

A6.

Since [RAMY], how many times have you moved or changed where you were living?

If you are not certain, your best estimate is fine. This helps us understand your housing situation. Please remember all information you provide is private and will not be shared.

_____ NUMBER OF TIMES MOVED [RANGE 0-18]

- 95 More than 18 times
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

[IF A6=0 SKIP TO SECTION B]

A7.

Thinking about all of the places you have lived since [RAMY]

[IF A1=3, SKIP TO A8] Did you ever live in transitional housing? This is also known as recovery or sober housing.

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

A8

[IF A1=7 SKIP TO A9] Since [RAMY] was there ever a time that you were homeless and living on the street or in your car?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

A9.

[IF A1=8, SKIP TO A10] Since [RAMY], was there ever a time where you spent more than one night in emergency or temporary housing, that is a shelter or were homeless?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

A10.

[IF A1=6, SKIP TO B1] Since [RAMY], was there ever a time where you had to live for more than one night with friends, relatives, or acquaintances without paying rent because you had no other place to stay?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

SECTION B: SERVICE RECEIPT AND PARTICIPATION

B1

Next, we would like to learn about **all** of the assistance you may have received since [RAMY] from **any organizations or programs** in your community to help you find or keep a job, or to help you deal with problems that interfered in your ability to work. Please do not include help you may have received from family or friends.

Did you receive help with ...

a. preparing a resume, filling out job applications, or preparing for job interviews	<ul style="list-style-type: none"> 1 YES 2 NO 7 DON'T KNOW 8 PREFER NOT TO SAY
b. ...getting referrals to jobs or looking for jobs, including subsidized jobs, or deciding what kinds of jobs to look for	<ul style="list-style-type: none"> 1 YES 2 NO 7 DON'T KNOW 8 PREFER NOT TO SAY
c. ...planning your future career or educational goals, including a work or job assessment	<ul style="list-style-type: none"> 1 YES 2 NO 7 DON'T KNOW 8 PREFER NOT TO SAY
	<ul style="list-style-type: none"> 1 YES 2 NO 7 DON'T KNOW 8 PREFER NOT TO SAY

Did you receive help with ...

e. ... supports, accommodations, or coaching while working, provided by someone other than your employer	1	YES
	2	NO
	7	DON'T KNOW
	8	PREFER NOT TO SAY
f. ... On-the-Job Training (OJT), such as Community Jobs or Career Jump, as part of a program that reimbursed your employer for some of your wages during a training period	1	YES
	2	NO
	7	DON'T KNOW
	8	PREFER NOT TO SAY
g. ... how to act when you are at work -- this may include issues like being on time, managing your tasks, relating to your supervisor, and handling conflicts.	1	YES
	2	NO
	7	DON'T KNOW
	8	PREFER NOT TO SAY
h. ...learning how to answer employers' questions about your past work experience, education, criminal history, etc.	1	YES
	2	NO
	7	DON'T KNOW
	8	PREFER NOT TO SAY
i. ... understanding how work earnings or wage increases could affect eligibility for public benefits, such as SSI, SSDI, TANF, Food Stamps, or Medicaid	1	YES
	2	NO
	7	DON'T KNOW
	8	PREFER NOT TO SAY
j. ...some other employment service	1	YES (<i>Please specify:</i> _____)
	2	NO
	7	DON'T KNOW
	8	PREFER NOT TO SAY

[IF B1a- B1j ALL EQ 2, 7 OR 8 SKIP TO B6]

B2

Are you currently receiving any of these services related to finding or keeping a job?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

B3

[IF NUMBER OF 1/YES RESPONSES IN B1a -B1j SUMS TO 1, SHOW] How much time since [RAMY] did you spend participating in this service related to finding or keeping a job? Please give your answer in either days, weeks, or months.

[IF NUMBER OF 1/YES RESPONSES IN B1a-B1j SUMS TO MORE THAN 1, SHOW] How much time since [RAMY] did you spend participating in these services related to finding or keeping a job? Please give your answer in either days, weeks, or months.

Attachment K-3: 12- to 18-Month Follow-Up Participant Survey

1. ___ Days [RANGE 1 - 550]
 2. ___ Weeks [RANGE 1 - 78]
 3. ___ Months [RANGE 1 - 20]
- 997 Don't know
998 PREFER NOT TO SAY

B4

Where did you receive this help related to finding or keeping a job since [RAMY]? Was it at...

[INTERVIEWER: READ LIST, SELECT ALL THAT APPLY]

1. Fast Track to Employment at [Name of Organization]
 2. Community Services Office (CSO), Department of Social and Health Services (DSHS), WorkFirst or the welfare office
 3. BFET (Basic Food Employment & Training), or SNAP or Food Stamps office
 4. WorkSource office, or local WIOA/OneStop
 5. Foundational Community Supports, also known as FCS,
 6. An unemployment office
 7. An organization that addresses mental health or substance use, such as a clubhouse or community mental health center,
 8. A community-based organization that provides employment services or other social services
(Please specify: _____)or
996 from some other place? (Please specify: _____)
- 997 DON'T KNOW – [UNIQUE RESPONSE – SKIP TO B6]
998 PREFER NOT TO SAY – [UNIQUE RESPONSE – SKIP TO B6]

[IF ONLY 1 RESPONSE TO B4, SKIP TO B6]

B5.

[IF NUMBER RESPONSES IN B4 ARE MORE THAN 1, SHOW] Where did you receive most of these services? Was it at...

[RECALL & DISPLAY ANY RESPONSES FROM B4, DO NOT RECALL 97 OR 98 - SELECT ONE.]

1. Fast Track to Employment
2. [Welfare office] Community Services Office (CSO), Department of Social and Health Services (DSHS), WorkFirst or the welfare office
3. [SNAP or Food Stamps]
4. [WIOA/OneStop] WorkSource
5. Foundational Community Supports, also known as FCS,
6. An unemployment office
7. An organization that addresses mental health or substance use, such as a clubhouse or community mental health center,

Attachment K-3: 12- to 18-Month Follow-Up Participant Survey

8. A community-based organization that provides employment services or other social services
 (Please specify: _____), or
 96 from some other place? (Please specify: _____)
 97 DON'T KNOW – [UNIQUE RESPONSE – SKIP TO B6]
 98 PREFER NOT TO SAY – [UNIQUE RESPONSE – SKIP TO B6]

INSERT.Q1 I would like you to tell me about assistance you may have received since [RA month, RA Year] from organizations and programs in your community to help you find or keep a job, or to help you deal with problems that interfered in your ability to work. First...

Did you receive help with ...	
a. ...paying for transportation for a job – this may include money for gas, car repairs, bus passes, a loan of a vehicle, and the like?	1 YES
	2 NO
	7 DK
	8 REF
b. ...paying for interview or work clothes (or uniforms) or work tools	1 YES
	2 NO
	7 DK
	8 REF
c. ...finding or making childcare arrangements?	1 YES
	2 NO
	7 DK
	8 REF
d. ...paying for child care?	1 YES
	2 NO
	7 DK
	8 REF
e. ...paying rent or utilities?	1 YES
	2 NO
	7 DK
	8 REF

f. ...reimbursements for work-related expenses?	1	YES
	2	NO
	7	DK
	8	REF

IF INSERT.Q1 a, b, c, d, e, or f = 1/YES, THEN ASK INSERT.Q2.

INSERT.Q2.

You indicated that you received support to help you find or keep a job, or to help you deal with problems that interfered in your ability to work, including:

IF INSERT.Q1.a = 1/YES THEN RESTORE:	paying for transportation
IF INSERT.Q1.b = 1/YES THEN RESTORE:	paying for work clothes or tools
IF INSERT.Q1.c = 1/YES THEN RESTORE:	making child care arrangements
IF INSERT.Q1.d = 1/YES THEN RESTORE:	paying for child care
IF INSERT.Q1.e = 1/YES THEN RESTORE:	paying rent or utilities
IF INSERT.Q1.f = 1/YES THEN RESTORE:	reimbursements for work-related expenses

Where did you get this help? [Any place else?]

[INTERVIEWER: MULTIPLE RESPONSES ALLOWED; DO NOT READ LIST UNLESS R REQUIRES HELP NAMING ENTITY. DO NOT READ NAMES OF EXAMPLE PROGRAMS]

- 1 Fast Track to Employment
 - 2 [Welfare office] Community Services Office (CSO), Department of Social and Health Services (DSHS), WorkFirst or the welfare office
 - 3 [SNAP or Food Stamps]
 - 4 [WIOA/OneStop] WorkSource
 - 5 Foundational Community Supports, also known as FCS,
 - 6 An unemployment office
 - 7 An organization that addresses mental health or substance use, such as a clubhouse or community mental health center,
 - 8 A community-based organization that provides employment services or other social services (Please specify: _____), or
 - 96 from some other place? (Please specify: _____)
 - 97 DON'T KNOW – [UNIQUE RESPONSE – SKIP TO B6]
 - 98 PREFER NOT TO SAY – [UNIQUE RESPONSE – SKIP TO B6]

B6

Have you participated in any kind of education or training classes since [RAMY]? For example, GED preparation, classes at a training center or community college, or somewhere else?

Attachment K-3: 12- to 18-Month Follow-Up Participant Survey

When answering, please only include classes you have attended at least once. If you started classes before [RAMY] and continued after [RAMY], please tell us about your participation in that activity since [RAMY].

- 1 YES
- 2 NO [SKIP TO B14]
- 7 DON'T KNOW [SKIP TO B14]
- 8 PREFER NOT TO SAY [SKIP TO B14]

B6a.

Have you enrolled in **any** of the following types of education or training classes since [RAMY]?

B6b. Vocational or technical training? For example, training for careers in areas like auto repair, commercial driving, HVAC technician, medical coding and billing, etc.	1 YES 2 NO 7 DON'T KNOW 8 PREFER NOT TO SAY
B6c. English as a Second Language, ESL classes?	1. YES 2. NO 7 DON'T KNOW 8 PREFER NOT TO SAY
B6d. Adult Basic Education (WEB: (ABE)) or GED courses? (CAPI-DISPLAY: (INTERVIEWER: IF R SAYS "I am taking ABE", MARK AS YES))	1 YES 2 NO 7 DON'T KNOW 8 PREFER NOT TO SAY
B6e. Associate degree program?	1 YES 2 NO 7 DON'T KNOW 8 PREFER NOT TO SAY
B6f. Bachelors degree program?	1 YES 2 NO 7 DON'T KNOW 8 PREFER NOT TO SAY
B6g. Graduate school?	1 YES 2 NO 7 DON'T KNOW 8 PREFER NOT TO SAY
B6h. Some other type of education or training?	1 YES (<i>Please specify:</i> _____) 2 NO 7 DON'T KNOW 8 PREFER NOT TO SAY

[IF ALL B6a-B6h ARE 2,7, AND/OR 8 SKIP TO B14]

[IF B6b=1 ASK B7a ELSE SKIP B8a]

B7a What was the name of the program or school that offered the vocational or training classes? If you attended more than one program or school, please list them all.

Please list each program separately:

B7a1 _____

B7a2 _____

B7a3 _____

B7a4 _____

B7a5 _____

- 7 DON'T KNOW [UNIQUE RESPONSE]
- 8 PREFER NOT TO SAY [UNIQUE RESPONSE]

B7b

When did you start vocational and training classes? That is, when was your first class? Your best guess is fine.

MM (RANGE = 1-12, 97, 98) /YYYY (RANGE = 2000 - CURRENT YEAR, 9997, 9998)
97/9997 DON'T KNOW
98/9998 PREFER NOT TO SAY

B7c

In total, for about how long did you attend vocational and training classes? (WEB: You may answer in days, weeks or months.)

- 1. ___ Days [RANGE 1 - 550]
 - 2. ___ Weeks [RANGE 1 - 104]
 - 3. ___ Months [RANGE 1 - 24]
- 995 Still attending [SKIP TO B8A]
997 Don't know [SKIP TO B8A]
998 PREFER NOT TO SAY [SKIP TO B8A]

[IF B6c=1 ASK B8a ELSE SKIP TO B9a]

B8a

What was the name of the program or school that offered the English as a Second Language, or ESL classes?

Please specify: _____

- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

B8b

When did you start these ESL classes? That is, when was your first class? Your best guess is fine.

MM (RANGE = 1-12, 97, 98) /YYYY (RANGE = 2000 - CURRENT YEAR, 9997, 9998)

97/9997 DON'T KNOW
98/9998 PREFER NOT TO SAY

B8c

In total, for about how long did you attend these ESL classes? (WEB: You may answer in days, weeks or months.)

1. ___ Days [RANGE 1 - 550]
 2. ___ Weeks [RANGE 1 - 104]
 3. ___ Months [RANGE 1 - 24]
- 995 Still attending [SKIP TO B9A]
997 Don't know [SKIP TO B9A]
998 PREFER NOT TO SAY [SKIP TO B9A]

[IF B6d=1 ASK B9a ELSE SKIP TO B10a]

B9a

What was the name of the program or school that offered the Adult Basic Education or GED classes?

Please specify: _____

7 DON'T KNOW
8 PREFER NOT TO SAY

B9b

When did you start these Adult Basic Education or GED classes? That is, when was your first class? Your best guess is fine.

MM (RANGE = 1-12, 97, 98) /YYYY (RANGE = - CURRENT YEAR, 9997, 9998)
97/9997 DON'T KNOW

98/9998 PREFER NOT TO SAY

B9c

In total, for about how long did you attend these Adult Basic Education or GED classes? (WEB: You may answer in days, weeks or months.)

1. ___ Days [RANGE 1 - 550]
 2. ___ Weeks [RANGE 1 - 104]
 3. ___ Months [RANGE 1 - 24]
- 995 Still attending [SKIP TO B10A]
997 Don't know [SKIP TO B10A]
998 PREFER NOT TO SAY [SKIP TO B10A]

[IFB6e=1 ASK B10a ELSE SKIP TO B11a]

B10a

What was the name of the program or school that offered the Associate degree program?

Please specify: _____

- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

B10b

When did you start these Associate degree classes? That is, when did you take your first class? Your best guess is fine.

MM (RANGE = 1-12, 97, 98) /YYYY (RANGE = 2000 – CURRENT YEAR, 9997, 9998)
97/9997 DON'T KNOW
98/9998 PREFER NOT TO SAY

B10c

In total, for about how long did you attend these Associate degree classes? (WEB: You may answer in days, weeks or months.)

- 1. ___ Days [RANGE 1 - 550]
- 2. ___ Weeks [RANGE 1 - 104]
- 3. ___ Months [RANGE 1 - 24]
- 995 Still attending [SKIP TO B11A]
- 997 Don't know [SKIP TO B11A]
- 998 PREFER NOT TO SAY [SKIP TO B11A]

[IF B6f =1 ASK B11a ELSE SKIP TO B12a]

B11a

What was the name of the program or school that offered the Bachelor's degree program?

Please specify: _____

- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

B11b

When did you start these Bachelor's degree classes? That is, when did you take your first class? Your best guess is fine.

MM (RANGE = 1-12, 97, 98) /YYYY (RANGE = 2000 – CURRENT YEAR, 9997, 9998)
97/9997 DON'T KNOW
98/9998 PREFER NOT TO SAY

B11c

In total, for about how long did you attend these Bachelor's degree classes? (WEB: You may answer in days, weeks or months.)

1. ___ Days [RANGE 1 - 550]
 2. ___ Weeks [RANGE 1 - 104]
 3. ___ Months [RANGE 1 - 24]
- 995 Still attending [SKIP TO B12A]
997 Don't know [SKIP TO B12A]
998 PREFER NOT TO SAY [SKIP TO B12A]

[B6g=1 ASK B12a ELSE SKIP TO B13a]

B12a

What was the name of the program or school that offered the Graduate school classes?

Please specify: _____

- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

B12b

When did you start these Graduate school classes? That is, when did you take your first class? Your best guess is fine.

MM (RANGE = 1-12, 97, 98) /YYYY (RANGE = 2000 – CURRENT YEAR, 9997, 9998)
97/9997 DON'T KNOW
98/9998 PREFER NOT TO SAY

B12c

In total, for about how long did you attend these Graduate degree classes? (WEB: You may answer in days, weeks or months.)

1. ___ Days [RANGE 1 - 550]
 2. ___ Weeks [RANGE 1 - 104]
 3. ___ Months [RANGE 1 - 24]
- 995 Still attending [SKIP TO B13A]
997 Don't know [SKIP TO B13A]
998 PREFER NOT TO SAY [SKIP TO B13A]

[IF B6h=1 ASK B13a ELSE SKIP TO B14]

B13a

When did you start [RECALL B6g =1 SPECIFY TEXT, IF BLANK SHOW "this other education or training program you mentioned"] classes? That is, when did you take your first class? Your best guess is fine.

MM (RANGE = 1-12, 97, 98) /YYYY (RANGE = 2000 - CURRENT YEAR, 9997, 9998)

97/9997 DON'T KNOW
98/9998 PREFER NOT TO SAY

B13b

In total, for about how long did you attend these classes? (WEB: You may answer in days, weeks or months.)

- 1. ___ Days [RANGE 1 - 550]
- 2. ___ Weeks [RANGE 1 - 104]
- 3. ___ Months [RANGE 1 - 24]
- 995 Still attending [SKIP TO B14]
- 997 Don't know [SKIP TO B14]
- 998 PREFER NOT TO SAY [SKIP TO B14]

(ASK ALL)

B14

Since [RAMY], have you earned or received **any** technical, vocational, or professional certifications or licenses, perhaps from a community college, or training program?

For our purposes:

- A **technical/ vocational certification or license** may show that you are qualified to perform specific jobs like auto repair, commercial driving, HVAC technician, or medical coding and billing, for example.
- A **professional certification or license** shows you are qualified to perform specific jobs like, Certified Medical Assistant, Certified Construction Manager, or an IT certification.

- 1 YES
- 2 NO [SKIP TO B16]
- 7 DON'T KNOW [SKIP TO B16]
- 8 PREFER NOT TO SAY [SKIP TO B16]

B15

What type of licenses or certifications did you receive? What type of trade or work do they qualify you to do?

Please list each license or certificate separately, and indicate the type of trade or work they qualify you to do.

B15a _____

B15b _____

B15c _____

B15d _____

B15e _____

B15f _____

- 97 DON'T KNOW [UNIQUE RESPONSE]
- 98 PREFER NOT TO SAY [UNIQUE RESPONSE]

SECTION C: PROGRAM SATISFACTION

[PROGRAM GROUP ONLY – ALL ELSE SKIP TO SECTION D – EMPLOYMENT]

C INTRO

The next set of questions are about your experiences with services that are offered as part of Fast Track to Employment at [ORGANIZATION NAME]. [IF B4=1 DISPLAY “While you may have shared some of your experiences already, we have just a few more program specific questions to ask.”]

Just as a reminder - Fast Track to Employment is a program that you agreed to participate in as part of a research study.

C1

Are you currently working for pay? This includes any work where you get paid including self-employment, temporary work, work as a day laborer, work “off the books,” and paid work at an employment program.

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

C2

Are you currently receiving any employment services from Fast Track to Employment or participating in **any** Fast Track to Employment activities to help you find, get, or keep a job?

- 1 YES [SKIP TO CHECKPOINT1]
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

C3.

Since [RAMY], have you received **any** services from Fast Track to Employment or participated in **any** Fast Track to Employment activities to help you find, get, or keep a job?

Attachment K-3: 12- to 18-Month Follow-Up Participant Survey

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

[CHECKPOINT1

NO JOB, CURR WORK WITH BEES : C1=2,7,8 AND C2=1 SKIP TO C8]

NO JOB, NO CURR BEES, YES PAST BEES: C1=2,7,8 AND C2=2,7,8 AND C3=1 SKIP TO C6

NO JOB, NO CURR BEES, NO PAST BEES: C1=2,7,8 AND C2=2,7,8 AND C3=2,7,8 SKIP TO C4

CURR WORK, NO CURR BEES, NO PAST BEES: C1=1 AND C2=2,7,8 AND C3=2,7,8 SKIP TO C4

CURR WORK, CURR WORK WITH BEES: C1=1, C2=1 SKIP TO C8)

CURR WORK, NOT CURR BEES, PAST BEES YES: C1=1, C2=2,7,8, C3=1 SKIP C6]

C4

What was the reason, or reasons, you did not participate in Fast Track to Employment employment services? Was it because...

[NOTE: RESPONSE OPTIONS MAY BE CUSTOMIZED BY SITES]

Please select all that apply.

- 1 you got a job
- 2 you moved away
- 3 you had transportation issues
- 4 you had childcare problems
- 5 you or a family member had health problems
- 6 you did not have the time
- 7 you did not like the program or get along with the staff
- 8 you were worried you might lose your benefits if you got a job
- 9 you no longer wanted a job or
- 10 there was some other reason (*Please specify: _____*)

- 97 DON'T KNOW [UNIQUE RESPONSE – SKIP TO SECTION D]
- 98 PREFER NOT TO SAY [UNIQUE RESPONSE – SKIP TO SECTION D]

[IF C4 ONLY 1 RESPONSE IS SELECTED SKIP TO SECTION D OR IF C4 EQUAL TO 97 OR 98, SKIP TO SECTION D]

C5

Of the reasons you mentioned, which would you say is the **primary** reason you did not participate in Fast Track to Employment employment services? Was it because...

[RECALL AND DISPLAY ONLY RESPONSES SELECTED IN C4 – ALLOW ONLY 1 ANSWER]

- 1 you got a job
- 2 you moved away

Attachment K-3: 12- to 18-Month Follow-Up Participant Survey

- 3 you had transportation issues
- 4 you had childcare problems
- 5 you or a family member had health problems
- 6 you did not have the time
- 7 you did not like the program or get along with the staff
- 8 you were worried you might lose your benefits if you got a job
- 9 you no longer wanted a job or
- 10 [RECALL C4=11 TEXT]
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

[ALL C5 RESPONSES SKIP TO SECTON D]

C6

What was the reason, or reasons, you stopped going to Fast Track to Employment for employment services? Was it because...

[NOTE: RESPONSE OPTIONS MAY BE CUSTOMIZED BY SITES]

Please select all that apply.

- 1 you got a job
- 2 you moved away
- 3 you had transportation issues
- 4 you had childcare problems
- 5 you or a family member had health problems
- 6 you did not have the time
- 7 you did not like the program or get along with the staff
- 8 you were worried you might lose your benefits if you got a job
- 9 you no longer wanted a job or
- 10 there was some other reason (Please specify: _____)
- 97 DON'T KNOW [UNIQUE RESPONSE – SKIP TO C9]
- 98 PREFER NOT TO SAY [UNIQUE RESPONSE – SKIP TO C9]

[IF C6 =1, AND ONLY 1, SKIP TO C8

IF C6 ONLY HAS 1 RESPONSE EQUAL TO 2,3,4,5,6,7,8,9, 10,11 SELECTED, SKIP TO C9

IF C6 HAS MORE THAN ONE RESPONSE SELECTED, CONTINUE TO C7]

C7

What was the **primary** reason you stopped going to Fast Track to Employment for employment services? Was it because...

[NOTE: RESPONSE OPTIONS MAY BE CUSTOMIZED BY SITES]

[RECALL RESPONSES FROM C6 – SELECT 1]

- 1 you got a job
- 2 you moved away
- 3 you had transportation issues
- 4 you had childcare problems

- 5 you or a family member had health problems
- 6 you did not have the time
- 7 you did not like the program or get along with the staff
- 8 you were worried you might lose your benefits if you got a job
- 9 you no longer wanted a job or
- 10 [RECALL C6=11 TEXT]
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

[IF C6=1, ASK C8 ELSE SKIP TO C9]

C8.a

Did the Fast Track to Employment staff at [NAME OF ORGANIZATION] help you find a job [IF c2=2,7, OR 8: in the past]?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

C8.b

Did the Fast Track to Employment staff help you become more prepared for employment [IF c2=2,7, OR 8: in the past]?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

C8.c

Did the Fast Track to Employment staff help you maintain and succeed in your job [IF c2=2,7, OR 8: in the past]?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

C8.d

Did the Fast Track to Employment staff help you increase your earnings or get a better job [IF c2=2,7, OR 8: in the past]?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

C9

Thinking of your whole experience with Fast Track to Employment, how satisfied are you with the services you've received? Are you...

1. Very satisfied
2. Somewhat Satisfied
3. Not very satisfied, or
4. Not at all satisfied?

7 DON'T KNOW
8 PREFER NOT TO SAY

SECTION D: EMPLOYMENT

D_INTRO

[ASKED OF ALL RESPONDENTS]

[IF RESEARCH GROUP=PROGRAM & C1=1 DISPLAY] "Earlier you mentioned that you are currently working, now we would like to learn a bit more about that job and any other jobs you may have had since [RAMY], which is when you applied to Fast Track to Employment at [ORGANIZATION NAME].

[ELSE DISPLAY] Now we would like to learn about any jobs you may have had since [RAMY], which is when you applied to Fast Track to Employment at [ORGANIZATION NAME].

[IF RESEARCH GROUP=PROGRAM & C1=1, AUTOMARK D1=1 and SKIP TO D3]

D1

Have you worked for pay at all since [RAMY]? This would include any work where you get paid such as self-employment, temporary work, work as a day laborer, work "off the books," and paid work at an employment program.

- 1 YES [SKIP TO D3]
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

D2

A lot of people have irregular, odd, or side jobs, or do extra work to make ends meet. Have you done any work like that which you do for pay since [RAMY]?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

[IF D1=2, 7,8 AND D2=2,7, 8 SKIP TO D35]

JOB ROSTER [ALLOW UP TO 9]

D3

We would like to start with getting a list of all of the jobs you have had since [RAMY]. We would like to make a list of any current jobs, and work backwards -- meaning what was the job before this one, the job before that, and so forth.

This is simply to help make later questions more clear. We will not contact any employers. If you don't want to give the employer's name, just tell us what your job title was or the kind of work you did.

*INTERVIEWER: RECORD VERBATIM
PROGRAMMER: ALLOW 9 COMPANY NAMES.*

D3a_1 [DISPLAY FIRST TIME THROUGH]

What is the most recent job you have had since [RAMY]? This might be a current job, or what you were doing before now.

D3a_2-9 [DISPLAY]

What is the job you had before this one since [RAMY]?

EMPLOYER _X (1-9)

Employer Name: _____

- 95 SELF-EMPLOYED FOR THIS JOB [AUTO-MARK D3_SE_x=1, AND SKIP TO D3b_x]
- 96 [SHOW ONLY D3a_2-9] No other jobs [SKIP TO D3_SUMM]
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

D3_SE

[if D3a_X<>95, ASK:] Were you self-employed at [INSERT D3a_X TEXT]?

[FOR WEB: Self-employed means that you work for yourself, or own your own business.]

[FOR CAPI: INTERVIEWER NOTE IF NEEDED: Self-employed means that you work for yourself, or own your own business.]

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

[PROGRAMMER IF D3a_1=97 or 98 SKIP TO D35, IF D3a_2-9=97,98 SKIP TO D3_SUMM]

D3b_X (1-9) Is this a current job?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

[PROGRAMMER: IF D3b_X (1-8)=1, 2, 7 OR 8, RETURN TO D3A_X AND ASK ABOUT NEXT JOB; IF D3B_9=1, 2, 7 OR 8, CONTINUE TO D3c]

D3c

[ASK IF D3b_9 =1,2,7, 8] How many jobs in TOTAL have you had since [RAMY]?

_____ Number of Jobs [RANGE=9-90]

- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

WEB: Thank you for telling us about the jobs that you've had since [RAMY]. To confirm that all of the information is correct, Please review the jobs you've had since RAMY. If you need to adjust the name of the employer, please change the text you see in the box. If you need to delete a job because you did not work there since RAMY, please click DELETE JOB next to that specific job. If you think of a job that you haven't included, please click here to add that job.

CAPI: Thank you for telling me about the jobs that you've had since [RAMY]. To confirm that I have recorded all of the information correctly, I'm going to read back to you the information you provided. [READ EACH NAME, IDENTIFY IF IT IS SELF-EMPLOYED AND WHETHER IT IS A CURRENT JOB]

Are there any jobs that you have had since [RAMY], that I didn't include in what I just read to you?

CURRENT JOBS (MAIN EMPLOYER, THEN UP TO 2 MORE CURRENT JOBS)

D4.

[PROGRAMMER: IF THERE IS ONLY ONE JOB IN D3b_X (1-9)=1, COPY THE CORRESPONDING ITERATION D3a_X'S VALUE INTO MAINEMP AND SKIP TO D5; IF NO JOBS HAVE D3b_X(1-9)=1, COPY D3a_1'S VALUE INTO PRIORJOB AND SKIP TO D19; ELSE ASK D4]

Considering all of your current jobs – which one would you consider your **main employer**?

For our purposes, your **main employer** is the one where you work the most hours, or where you have worked the longest.

This is simply to help make later questions more clear. We will not contact your employer. If you would like, you can tell us your job title instead.

[PROGRAMMER DISPLAY D3a1-D3a_9 FOR CASES WHERE D3b1-D3b9=1
RESPONDENT SELECTS – SET THIS SELECTION AS "MAIN EMP"; COPY THE D3a_X (1-9) VALUE FOR THE FIRST RESPONSE WHERE D3b_X (1-9)=1 THAT WAS NOT SELECTED AS MAINEMP TO OCCURJOB1; IF 3 OR MORE INSTANCE OF D3b_X (1-9)=1; COPY THE NEXT RESPONSE THAT IS NOT MAINEMP OR OCCURJOB1 TO OCCURJOB2; CONTINUE TO D5 ONCE THESE VARIABLES ARE POPULATED

SET DUMMY VARIABLES:

If 1 response at D3a:

MAINEMP=answer from D3a_1

PRIORJOB=answer from D3a_1 if D3b_1<>1

If >1 response at D3a:

MAINEMP=D3a_1-9 response selected at D4

OCURRJOB1=first response not selected for MAINEMP

OCURRJOB2=Next response not selected for MAINEMP or OCCURJOB1

SET DUMMY VARIABLES TO BE USED AT D34:

ANY JOB NOT SET TO MAINEMP, OCCURJOB1, OCCURJOB2, PRIORJOB, SET TO:

OTHERJOB3

OTHERJOB4

OTHERJOB5

OTHERJOB6

OTHERJOB7

OTHERJOB8

OTHERJOB9]

CURRENT JOB & MAIN EMPLOYER SERIES

D5

When did your job with [MAINEMP] start?

MM (RANGE = 1-12, 97, 98) /YYYY (RANGE = 2015 - CURRENT YEAR, 9997, 9998)

97/9997	DON'T KNOW
98/9998	PREFER NOT TO SAY

D6

Including overtime, how many hours per week do you work with [MAINEMP]?

If your schedule is irregular or varies, how many hours did you work in the last week you worked at this job?

NUMBER OF HOURS [RANGE: 1 to 80]

96	OVER 80 HOURS PER WEEK
97	DON'T KNOW
98	PREFER NOT TO SAY

D7

What is your wage at [MAINEMP], before taxes? Please include tips, commissions, and regular overtime pay.

INTERVIEWER: IF JOB IS ON AN IRREGULAR SCHEDULE OR A COMMISSION BASIS, PROBE FOR HOW MUCH R MAKES IN A TYPICAL WEEK.

DISPLAY FOR WEB: If you work an irregular schedule, or for commissions, please estimate how much you make in a typical week. Your best guess is fine.

\$ _____ , _____ . _____

AMOUNT [RANGE: .01 -to 50,000.00]

99999.96	MORE THAN \$50,000
99999.97	DON'T KNOW [SKIP TO D10]
99999.98	PREFER NOT TO SAY [SKIP TO D10]

D8

Is that:

CAPI DISPLAY: INTERVIEWER: READ CATEGORIES UNTIL RESPONDENT INDICATES THE CORRECT SELECTION.

- 1 ...per hour?
- 2 ...per week?
- 3 ...per day?
- 4 ...every 2 weeks?
- 5 ...twice monthly?
- 6 ...monthly
- 7 ...annually?
- 8 ...or per task?
- 9 ...Or some other way? (*Please specify: _____*)
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

D9

Just to confirm, was that

- 1 before taxes, or
- 2 after taxes?
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

D10

What was the **most important resource** you used to find this job at [MAINEMP]? Was it...

- 1 a friend, relative, or acquaintance
- 2 a job posting or help-wanted ad found in the newspaper, on the computer, or somewhere else
- 3 Fast Track to Employment at [ORGANIZATION NAME]
- 4 an employment placement service at school or training provider
- 5 an employment program, such as a local WIOA/OneStop or an unemployment office
- 6 a church or community center
- 7 an employer that decided to retain you permanently after you were placed there in a temporary, transitional, or subsidized job,
- 8 or something else (*Please specify: _____*)
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

IF D10=3,4,5 AUTOMARK D11=1 AND GO TO D12

D11

Did staff from **any** agency or organization help you get this job?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

D12.

What kind of work do you do for or at [MAINEMP]? For example, are you a teacher, nurse's aide, plumber, childcare provider, cook, builder, etc.?

INTERVIEWER: ENTER VERBATIM RESPONSE< PROBE AS NEEDED

WEB INSTRUCTION DISPLAY: Please enter enough information so that we can understand the kind of work you do.

TEXT BOX _____

- 97 DON'T KNOW
- 98 REFUSE

[IF D12=97, 98 ASK, ELSE SKIP TO D13]

D12a

All of this information is private. We are not going to contact your employer or tell anyone who you are working for or what you are doing. For this study, it's important that we know the kinds of work people are doing. From the following list, would you please indicate what kind of work you are currently doing?

- 1 Restaurant & Hospitality – cooks, waitress, hostess, server, dishwasher, bartending, housekeeping, etc.
- 2 Retail – associates, managers, cashiers, stockers, merchandisers, clerks,
- 3 Healthcare – caregivers, LNA, homecare aide, patient care coordinator, dietary aide, counselling, respite staff
- 4 Laborer – construction, warehouse, package handler, forklift drivers, electrician, plumbing, road crews, landscaping
- 5 Education and Child Care – teacher, assistant teacher, afterschool programs, babysitting, etc
- 6 Drivers – CDL, bus, taxi, delivery, trucks, snow ploughs, etc.
- 7 Janitorial & maintenance – custodian, janitor, building maintenance, etc.
- 8 Office & clerical – receptionist, office assistant, administrative assistant, scheduler, filing, billing, networking
- 9 Something else? *(Please specify:_____)*
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

D13

Is this job...

- 1 permanent employment, including part-time work
- 2 seasonal work, temporary work through a temp agency, day labor, an odd job or
- 3 something else *(Please specify:_____)*
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

D14

Which of the following best describes your usual weekly work schedule at your job last month. Would you say you worked a...

- 1 daytime shift
- 2 an evening shift
- 3 a night shift
- 4 a rotating shift, that is one that changes regularly from days to evenings to nights,
- 5 a split shift, that is one consisting of two distinct periods each day,
- 6 an irregular schedule, that is one that changes from day to day or week to week, or
- 7 something else? *(Please specify: _____)*
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

[IF D3a FOR MAINEMP=95 or D3_SE for MAINEMP=1 SKIP TO CUREMPCHK]

D15

Which of the following benefits are available to you on your job, even if you do not participate or use them?

	YES	NO	DON'T KNOW	PREFER NOT TO SAY
a.) Health insurance?	1	2	7	8
b.) Sick days with full pay?	1	2	7	8
c.) Paid vacation?	1	2	7	8
d.) Paid holidays?	1	2	7	8
e.) Dental benefits, including any offered at a cost to you?	1	2	7	8
f.) A retirement or 401K plan?	1	2	7	8
g.) Tuition reimbursement?	1	2	7	8

D16

While working for [MAINEMP] since [RAMY] have you received a promotion, meaning that you moved to a higher position or job title? That is, have you had any changes to your job responsibilities, with or without, any changes to your wages or salary?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

D17

Do you think you are likely to move up or be promoted in the future?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

[CUREMPCHK—IF OCURRJOB1 AND/OR OCURRJOB2 ARE POPULATED, ASK NEXT SERIES FOR UP TO EACH AVAILABLE JOB, ELSE SKIP TO D34 – SOURCES FOR ALL OTHER JOBS]

D18

We are interested in understanding your current employment situation better. So next, we will ask a few questions about your other **current jobs**, but there won't be as many as we just asked you about [MAINEMP].

[PROGRAMMER – LOOP THROUGH D18aX-D18f_x FOR UP TO 2 CURRENT JOBS – TAKE FROM OTHER CURRENT JOB LIST (OCURRJOB1 and OCURRJOB2)]

D18a_x(1-2)

[DISPLAY FIRST TIME THROUGH] When did your job with [OCURRJOB1] start?

[DISPLAY SECOND TIME THROUGH] Now, let's move on to your other current job at [OCURRJOB2]. When did your job with [OCURRJOB2] start?

MM (RANGE = 1-12, 97, 98) /YYYY (RANGE = 2015 - CURRENT YEAR, 9997, 9998)

97/9997 DON'T KNOW
98/9998 PREFER NOT TO SAY

D18b_x (1-2)

Including overtime, how many hours per week do you work with [OCURRJOBX (1 OR 2)]?

If your schedule is irregular or varies, how many hours did you work in the last week you worked at this job?

NUMBER OF HOURS [RANGE: 1 to 80]

96 OVER 80 HOURS PER WEEK
97 DON'T KNOW
98 PREFER NOT TO SAY

D18c_x(1-2)

What is your wage at [OCURRJOBX (1 OR 2)], before taxes? Please include tips, commissions, and regular overtime pay.

INTERVIEWER: IF JOB IS ON AN IRREGULAR SCHEDULE OR A COMMISSION BASIS, PROBE FOR HOW MUCH R MAKES IN A TYPICAL WEEK.

DISPLAY FOR WEB: If you work an irregular schedule, or for commissions, please try to estimate how much you would make in a typical week.

\$ _____ , _____ [RANGE: .01 -to 50,000.00]
AMOUNT

99999.96 MORE THAN \$50,000

- 99999.97 DON'T KNO [SKIP TO D18f_x(1-2)]
- 99999.98 PREFER NOT TO SAY [SKIP TO INSTRUCTION D18f_x(1-2)]

D18d_x(1-2)

Is that:

INTERVIEWER: READ CATEGORIES UNTIL RESPONDENT INDICATES THE CORRECT SELECTION.

- 1 ...per hour?
- 2 ...per week?
- 3 ...per day?
- 4 ...every 2 weeks?
- 5 ...twice monthly?
- 6 ...monthly
- 7 ...annually?
- 8 ...or per task?
- 9 ...Or some other way? (*Please specify: _____*)
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

D18e_x (1-2)

Just to confirm, was that

- 1 before taxes, or
- 2 after taxes?
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

D18f_x(1-2)

What was the **most** important resource you used to find this job at [OCURRJOBX (1 OR 2)]? Was it...

- 1 a friend, relative, or acquaintance
- 2 a job posting or help-wanted ad found in the newspaper, on the computer, or somewhere else
- 3 Fast Track to Employment at [ORGANIZATION NAME]
- 4 an employment placement service at school or training provider
- 5 an employment program, such as a local WIOA/OneStop or an unemployment office
- 6 a church or community center
- 7 an employer that decided to retain you permanently after you were placed there in a temporary, transitional, or subsidized job
- 8 or something else (*Please specify: _____*)
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

IF D18f_x=3,4,5, AUTOMARK D18g_x=1 and GOTO INSTRUCTIONS BEFORE D19

D18g_x(1-2)

Did staff from any agency or organization help you get this job?

- 1 YES
- 2 NO

- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

[PROGRAMMER – LOOP BACK FOR NEXT CURRENT JOB IF OCURRJOB2 IS FILLED, ELSE SKIP TO D34]

PRIOR JOB LOOP

[ASK FOR ONLY 1 JOB GET FROM D3_SUM FOR FIRST D3a1-9 WHERE D3b1-9=2,7,8 – WHERE PRIORJOB IS FILLED]

D19

We would like to know a little bit about your most recent job since [RAMY]

When did your job with [PRIORJOB] start?

MM (RANGE = 1-12, 97, 98) /YYYY (RANGE = 2015 - CURRENT YEAR, 9997, 9998)

- 97/9997 DON'T KNOW
- 98/9998 PREFER NOT TO SAY

D20

When did your job at [PRIORJOB] end?

If you don't know, please just give us your best estimate. This helps us understand how long you were working. All information you provide is private and will not be shared.

MM (RANGE = 1-12, 97, 98) /YYYY (RANGE = 2017 - CURRENT YEAR, 9997, 9998)

- 97/9997 DON'T KNOW
- 98/9998 PREFER NOT TO SAY

D21

Including overtime, how many hours per week did you work with [PRIORJOB] when you left?

If your scheduled varied or was irregular, about how many hours did you work in the last week you worked at this job?

NUMBER OF HOUR [RANGE: 1 to 80]

- 96 OVER 80 HOURS PER WEEK
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

D22

What was your wage, before taxes, at [PRIORJOB] just before you left? Please include tips, commissions, and regular overtime pay.

INTERVIEWER: IF JOB IS ON AN IRREGULAR SCHEDULE OR A COMMISSION BASIS, PROBE FOR HOW MUCH R MAKES IN A TYPICAL WEEK.

DISPLAY FOR WEB: If you work an irregular schedule, or for commissions, please try to estimate how much you would make in a typical week.

\$ _____ , _____ [RANGE: .01 -to 50,000.00]
AMOUNT

- 99999.96 MORE THAN \$50,000
- 99999.97 DON'T KNOW [SKIP TO INSTRUCTION BEFORE D25]
- 99999.98 PREFER NOT TO SAY [SKIP TO INSTRUCTION BEFORE D25]

D23

Was that:

INTERVIEWER: READ CATEGORIES UNTIL RESPONDENT INDICATES THE CORRECT SELECTION.

- 1 ...per hour?
- 2 ...per week?
- 3 ...per day?
- 4 ...every 2 weeks?
- 5 ...twice monthly?
- 6 ...monthly
- 7 ...annually?
- 8 ...or per task?
- 9 ...or some other way? (Please specify: _____)
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

D24

Was that ...

- 1 before taxes, or
- 2 after taxes?
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

D25

What was the **most important resource** you used to find this job at [PRIORJOB]? Was it...

- 1 a friend, relative, or acquaintance
- 2 a job posting or help-wanted ad found in the newspaper, on the computer, or somewhere else
- 3 Fast Track to Employment at [ORGANIZATION NAME]
- 4 an employment placement service at school or training provider
- 5 an employment program, such as a local WIOA/OneStop or an unemployment office
- 6 a church or community center
- 7 an employer that decided to retain you permanently after you were placed there in a temporary, transitional, or subsidized job
- 8 or something else (Please specify: _____)

- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

IF D25=3,4,5 AUTOMARK D26=1 and GO TO D27

D26

Did staff from any agency or organization help you get this job?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

D27

What was the main reason you stopped working at [PRIORJOB]? Was it because...

[ALLOW ONLY ONE RESPONSE]

- 1 you got a new or different job
- 2 you were laid off
- 3 you were not interested in working
- 4 you were unable to work because of injury
- 5 you were unable to work because of illness
- 6 you were unable to work because of physical disability
- 7 you were unable to work because of mental disability
- 8 you were incarcerated
- 9 of pregnancy or childbirth
- 10 of family responsibilities
- 11 you were going to school
- 12 you found that the work just did not suit you
- 13 you relapsed
- 14 or, some other reason (*Please specify: _____*)
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

D28.

What kind of work did you do for or at [PRIORJOB]? For example, were you a teacher, nurse's aide, plumber, childcare provider, cook, builder, etc.

INTERVIEWER: ENTER VERBATIM RESPONSE< PROBE AS NEEDED

WEB INSTRUCTION DISPLAY: Please enter enough information so that we can understand the kind of work you were doing

TEXT BOX _____

- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

[IF D28=97, 98 ASK, ELSE SKIP TO D29]

D28a

All of this information is private. We are not going to contact your employer or tell anyone who you were working for or what you were doing. For this study, it's important that we know the kinds of work people are doing. From the following list, would you please indicate what kind of work you were doing?

- 1 Restaurant & Hospitality – cooks, waitress, hostess, server, dishwasher, bartending, housekeeping, etc.
- 2 Retail – associates, managers, cashiers, stockers, merchandisers, clerks,
- 3 Healthcare – caregivers, LNA, homecare aide, patient care coordinator, dietary aide, counselling, respite staff
- 4 Laborer – construction, warehouse, package handler, forklift drivers, electrician, plumbing, road crews, landscaping
- 5 Education and Child Care – teacher, assistant teacher, afterschool programs, babysitting, etc
- 6 Drivers – CDL, bus, taxi, delivery, trucks, snow ploughs, etc.
- 7 Janitorial & maintenance – custodian, janitor, building maintenance, etc.
- 8 Office & clerical – receptionist, office assistant, administrative assistant, scheduler, filing, billing, networking
- 9 Something else? *(Please specify:_____)*
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

D29

Was this job...

- 1 permanent employment, including part-time work
- 2 seasonal work, temporary work through a temp agency, day labor, an odd job
- 3 or, something else *(Please specify::_____)*
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

D30

Which of the following best describes your usual weekly work schedule at your job during the last month you were working there? Would you say you worked a...

- 1 daytime shift
- 2 an evening shift
- 3 a night shift
- 4 a rotating shift, that is one that changes regularly from days to evenings to nights
- 5 a split shift, that is one consisting of two distinct periods each day
- 6 an irregular schedule, that is one that changes from day to day or week to week or
- 7 something else *(Please specify:_____)*
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

[IF ITERATION FOR PRIORJOB for D3ax=95 OR D3_SE=1 SKIP TO D33]

D31

Which of the following benefits were available to you at [FILL EMPLOYER X], even if you do not participate or use them with [FILL EMPLOYER X]?

	YES	NO	DON'T KNOW	PREFER NOT TO SAY
a.) Health insurance?	1	2	7	8
b.) Sick days with full pay?	1	2	7	8
c.) Paid vacation?	1	2	7	8
d.) Paid holidays?	1	2	7	8
e.) Dental benefits, including any offered at a cost to you?	1	2	7	8
f.) A retirement or 401K plan?	1	2	7	8
g.) Tuition reimbursement?	1	2	7	8

D34 [ASK OF EVERYONE WITH JOBS IN D3_SUMM THAT WE HAVE NOT ASKED ABOUT TO DATE]
Earlier you also mentioned that you worked at the following:

[PROGRAMMER -RECALL JOBS NOT DISCUSSED IN RECENT JOB LOOPS-- OTHERJOB3-9, IF 95 SELECTED, DISPLAY "The job where you were self-employed":]

We are interested in knowing, which, if any of the following resources you used to find any of these jobs? Have you used...

(Please select all that apply.)

- 1 a friend, relative, or acquaintance
- 2 a job posting or help-wanted ad found in the newspaper, on the computer, or somewhere else
- 3 Fast Track to Employment at [ORGANIZATION NAME]
- 4 an employment placement service at school or training provider
- 5 an employment program, such as a local WIOA/OneStop or an unemployment office
- 6 a church or community center
- 7 an employer that decided to retain you permanently after you were placed there in a temporary, transitional, or subsidized job
- 8 or something else *(Please specify: _____)*
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

[PROGRAMMER ALL SKIP TO D36]

NO WORK SINCE RAMY

D35
What are some of the reasons why you have not worked at a job since [RAMY]? Would you say it was because...

(Please select all that apply)

- 1 of an injury
- 2 of an illness

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- 3 of a physical disability
- 4 of a mental disability
- 5 you were incarcerated
- 6 of a pregnancy or birth of a child
- 7 of family responsibilities
- 8 you were going to school
- 9 you were unable to find work
- 10 you were not interested in working
- 11 you relapsed
- 12 Or some other reason (*Please specify: _____*)
- 97 DON'T KNOW [UNIQUE RESPONSE] [SKIP TO D36]
- 98 PREFER NOT TO SAY [UNIQUE RESPONSE]] [SKIP TO D36]

[IF D35 ONLY 1 RESPONSE SELECTED AND NOT EQUAL TO 97 OR 98 SKIP TO D36]

D35a

Of the reasons you mentioned, which would you say is the **main** reason you have not worked at a job since [RAMY]? Would you say it was because...

[DISPLAY D35 VALUES SELECTED]

- 1 of an injury
- 2 of an illness
- 3 of a physical disability
- 4 of a mental disability
- 5 you were incarcerated
- 6 of a pregnancy or birth of a child
- 7 of family responsibilities
- 8 you were going to school
- 9 you were unable to find work
- 10 you were not interested in working
- 11 you relapsed
- 12 [DISPLAY D35=12 TEXT]
- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

D36

[IF RESPONDENT CURRENTLY WORKING, Eligible for Current job series questions, DISPLAY] Have you done anything to look for another job in the past four weeks?

[IF RESPONDENT NOT WORKING] Have you done anything to find work during the past four weeks?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

SECTION E: PHYSICAL AND MENTAL HEALTH

(Questions modified from 36-Item Short Form Health Survey developed at RAND as part of the Medical Outcomes Study, 1992.)

E_INTRO

Now, we would like to ask you some questions about your health.

E1. In general, would you say your health is:

- 1 Excellent
- 2 Very good
- 3 Good
- 4 Fair or
- 5 Poor
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

E2.

The following questions are about activities you might do in a **typical day**...

E2a. In a **typical day**, how much does your health limit your ability to do moderate activities, such as moving a table, pushing a vacuum cleaner, bowling, or play golf? Would you say that it...

- 1 Limits you a lot
- 2 Limits you a little
- 3 Does not limit you at all
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

E2b. In a **typical day**, how much does your health limit your ability to climb several flights of stairs? Would you say that it ...

- 1 Limits you a lot
- 2 Limits you a little
- 3 Does not limit you at all
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

E3.

Now we would like you to think about your physical health. During the **past 4 weeks**, because of your physical health, how often have you accomplished less than you would have liked with your work or other regular daily activities? Would you say...

- 1 All of the time
- 2 Most of the time
- 3 Some of the time
- 4 A little of the time
- 5 None of the time
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

E4.

During the past 4 weeks, because of your physical health, how often were you limited in the kind of work or other activities you could do? Would you say...

- 1 All of the time
- 2 Most of the time
- 3 Some of the time
- 4 A little of the time
- 5 None of the time
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

E5.

Now we would like you to think about any emotional problems (such as feeling depressed or anxious) you may have had during the **past 4 weeks**.

E6.

During the past 4 weeks, because of any emotional problems, how often have you accomplished less than you would have liked with your work or other regular daily activities? Would you say...

- 1 All of the time
- 2 Most of the time
- 3 Some of the time
- 4 A little of the time
- 5 None of the time
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

E7.

During the past 4 weeks, because of any emotional problems, how often did you do work or other activities less carefully? Would you say...

- 1 All of the time
- 2 Most of the time
- 3 Some of the time
- 4 A little of the time
- 5 None of the time
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

E8.

During the past 4 weeks, how much did pain interfere with your normal work, including both work outside the home and housework? Would you say it interfered

- 1 Not at all
- 2 A little bit
- 3 Moderately
- 4 Quite a bit or
- 5 Extremely
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

E9.

These questions are about how you feel and how things have been with you **during the past 4 weeks**. For each question, please give the one answer that comes closest to the way you have been feeling.

How much of the time **during the past 4 weeks**...

	All of the time	Most of the time	Some of the time	A little of the time	None of the time	DON'T KNOW	PREFER NOT TO SAY
a. Have you felt calm and peaceful? [IF CAPI DISPLAY "Would you say..."]	1	2	3	4	5	7	8
b. Did you have a lot of energy? ...	1	2	3	4	5	7	8
c. Have you felt downhearted and depressed?	1	2	3	4	5	7	8

E10.

During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with your social activities (like visiting with friends, relatives, etc.)? Would you say it interfered...

- 1 All of the time
- 2 Most of the time
- 3 Some of the time
- 4 A little of the time, or
- 5 None of the time
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

E11.

During the past 4 weeks, about how often did you feel **so depressed that nothing could cheer you up**? Would you say....

- 1 All of the time
- 2 Most of the time
- 3 Some of the time
- 4 A little of the time
- 5 Or none of the time
- 7 DON'T KNOW
- 9 PREFER NOT TO SAY

E12.

During the past 4 weeks, about how often did you feel **hopeless**? Would you say....

- 1 **All** of the time
- 2 **Most** of the time
- 3 **Some** of the time
- 4 **A little** of the time

- 5 Or **none** of the time
- 7 DON'T KNOW
- 9 PREFER NOT TO SAY

E13.

During the past 4 weeks, about how often did you feel **restless or fidgety**? Would you say..

- 1 **All** of the time
- 2 **Most** of the time
- 3 **Some** of the time
- 4 **A little** of the time
- 5 Or **none** of the time
- 7 DON'T KNOW
- 9 PREFER NOT TO SAY

E14.

During the past 4 weeks, about how often did you feel that **everything was an effort**? Would you say....

- 1 **All** of the time
- 2 **Most** of the time
- 3 **Some** of the time
- 4 **A little** of the time
- 5 Or **none** of the time
- 7 DON'T KNOW
- 9 PREFER NOT TO SAY

E15.

During the past 4 weeks, about how often did you feel **worthless**? Would you say....

- 1 **All** of the time
- 2 **Most** of the time
- 3 **Some** of the time
- 4 **A little** of the time
- 5 Or **none** of the time
- 7 DON'T KNOW
- 9 PREFER NOT TO SAY

E16.

During the past 4 weeks, about how often did you feel **nervous**? Would you say....

- 1 **All** of the time
- 2 **Most** of the time
- 3 **Some** of the time
- 4 **A little** of the time
- 5 Or **none** of the time
- 7 DON'T KNOW
- 9 PREFER NOT TO SAY

SECTION F: HOUSEHOLD INFORMATION, INCOME, AND MATERIAL HARDSHIP

F1.

Now, we would like to change topics and ask some questions about you and your family. What is your current marital status? Are you...

- 1 Married
- 2 Divorced
- 3 Separated
- 4 Widowed
- 5 Or never married
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

F2.

[IF F1=1] Does your spouse currently live with you?
[ELSE] Do you have a partner who currently lives with you?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

F3.

Including yourself, how many adults, aged 18 and older, currently live with you?

Include everyone aged 18 and older who usually lives with you, meaning stays with you at least two nights a week, even if they are away from home right now.

_____ People, including yourself [RANGE 1-20]

- 97 DON'T KNOW [SKIP TO F4]
- 98 PREFER NOT TO SAY [SKIP TO F4]

F3a.

Does the count of [INSERT F3 VALUE] adults include you?

- 1 YES
- 2 NO
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

F4.

How many children, under the age of 18, live with you? Please include your biological, adoptive, foster, step, or other children that you are responsible for.

By living with you, we mean spends at least two nights a week with you?

_____ CHILDREN [RANGE 00-20]

- 97 DON'T KNOW
- 98 PREFER NOT TO SAY

F5.

Now we have some questions about your current financial situation. Sometimes due to circumstances beyond your control, it can be difficult to meet all of your financial obligations.

Please consider the following situations and let us know if you have ever faced any of them.

Since [RAMY], has there been a time when...

	YES	NO	DON'T KNOW	PREFER NOT TO SAY
a. ...you did not pay the full amount of the rent or mortgage because you could not afford it?	1	2	7	8
b. ...you were evicted from your home or apartment for not paying the rent or mortgage?	1	2	7	8
c. ...you filed in court for bankruptcy?	1	2	7	8
d. ...you did not pay the full amount of the gas, oil, or electricity bills?	1	2	7	8
e. ...you had service turned off by the gas or electric company, or the oil company would not deliver oil?	1	2	7	8
f. ...you had cellular or land telephone service disconnected because payments were not made?	1	2	7	8
g. ...you could not fill or postponed filling a prescription for drugs when they were needed because you could not afford it?	1	2	7	8
h. ... you did not pay the full amount of child support payments because you could not afford it?	1	2	7	8
i. ...you did not pay the full amount of other bills?	1	2	7	8

F6.

Getting enough food can be a problem for some people. Which of these statements best describes the food eaten in your household in [PRIOR MONTH]?

Would you say there was...

- 1 enough of the kind of foods you want
- 2 enough, but not always the kinds of food you want
- 3 sometimes not enough to eat or
- 4 often not enough to eat
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

F7.

[ASK IF F3=1] Now, we are going to ask you some questions about the income, that is money and assistance, that you may have received since [RAMY]. Again, we want to assure you that none of your answers will be discussed with anyone.

Since [RAMY] did you receive income or assistance from any of the following sources?

[ASK IF F3>1] Now, we are going to ask you some questions about the income, that is money and assistance that came into your household for everyone who lived with you since [RAMY]. Please include all income from all the people who lived together in your household at least two nights a week. Again, we want to assure you that none of your answers will be discussed with anyone.

Since [RAMY], did you or anyone in your household receive income or assistance from any of the following sources?

	YES	NO	DON'T KNOW	PREFER NOT TO SAY
a. A job?	1	2	7	8
b. Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI)?	1	2	7	8
c. Public assistance or welfare, such as TANF or general relief, not including WIC or food stamps?	1	2	7	8
d. Unemployment Insurance?	1	2	7	8
e. Worker's compensation?	1	2	7	8
f. Disability?	1	2	7	8
g. Food stamps/SNAP/Basic Food/ Food Assistance Program	1	2	7	8
h. WIC?	1	2	7	8
i. Energy assistance?	1	2	7	8
j. Housing choice voucher, also known as Section 8, or public housing?	1	2	7	8
k. Veterans benefits	1	2	7	8
l. Other government source? (Please specify:___)	1	2	7	8

IF all F7_b-l =2,7,8, skip to F9

F8.

[ASK IF F3=1]

For each type of income you said you received, please tell us for how many months you received this income. Again, we want to assure you that none of your answers will be discussed with anyone.

Since [RAMY], for how many months did you receive income or assistance from...

[ASK IF F3>1]

For each type of income you said your household received, please tell us for how many months your household received this income. Again, we want to assure you that none of your answers will be discussed with anyone.

Since [RAMY], for how many months did your household receive income or assistance from...

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[RECALL ONLY ITEMS WHERE F7a-l=1]

	NUMBER OF MONTHS [RANGE: 1-18]	DON'T KNOW	PREFER NOT TO SAY
a. ITEM EXCLUDED IN F8			
b. Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI)?	___ MONTHS	97	98
c. Public assistance or welfare, such as [state specific program] or general relief, not including WIC or food stamps?	___ MONTHS	97	98
d. Unemployment Insurance?	___ MONTHS	97	98
e. Worker's compensation?	___ MONTHS	97	98
f. Disability?	___ MONTHS	97	98
g. Food stamps/SNAP/Basic Food/[Food Assistance Program?	___ MONTHS	97	98
h. WIC?	___ MONTHS	97	98
i. Energy assistance?	___ MONTHS	97	98
j. Housing choice voucher, also known as Section 8?	___ MONTHS	97	98
k. Veterans benefits	___ MONTHS	97	98
l. Other government source?	___ MONTHS	97	98

F9.

What type of health insurance do you currently have?

- 1 Medicaid or Apple Health
- 2 Private health insurance, including from the (Affordable Care Act) Exchange or Marketplace
- 3 Or some other kind (*Please specify:* _____)
- 4 None/uninsured
- 7 DON'T KNOW
- 8 PREFER NOT TO SAY

G. Contact Information

Respondent Information

Before we complete this survey, we would also like to make sure we have your contact information recorded correctly. This information will help us to ensure that you receive your gift card. We may also use this information to call you and ask how your survey experience was.

G1. We have your name recorded as [*FIRST MI LAST*]. Is this still correct or have you changed your name?

1. YES, STILL CORRECT [*SKIP TO G6*]
 2. NO, NAME CHANGED
 8. Prefer not to say
- a. What is your first name now?
 - b. What is your middle initial now?
 - c. What is your last name now?

G6. We have your email address recorded as [*abc@abc.abc*]. Is this still correct or do you have a new email address?

1. YES, STILL CORRECT
 2. NO, CHANGED
 3. NO LONGER HAVE ANY WORKING EMAIL ADDRESSES
 8. Prefer not to say
- a. What is your new email address? _____

IF MODE=WEB AND EMAILFLAG=1:

G8. We would like to give you a \$25 gift card as a thank you for your time today. Would you like to be directed to a gift card portal now to instantly redeem your gift card or would you like us to mail you your gift card? If we mail the gift card, it will take about 2-4 weeks for you to receive it.

1. Go to the gift card portal now (*SKIP TO G3 then RESOURCES*)
2. Mail the card (*CONTINUE*)
3. I don't want the gift card (*GO TO G3 THEN RESOURCES*)
8. Prefer not to say

G2. We have your address recorded as [STREET, APT, CITY, STATE, ZIP]. Is this where we should send the gift card?

1. YES, STILL CORRECT (SKIP TO G3)
2. NO, MOVED OR SEND GIFT CARD TO A DIFFERENT ADDRESS
3. I don't want the gift card (GO TO G3 THEN NOINCENTEND)

- a. What is your street address or PO box number? _____
- b. Is there a complex
- c. or building name? _____
- d. Is there an apartment number? _____
- e. In what city? _____
- f. In what state? _____
- g. What is the zip code? _____

G3.

[IF PRIMARY PHONE NUMBER IS MISSING FROM SAMPLE, SKIP TO G3c] We have your primary phone number recorded as [xxx-xxx-xxxx]. Is this still correct or do you have a new primary phone number? We may use your phone number to follow up on your survey experience or address issues with getting your gift card to you.

- 1 YES, STILL CORRECT (SKIP TO RESOURCES)
- 2 NO, CHANGED
- 8 Prefer not to say

G3a.

What is the new number, starting with the area code?

____ - ____ - _____

G3C. Do you have a phone number where we can reach you? We may use your phone number to follow up on your survey experience or address issues with getting your gift card to you.

1. YES, PHONE NUMBER IS AVAILABLE
2. NO (SKIP TO RESOURCES)
8. Prefer not to say

- b. What is the number, starting with the area code?

____ - ____ - _____

RESOURCES. Finally, we have discussed several topics today. I (WEB: We) have a list of local resources providing different services that are available to you should you feel you need assistance. I (WEB: We) can (IF FIM=IN PERSON: give; IF FIM=WEB OR PHONE: send) the list to you if you are interested. Would you like to get the resource list?

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1. YES, WANT TO RECEIVE THE LIST
2. NO (*SKIP TO APPROPRIATE CLOSING*)
 8. Prefer not to say (*SKIP TO APPROPRIATE CLOSING*)

RES1. IF FIM=WEB OR PHONE: Would you prefer to receive the list by email or do you want to receive a printed copy by mail?

1. EMAIL (*IF EMAILFLAG=1, SKIP TO RESEMAIL; IF EMAILFLAG=0 SKIP TO RES3*)
2. MAIL (*IF G2=1 OR 2, SKIP TO RESMAIL; IF G2 NOT ASKED, OR G2=3, SKIP TO RES4*)

RES2. IF FIM=IN PERSON DISPLAY: INTERVIEWER, PLEASE GIVE THE PARTICIPANT THE LOCAL RESOURCE SHEET AND SELECT 1 TO CONTINUE.

1. GAVE RESPONDENT RESOURCE LIST (*SKIP TO IN PERSON CLOSING*)
2. PARTICIPANT DECIDED NOT TO TAKE LIST (*SKIP TO IN PERSON CLOSING*)

RES3. What is the email address we should send the resource list to? _____
(*SKIP TO RESEMAIL*)

RES4. What is the mailing address we should send the resource list to?

- a. What is your street address or PO box number? _____
- b. Is there a complex
- c. or building name? _____
- d. Is there an apartment number? _____
- e. In what city? _____
- f. In what state? _____
- g. What is the zip code? _____

RESEMAIL. Thank you. We will send the resource list to you at the email address you have provided. You should expect to receive it (*WEB*: shortly; *PHONE*: within the next 24 – 48 hours).

RESMAIL. Thank you. We will send you the resource list at the mailing address you have provided. You should expect to receive it within the next two to four weeks.

PHONE CLOSING: Thank you very much for participating in this survey. We appreciate the time you have taken to share your experiences with us. You will receive your \$25 gift card in the mail in about two to four weeks. Thank you again and have a good day/evening.

IN PERSON CLOSING: Thank you very much for participating in this survey. We appreciate the time you have taken to share your experiences with us. Here is a \$25 gift card. Thank you again and have a good day/evening.

WEB CLOSING: Thank you very much for participating in this survey. We very much appreciate the time you have taken to share your experiences with us. Thank you again and have a good day. You will now be directed to a portal to access your gift card.

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NOINCENTEND: Thank you very much for participating in this survey. We very much appreciate the time you have taken to share your experiences with us. Thank you again and have a good day.

