



# U.S. Department of Labor

## Employment and Training Administration Office of Job Corps

ETA FORM #  
OMB Control No. 1205-0426  
Expiration Date:  
XX/XX/XXXX

## Appendix D – Employer and Work-Based Learning Partner Satisfaction Survey

Job Corps is assessing the satisfaction of employers that provide Job Corps students with work-based learning (WBL) opportunities or employ former Job Corps students. This survey is to discuss the employment of <STUDENT'S NAME>. On average, it takes about 10 minutes to complete this survey.

Job Corps will use responses to this data collection only for program evaluation purposes. We will not provide information that identifies you to anyone outside the study team, except as required by law. Your answers will not be shared with anyone outside of Job Corps in any manner that would enable someone to identify you.

### (Paperwork Reduction Act Public Burden Statement):

Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. Respondents' obligation to complete this form is required to obtain or retain benefits (P.L. 113-128). Public reporting burden is estimated to average 17 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of Information. Send comments regarding this burden estimate to the U.S. Department of Labor, Division of Adult Services, Room S-4209, Washington, D.C. 20210 or email at [ETA-PRA@dol.gov](mailto:ETA-PRA@dol.gov) (Paperwork Reduction Project 1205-0033). Please do not submit completed forms to this address.

**Q1. IF EMPLOYED:** Our records show that <STUDENT'S NAME> is currently/was employed at <NAME OF EMPLOYER >. Is that correct?

a	Yes	Go to Q4
b	No, was never employed at this location	Go to Q2
c	No, no longer employed at this location	Go to Q4
d	Don't Know	Go to Q2

**Q1. IF WBL:** Our records show that <STUDENT'S NAME> is currently/was participating in WBL <WBL SITE>. Is that correct?

a	Yes	Go to Q4
b	No, never participated in WBL at this location	Go to Q2
c	No, no longer participating in WBL at this location	Go to Q4
d	Don't Know	Go to Q2



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Q2. Are you the best person to discuss <STUDENT'S NAME>'s work as a <JOB TITLE>?

a	Yes	(PROCEED TO NEXT QUESTION)
b	No	(PLEASE PROVIDE THE NAME, ROLE, AND CONTRACT INFORMATION OF THE PERSON WHO WOULD BE BETTER SUITED TO DISCUSS THIS)
c	Don't know	(GO TO CLOSING)

Q3. Did <STUDENT's NAME> start <WORK or WBL> around <DATE REPORTED OR WBL  
START DATE>?

a	Yes	
b	No, that is not the correct start date	(ASK DATE)
c	Don't Know	

Q4. Can you confirm that <STUDENT's NAME>'s job title [IF 1=A, DISPLAY "is"; ELSE  
DISPLAY "was"] <JOB TITLE>?

a	Yes	
b	No, that is not the title	(ASK JOB TITLE)
c	Don't Know	

Q5. Are you in the HR department or <STUDENT'S NAME>'s immediate supervisor/team lead?

a	HR Department	
b	Immediate Supervisor/Team Lead	
b	Other	

*Thinking about your experience with <STUDENT's NAME>, answer each item by selecting the appropriate response from the following scale.*

	1 Strongly Agree	2 Agree	3 Neither Agree or Disagree	4 Disagree	5 Strongly Disagree	6 NA

Q6. They **have/had**  
the skills and



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knowledge needed appropriate to their position.						
Q7. They <b>are/were</b> motivated.						
Q8. They <b>adhere/adhered to</b> company expectations (e.g. on time, dress appropriately, etc.).						
Q9. They <b>have/had</b> positive interactions with others.						
Q10. They <b>take/took actions to improve themselves and their work performance.</b>						
Q11. I <b>am/was</b> satisfied with this employee.						
Q12. I would recommend this employee to another employer.						
Q13. I would employ another Job Corps student.						

*We want to get some additional information about your interaction with <ITA GRANTEE/center/CTS agency>.*

Q14. Did you have any interaction with <ITA GRANTEE/center/CTS agency>?

a	Yes	
b	No	(GO TO CLOSING)
c	Don't Know	(GO TO CLOSING)

*Thinking about your experience with <ITA GRANTEE/center/CTS agencies >, answer by selecting the appropriate response from the following scale:*

<hr/>	1	2	3	4	5
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	Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
Q15. My interactions with <ITA GRANTEE> have been positive.					
Q16. Any challenges or concerns during interactions with <ITA GRANTEE> have/had been resolved efficiently.					
Q17. I would work with <ITA GRANTEE> again.					

<CLOSING>

<END OF SURVEY>

May I speak with <NAME OF CONTACT PERSON>? My name is (INTERVIEWER'S NAME) with DIR. We work with Job Corps, a national training program for youth. Job Corps is assessing the satisfaction of employers that provide Job Corps students with work-based learning (WBL) opportunities or employ former Job Corps students. This survey is to discuss the employment of <STUDENT'S NAME>. On average, it takes about XX minutes to complete this survey. There is an available survey on the web if you would prefer to complete the survey online.

Before we begin the survey, we must be sure that you clearly understand a few points. Your participation in the survey is completely voluntary. Job Corps has obtained approval to conduct the survey from the federal government's Office of Management and Budget (OMB INFO HERE). All information you provide is confidential and used only to assess employer or WBL supervisor satisfaction with students that have participated in Job Corps. Responses to this data collection will be used only for program evaluation purposes. The reports prepared for this study will summarize



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findings across the sample and will not associate responses with a specific individual. We will not provide information that identifies you to anyone outside the study team, except as required by law. Your answers will not be shared with anyone outside of Job Corps in any manner that would enable someone to identify you. You may refuse to answer any questions that you do not want to answer. However, we hope that you will choose to answer as many questions as you can. This call may be monitored for quality assurance.

INTERVIEWER: SOME EMPLOYERS HAVE A POLICY NOT TO VERIFY EMPLOYMENT. OTHERS WILL ONLY VERIFY THAT A PERSON IS AN EMPLOYEE AND WILL GIVE NO OTHER INFORMATION. IF YOU FIND THAT THIS IS THE CASE, MARK APPROPRIATE THE ANSWER IN 1. AND GO TO THE CLOSING.



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