

Think College National Coordinating Center: Student Follow-Up Survey: ANNUAL

Student ID: _____



Please take a few minutes to tell us about what you are doing now. This survey helps make college better for students like you. If you are unsure about how to answer, ask a family member or friend to help you. Please return the survey in the envelope provided. Thank you!

Date completed: _____

Please check one:

- I am completing this survey myself
- or
- Someone helped me complete the survey

If any of your contact information has changed, please tell us your new...	
Email address	
Mobile phone	
Address	

How do you prefer we contact you? Email Phone call Mail Social media



Work

If you aren't sure how to answer these questions because of the impact of COVID-19, please reach out to the person who sent you this survey.

1. How many different paid jobs do you have now? _____job(s)

If you have at least one paid job now, **skip to question 2** (further down this page)
If you don't have a paid job now, answer this question:

Have you had a paid job in the last 12 months? Yes No

If you answered no to that question, **skip to question 15**
If you answered yes to that question, answer this question:

Has your job status changed because of COVID-19? Yes No

If no, **skip to question 15**
If yes, answer this question:

How has your job status changed? Select all that apply:

- I was laid off
- My job is on hold and will start again when my employer re-opens
- I now work from home
- Other/Note: _____

If you recently lost a job due to COVID-19, please **go to the last page of this survey** to answer the questions about that job

2. Thinking about all the jobs you have, about how many hours a week do you usually work?
_____hours

Next, we will ask you about any individual paid jobs that you have.

An individual paid job means you make at least minimum wage and you get paid for your work by your employer. This can include self-employment.

3. Is at least one of your jobs an individual paid job? Yes No

If you answered no to question 3, skip to **question 15**.
If you answered yes to question 3, continue to **question 4**.

You only need to answer these questions about one individual paid job. If you have more than one paid job, answer questions 4-14 about the job where you spend the most time.

At your individual paid job (or, if you have more than one, at the individual paid job where you spend the most time):

4. What is the name of your employer?

(for example, Target or FedEx. If you are self-employed, write "self")

5. What is your job title? _____

6. About how many hours a week do you usually work at this job? _____ hours

7. Do you want to work more hours? Yes No Don't know

8. When did you start this job? _____

9. How much are you paid at this job? If you aren't sure, look on your paystub.

\$_____ per hour

10. Overall, how satisfied are you at this job? Choose one:

Very satisfied Satisfied Dissatisfied Very dissatisfied

11. Have you received a raise in the last year? Yes No Don't know

12. Do you receive any of these benefits at your job? Check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Paid time off | <input type="checkbox"/> Life insurance |
| <input type="checkbox"/> Sick leave | <input type="checkbox"/> Retirement account (this might be called a 401(k) or IRA) |
| <input type="checkbox"/> Health insurance | <input type="checkbox"/> I don't know |

13. Is this the same job you had a year ago? Yes No Don't know

14. If you answered no to question 13, what changed? Check one.

- I have a new position with a new employer
- I have a new position with the same employer
- I have the same position, but my job description has changed

Now answer the following question (**everyone**).

15. Do you have any paid jobs that would not be considered an individual paid job?
Yes No

If you answered yes to question 15, answer **question 16**.

If you answered no to question 15, go to **question 17**.

16. What other type of job do you have? Check all that apply:

- Paid Internship (for-credit or non-credit)** – You have a paid job with intentional learning goals. You learn how to do a particular type of job so that you are more qualified for that type of job in the future.
- Federal Work Study** - You have a part-time paid job through your school that is part of your financial aid.
- Group Paid Work (Enclave or mobile crew)** - You work with a group of people with disabilities often moving from one worksite to another. You all do the same type of work (i.e. cleaning crew). You may make less than minimum wage.
- Work Training Site** - You work at a site for training but you do not have a regular paid job with the employer.
- Sheltered Workshop** - You work in a location with other people with disabilities where you and your coworkers receive supports. You are typically paid less than minimum wage.
- Other:** _____
- Don't know**

Now answer the following questions (**everyone**).

17. In the last year, have you participated in any volunteer work or unpaid internships? Check all that apply?

- No
- Volunteering and/or community service
- Don't know
- Unpaid internships
- Other: _____

18. Are you looking for a job now? Yes No Don't know

a. If yes, why are you looking for a job? _____

Continued over...

Other

19. In the last year, have you taken any classes at a college, university or vocational/technical school? Yes No Don't know

a. If you have, what is the name of the school and the program?

School (for example, Palmetto County Community College)

Program (for example, the Graduate Transition Program)

b. Did you earn a degree or certificate? Degree Certificate Neither Don't know

c. If you did, what is the name of the degree or certificate?

20. Overall, how satisfied are you with your social life at this time? Choose one:

Very satisfied

Satisfied

Dissatisfied

Very dissatisfied

21. Where do you live now? Choose one:

Apartment or home that is rented

Group home

Own home

Other: _____

Family's home

22. Who do you live with? Check all that apply:

Alone

With a roommate or roommates

With a family member

With a significant other or spouse

Other:

23. Do you receive any of these benefits? Check any that you know of:

None

Unemployment

SSI (supplemental security income)

Other:

SSDI (social security disability insurance)

Don't know

24. Do you have health insurance? Yes No Don't know

Thank you!

Updated 4/7/20

COVID-19 EMPLOYMENT QUESTIONS

Answer these questions if you recently lost a job due to COVID-19

You only need to answer these questions about one individual paid job. If you lost more than one paid job, answer questions 4-14 about the job where you spent the most time.

At your individual paid job that you recently lost:

4. What was the name of your employer?

(for example, Target or FedEx. If you are self-employed, write “self”)

5. What was your job title? _____

6. About how many hours a week did you usually work at this job? _____ hours

7. Did you want to work more hours? Yes No Don't know

8. When did you start this job? _____

9. How much were you paid at this job? If you aren't sure, look on your paystub.
\$_____ per hour

10. Overall, how satisfied were you at this job? Choose one:

Very satisfied Satisfied Dissatisfied Very dissatisfied

11. Had you received a raise in the last year? Yes No Don't know

12. Did you receive any of these benefits at your job? Check all that apply.

- | | |
|---|--|
| <input type="checkbox"/> Paid time off | <input type="checkbox"/> Life insurance |
| <input type="checkbox"/> Sick leave | <input type="checkbox"/> Retirement account (this might be called a 401(k) or IRA) |
| <input type="checkbox"/> Health insurance | <input type="checkbox"/> I don't know |

13. Was this the same job you had a year ago? Yes No Don't know

14. If you answered no to question 13, what changed? Check one.

- I have a new position with a new employer
- I have a new position with the same employer
- I have the same position, but my job description has changed

Now go back to page 4 and answer questions 15-24.