

## 2024 Follow-Up Survey of 2023 Concentrators – Mail Survey Form

Former Students:

In order to meet state and federal funding requirements, we're contacting students who took CTE programs in high school to check on their progress. We ask that you please take a few minutes to answer the following questions about what you're doing now and return the survey in the enclosed, prepaid envelope. **All responses will be kept confidential.** Complete each item by filling in the numbered circle corresponding to your answer (if your answer is ①, please completely fill in the circle like this ●).

Our records show that you took the program(s) listed below. If there is more than one program listed, we need you to choose one to refer to when answering the survey questions. If you are pursuing one of these programs more than the others, please select that program.

**Program(s) Taken**

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**Program to Follow-Up (check only one)**

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Person completing this survey (check one): ☐ Former Student | ☐ Other (specify): \_\_\_\_\_

### Part A: Current Status

NOTE: A response (1-Yes or 2-No) is **required** for Q1 a - g.

**Q1. What are you doing now? Are you...**

	<u>Yes</u>	<u>No</u>
a. In a training program or attending school or college?	①	②
b. Working as an apprentice?	①	②
c. Working? (includes paid leaves: vacation or sick leave)	①	②
d. On full-time, active duty in the military?	①	②
e. On part-time duty in the military? (e.g., National Guard, Reserves)	①	②
f. In a National and Community Service Program? (e.g., AmeriCorps, Peace Corps, Youth Corps)	①	②
g. Volunteering in the Peace Corps?	①	②
h. Other: → <i>Finish Part A, then skip to Part F</i>		
1. Other volunteerism (except Peace Corps) or working for no pay (specify): _____		<input type="checkbox"/>
2. Unpaid leave of absence (disability, family leave)		<input type="checkbox"/>
3. On seasonal layoff		<input type="checkbox"/>
4. Hospitalized, or in long-term care		<input type="checkbox"/>
5. Jail		<input type="checkbox"/>
6. Deceased → <i>Skip to Part F</i>		<input type="checkbox"/>
7. Other (specify): _____		<input type="checkbox"/>
8. Skip (N/A)		<input type="checkbox"/>

If not in school or training → Skip to Part C.

## Part B: School / Training

Q2. In your major area of study or training, how much do you use the skills you learned in this program?

<u>A Lot</u>	<u>Some</u>	<u>Hardly Ever</u>	<u>Not at All</u>
①	②	③	④

If 3 (hardly ever) or 4 (not at all):

a. Right now you don't use your training, but how much do you anticipate using it in the future?

①	②	③	④
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Q3. Where are you going to school?

(Note: If enrolled in more than one school, identify the **primary** one.)

① Business or trade school or career center

② Community college

③ College/university

④ Military institute (National Guard, West Point, Annapolis, Merchant Marines, etc.)

⑤ Other (specify): \_\_\_\_\_

Q4. What type of program are you in?

(When your study or training is complete, will you receive a certificate, associate's degree, or bachelor's degree; or are you in an apprenticeship, on-the-job training program, or another type of program?)

① Apprenticeship

② On-the-job training

③ Certificate

④ Associate's degree

⑤ Bachelor's degree

⑥ Other (specify): \_\_\_\_\_

If no current job → Skip to Part D.

## Part C: Employment (as it relates to your selected program)

Q5. On your job, how much would you say you're using the skills you were taught?

<u>A Lot</u>	<u>Some</u>	<u>Hardly Ever</u>	<u>Not at All</u>
①	②	③	④

Q6. How strongly do you agree with the statement "I am satisfied with my present job?"

<u>Strongly Agree</u>	<u>Agree</u>	<u>Disagree</u>	<u>Strongly Disagree</u>
①	②	③	④

Q7. How many hours a week do you work? \_\_\_\_\_ hrs/week

a. If not specific: Would you say it's 35 hours a week or more? ① Yes ② No

Q8. Including tips and commissions, how much do you make an hour (week, month, or year)? \$ \_\_\_\_\_ / ☐ hr ☐ wk ☐ mo ☐ yr  
☐ Skip (N/A)

If currently working → Skip to Part E.

## Part D: Only If Not Working

Q9. Are you currently looking for a job? ① Yes ② No

## Part E: Communication Exchange

What is the best way to contact you if we need to follow up on this survey? \_\_\_\_\_

## Part F: Comments - "Thank you. That's all I needed."

If there are comments you'd like to make to help us improve our programs, please attach them to your survey.