

TACOMA CLASS OF 2000: Life After High School

Student Questionnaire

This survey is being given by researchers at the University of Washington. We are interested in how your school, friends, and family affect your plans for what to do after high school. We hope our findings will help us to understand students better and allow us to offer suggestions to improve high school guidance and counseling.

We are looking at trends and overall patterns. That means we will never report the responses given by any single student.

We promise to protect your privacy. No one outside our research team will ever see your answers to the questionnaire.

You may skip any questions that you wish. But we hope you will answer as many questions as you can. The more complete the questionnaires, the better our results will be.

This survey is not a test. There are no right or wrong answers, only honest ones.

Most importantly, **thank you for filling out this survey**. We couldn't do our work without you.

PRACTICE QUESTIONS and GENERAL INSTRUCTIONS

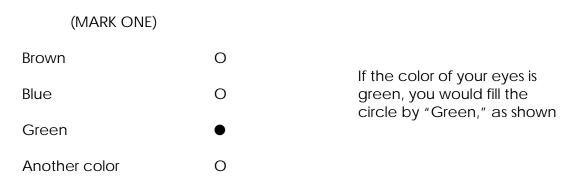
In this survey we ask about your "parent(s) or guardian(s)." When we say this, we mean <u>anyone who acts as a parent to you</u>. For example, this could be your parent, stepparent, foster-parent, guardian, parent's live-in partner, grandparent, etc. It is up to you to decide, but please refer to the same person/people throughout the survey.

PLEASE READ EACH QUESTION CAREFULLY.

It is important that you follow the directions for responding to each kind of question. For example, some questions ask you to mark only one response:

A. MARK ONE

What is the color of your eyes?



Some questions ask you to respond to a series of specific questions. For example:

B. MARK ONE ON EACH LINE

Do you plan to do any of the following next week?

(MARK ONE ON EACH LINE)

	<u>Yes</u>	Not <u>Sure</u>	<u>No</u>
a) Rent a videotape	Ο	Ο	•
b) Go to a baseball game	Ο	•	Ο
c) Study at a friend's house	•	Ο	Ο

If you do not plan to rent a videotape, are not sure about going to a baseball game next week, and plan to study at a friend's house, you would fill one circle on each line as shown. Depending on your answer to one question, you may be asked to skip one or more subsequent questions. For example:

C. QUESTIO	n with a skip			
I. Do you ev	ver eat chocola	ite?		
(MARK ON	JE)			
О	Yes → GO 1	O QUESTION II		
О	No → SKIP	to question III	I —	
ll. Do you alv	ways brush your	teeth after eat	ing chocolat	e?
(MARK C	ONE)			
О	Yes			
Ο	No			
III. Last week	-	ny of the followir ONE ON EACH I	-	•
		Yes	<u>No</u>	
Sawa	a play	Ο	Ο	
Went	to a movie	Ο	0	

If you eat chocolate, then answer questions I, II, and III. If you do not eat chocolate, answer questions I and III, but skip question II.

Ο

Now you may begin the survey.

sporting event O

Attended a

1) How far would you LIKE to go in school?

(MARK ONLY ONE)

Less than High School GraduationO
High School Graduation OnlyO
Less than 2 Years of College, Vocational, or Business School O
Two or More Years of College Including a 2-Year DegreeO
Finish College (4 or 5 Year Degree)O
Master's Degree or EquivalentO
Ph.D., M.D., or other Professional DegreeO

2) Realistically speaking, how far do you THINK you will get in school?

(MARK ONLY ONE)

Less than High School GraduationO
High School Graduation OnlyO
Less than 2 Years of College, Vocational, or Business School O
Two or More Years of College Including a 2-Year DegreeO
Finish College (4 or 5 Year Degree)O
Master's Degree or EquivalentO
Ph.D., M.D., or other Professional DegreeO

3) What is your date of birth?

Month _____ Day ____ Year _____

4) What is your sex?

Female	0
Male	0

5) Have you taken any of the following tests?

(MARK ONE FOR EACH LINE)

	l Have <u>Taken</u>	l Have NOT <u>Taken</u>	l Have NOT HEARD OF <u>This Test</u>
Preliminary Scholastic Aptitude Test, or the PSAT	0	Ο	0
Preliminary American College Test, or PACT	0	0	0
Armed Services Vocational Aptitude Battery, or ASVAB	Ο	Ο	Ο

6) Have you taken or are you planning to take any of the following tests?

College Poord Scholastic	l Have <u>Taken</u>	l am Planning <u>to Take</u>	l am NOT Planning <u>to Take</u>	l Have NOT HEARD OF <u>This Test</u>	Don't <u>Know</u>
College Board Scholastic Aptitude Test, or SAT	Ο	Ο	0	0	Ο
American College Test, or ACT	0	0	0	0	0
Any Advanced Placement, or AP tests	0	0	0	0	0

Please tell us how you feel about the following statements.

		Strongly <u>Agree</u>	<u>Agree</u>	<u>Disagree</u>	Strongly <u>Disagree</u>
7)	In my life, good luck is more important than hard work for success	0	0	0	0
8)	The opinions of my peers and friends are very important to me.	0	0	0	0
9)	When I make plans, I am almost certain I can make them work.	0	0	0	0
10)	How well I do in school is an important part of who I am as a person.	0	0	0	0
11)	I feel that I do not have much to be proud of.	0	0	0	0
12)	My family has always expected me to go to college.	0	0	0	0
13)	Every time I try to get ahead, something or somebody stops me.	0	0	0	0
14)	My best friends encourage me to do well.	0	0	0	0
15)	I am left out of things going on around me.	0	0	0	0
16)	My school provides a caring, encouraging environment.	0	0	0	0
17)	My plans hardly ever work out, so planning only makes me unhappy.	0	0	0	0
18)	My family does not care what I do after high school.	0	0	0	0

19) Do you have a job lined up after high school?

(MARK ONE)

(MARK ONE)

Yes, I will continue with the job I have nowO
Yes, I will work at a new job that is already lined upO
No, but I plan to get a permanent jobO
No, but I plan to get a temporary summer jobO
No, I have no plans of getting a jobO

20) Do you plan to join the Armed Forces (including the Coast Guard, National Guard, Reserves, or ROTC)?

No, I do not plan to join the Armed Forces	
Yes, I have already joined	
Yes, I plan to join after I leave high school)
Yes, I plan to join sometime in the future)
Don't know)

21) Which branch of the Armed Forces have you joined or do you plan to join in the future? (MARK ONE)

ArmyONavyOMarinesOAir ForceOCoast GuardOCoast GuardONational Guard or ReservesOROTC (Reserve Officers Training Corp)ODon't knowO

22) Please rank order the top 3 reasons why you plan to join the Armed Forces. Mark "1" for the most important reason, "2" for the second most important, and "3" for the third most important?

RANK of IMPORTANCE (1 through 3)

To serve my country
I need a job
I didn't get into the college or university that I wanted
For future job training
To provide money for my education
Other (Write in:))

23) a) Have you participated in the "Running Start" program through your high school?

No O
YesO

b) IF YES, which school(s) did you attend through the "Running Start" program?

(MARK ALL THAT APPLY)

Bates Technical CollegeO
Clover Park Technical CollegeO
Green River Community CollegeO
Highline Community CollegeO
New Market Vocational CollegeO
Pierce CollegeO
Renton Vocational Technical CollegeO
Seattle Central Community CollegeO
South Puget Sound Community CollegeO
Tacoma Community CollegeO

24) Do you plan to go on to college or other additional schooling right after high school? That is, do you plan to be continuing your education <u>THIS FALL</u>?

NoO	
Don't KnowO	
YesO	→ SKIP TO QUESTION 26 (on page 10)

25) Which of the following are reasons why you have decided NOT to continue your education right after high school?

(MARK ONE FOR EACH LINE)

	One of My <u>Reasons</u>	NOT One of <u>My Reasons</u>
a) I do not like school.	Ο	Ο
b) My grades are not high enough.	0	0
c) My college admission scores were not high enough.	Ο	0
d) I will not need more education for the career I want.	Ο	0
e) I cannot afford to continue my education.	Ο	0
f) I didn't get into any schools I applied to.	Ο	0
g) I haven't taken the right courses.	Ο	0
 h) No one in my family has ever continued their education after high school. 	Ο	О
i) I plan to take some time off before going to school.	Ο	0
j) I'd rather work and make money than go on to school	. О	0
k) I plan to be a full-time homemaker.	Ο	0
I) I do not feel that going on to school is important.	Ο	0
m) I need to help support my family.	Ο	0
n) I plan to join the armed services.	0	0
 I could not afford to take the necessary tests. 	0	0
p) No one has encouraged me to go.	0	0

→ IF YOU WILL NOT CONTINUE YOUR EDUCATION RIGHT AFTER HIGH SCHOOL, SKIP TO QUESTION 31 (on page 14)

26) a) What is the name and location of the college, professional, or technical school you will most likely attend in the fall?

Name	_ City	_ State
Don't know		. 0
b) Have you <u>APPLIED</u> to this school?		
Yes		. O
No		. O
c) Have you <u>BEEN ACCEPTED</u> to this school?		
Yes		. O
No		. O
Don't know		. O

27) a) If you cannot attend this first school, what is your second-choice school?

Name	City	State
I don't have a second-choice school		O
Don't know		O
b) Have you <u>APPLIED</u> to this school?		
Yes		O
No		O
c) Have you <u>BEEN ACCEPTED</u> to this school?		
Yes		O
No		0
Don't know		O

28)	Please tell us the names and locations of other schools to which you have applied, if any.				
a)	Name	City	_State		
	Have you <u>BEEN ACCEPTED</u> to this school?				
	Yes		O		
	No		O		
	Don't know		O		
b)	Name	City	_ State		
	Have you <u>BEEN ACCEPTED</u> to this school?				
	Yes		O		
	No		O		
	Don't know		O		
c)	Name	_ City	_State		
	Have you <u>BEEN ACCEPTED</u> to this school?				
	Yes		O		
	No		O		
	Don't know		O		
d)	Name	City	_State		
	Have you <u>BEEN ACCEPTED</u> to this school?				
	Yes		O		
	No		O		
	Don't know		O		

29)	 a) Did you <u>apply</u> for financial aid (loans, gran schools? 	ts, or scholarships) at any of these
	No	O
	Didn't know of any to apply for	O
	Don't Know	O
	Yes	O
	b) IF YES, have you <u>been awarded</u> any financ	cial aid from any of these schools?
	Yes	O
	No	O
	Don't Know	O
	c) IF YES, <u>what kind</u> of financial aid were you	awarded?
	(MARK ALL 1	THAT APPLY)
	Loan(s)	Ο
	Scholarship(s) or Grant(s)	O
	Work-Study	O
	Don't Know	O

30) In choosing a college or university to attend, how important to you are/were each of the following?

	Not Important	Somewhat <u>Important</u>	Very Important
 a) Low expenses (tuition, books, room and board) 	Ο	Ο	Ο
 b) Availability of financial aid, such as a school loan, scholarship, or grant 	0	0	0
 c) Strong reputation of the school's athletic programs 	Ο	Ο	Ο
 Ability to attend school while living at home 	0	0	0
e) Chance to live away from home	Ο	Ο	Ο
f) A religious environment	0	0	0
g) A good record in placing graduates in jo	obs O	Ο	Ο
 h) Strong reputation of the school's academic programs 	0	Ο	0
 Availability of a degree program that wil allow me to get a job in my chosen field 	I O	Ο	Ο
j) Racial/ethnic mix of the students or facu	lty O	0	0
k) Size of the school	Ο	Ο	Ο
I) Family or friends attend(ed) this school	0	0	0

31) a) Have you ever heard of I-200 [the initiative that restricted affirmative action by the government in Washington State]?

	(MARK ONE)
I have not heard anything at all about it	O
I am not quite sure what it was about	0
I have heard something about it	0
I have heard a lot about it	O

b) IF YOU HAVE HEARD OF IT, what do you think will be the impact of I-200?

In this survey we ask about your "parent(s) or guardian(s)." When we say this, we mean <u>anyone who acts as a parent to you</u>. For example, this could be your parent, step-parent, foster-parent, guardian, parent's live-in partner, grandparent, etc. It is up to you to decide, but please refer to the same person/people throughout the survey.

Please tell us how often the following things happen during this school year.

	(MARK ONE FOR EACH LINE)						
		<u>Never</u>	<u>Rarely</u>	<u>Sometimes</u>	<u>Often</u>		
32)	How often do your parent(s) or guardian(s) help with or check on whether you have done your homework?	0	0	0	0		
33)	How often does another adult (like a tutor) help with or check on whether you have done your homework?	0	0	0	0		
34)	How often do your parent(s) or guardian(s) limit the amount of time you go out with friends on school nights?	0	0	0	0		
35)	How often have you and your parent(s) or guardian(s) discussed school activities or events of particular interest to you?	0	0	0	0		
36)	How often have you and your parent(s) or guardian(s) discussed going to college?	0	0	Ο	0		

Please tell us about the plans of your high school friends.

		None <u>or Some</u>	Less <u>than Half</u>	About <u>Half</u>	More <u>Than Half</u>	Most <u>or All</u>	Don't <u>Know</u>
37)	How many left high school without graduating?	Ο	0	0	0	0	0
38)	How many are planning to work full-time instead of continuing their education after high school?	Ο	Ο	Ο	Ο	Ο	0
39)	How many have taken or will take the SAT or ACT college entrance examination?	0	Ο	Ο	Ο	Ο	Ο
40)	How many are planning to attend a two-year community college, trade school, or vocational school?	Ο	0	0	0	Ο	0
41)	How many are planning to join the armed services?	0	Ο	Ο	Ο	Ο	Ο
42)	How many are planning to attend a four-year college?	Ο	0	0	0	0	0

43) What does your <u>FATHER</u> or male guardian think is the most important thing for you to do after high school?

(MARK ONE)

Go to collegeO
Enter a trade school, vocational school or work apprenticeship programO
Enter military serviceO
Get a jobO
Get marriedO
I don't knowO
Does not apply (no male parent/guardian)

44) What does your <u>MOTHER</u> or female guardian think is the most important thing for you to do after high school?

(MARK ONE)

Go to college O
Enter a trade school, vocational school or work apprenticeship programO
Enter military serviceO
Get a jobO
Get marriedO
I don't knowO
Does not apply (no female parent/guardian)

45) What do your <u>BROTHERS or SISTERS</u> think is the most important thing for you to do after high school?

Go to collegeO
Enter a trade school, vocational school or work apprenticeship programO
Enter military serviceO
Get a jobO
Get marriedO
I don't knowO
Does not apply (no brothers or sisters)O

46) What do your <u>FRIENDS</u> think is the most important thing for you to do after high school?

(MARK ONE)

Go to college	O
Enter a trade school, vocational school or work apprenticeship program	O
Enter military service	O
Get a job	O
Get married	O
I don't know	O

47) What does <u>AN ADULT WHOSE ADVICE YOU VALUE</u> think is the most important thing for you to do after high school?

(MARK ONE)

Go to college O
Enter a trade school, vocational school or work apprenticeship programO
Enter military serviceO
Get a jobO
Get marriedO
I don't knowO

48) What does your <u>FAVORITE TEACHER</u> think is the most important thing for you to do after high school?

Go to collegeO
Enter a trade school, vocational school or work apprenticeship programO
Enter military serviceO
Get a jobO
Get marriedO
I don't knowO

49) How far in school do you think your <u>FATHER</u> or male guardian wants you to go? Please mark the highest level of schooling you think he wants you to achieve.

(MARK ONE)

Less than High School Graduation	0
High School Graduation Only	0
Less than 2 Years of College, Vocational, or Business School	0
2 or More Years of College Including a 2-Year Degree	0
Finish College (4 or 5 Year Degree)	0
Master's Degree or Equivalent	0
Ph.D., M.D., or other Professional Degree	0
Don't Know	0
Does not apply (no male parent/guardian)	0

50) How far in school do you think your <u>MOTHER</u> or female guardian wants you to go? Please mark the highest level of schooling you think she wants you to achieve.

Less than High School Graduation	0
High School Graduation Only	0
Less than 2 Years of College, Vocational, or Business School	0
2 or More Years of College Including a 2-Year Degree	0
Finish College (4 or 5 Year Degree)	0
Master's Degree or Equivalent	0
Ph.D., M.D., or other Professional Degree	0
Don't Know	0
Does not apply (no female parent/guardian)	0

51) Have you participated in any of the following school activities during the current school year? How many hours do/did you spend on each activity during a typical week when the activity is going on?

(MARK ALL THAT APPLY)

Hours Spent

		Participated	per Week
a)	NoneO		
b)	Academic Decathlon	O	hours/week
c)	Business Leaders (FBLA)	O	hours/week
d)	Cheerleadership	O	hours/week
e)	Chess Club	O	hours/week
f)	Computer Club	O	hours/week
g)	Community Service or Volunteering	O	hours/week
h)	DECA Club	O	hours/week
i)	Dance	O	hours/week
j)	Debate Club Or Speech Team	O	hours/week
k)	Drama Club	O	hours/week
I)	Drill Team	O	hours/week
m)	Foreign Language Club	O	hours/week
n)	High 5 Club	O	hours/week
o)	International Club	O	hours/week
p)	Intramural Or Club Sports	O	hours/week
q)	Journalism/Newspaper	O	hours/week
r)	Knowledge Bowl	O	hours/week
s)	Multicultural Organization	O	hours/week
t)	Orchestra	O	hours/week
u)	Pep Band	O	hours/week
v)	Pep Club	O	hours/week
w)	Running Club	O	hours/week
x)	Ski Club	O	hours/week
y)	Sunshine Club	O	hours/week
z)	School Sports (Varsity Or Junior Varsity)	O	hours/week
aa)	Vocal Music Club	O	hours/week
bb)	Yearbook	O	hours/week
cc)	Other (PLEASE SPECIFY) O	hours/week
dd)	Other (PLEASE SPECIFY) O	hours/week

How do you feel about the following statements about your current school and teachers?

(MARK ONE FOR EACH LINE)

		Strongly <u>Agree</u>	<u>Agree</u>	<u>Disagree</u>	Strongly <u>Disagree</u>
52)	Students make friends with students of other racial and ethnic groups.	0	Ο	Ο	0
53)	The teaching is good.	0	0	0	0
54)	Teachers are interested in students.	0	Ο	Ο	0
55)	I don't feel safe in this school.	0	0	0	0
56)	Disruptions by other students get in the way of my learning.	0	Ο	Ο	0
57)	Fights often occur between different racial or ethnic groups	s. O	0	0	0
58)	Students are graded fairly.	Ο	Ο	Ο	0
59)	Discipline is fair.	Ο	0	0	0

60) Were you ever held back (made to repeat) a grade in school?

Yes (specify grade: _	·······) O
No		O

61) Overall, about how much time do you spend on homework <u>EACH WEEK</u>, in school? Outside of school?

(MARK ONE IN EACH COLUMN)

Outside In School of School

None	O	O
Less than 1 hour	O	O
1 or 2 hours	O	O
3 or 4 hours	O	O
5 or 6 hours	O	O
7, 8, or 9 hours	O	O
Over 10 hours	O	O

62) Did you attend any of the following before you went to first grade?

	(MARK ONE FOR EACH LINE)					
	Yes	<u>No</u>	Don't <u>Know</u>			
a) Day care program	Ο	Ο	Ο			
b) Nursery or pre-school	О	0	0			
c) Head Start	Ο	0	0			
d) Kindergarten	О	Ο	Ο			

63) IN GENERAL, what grades do you get?

Mostly A's	O
Half A's and Half B's	O
Mostly B's	O
Half B's and Half C's	O
Mostly C's	O
Half C's and Half D's	O
Mostly D's	O
Mostly Below D	O

Think about your experiences since the beginning of <u>THIS SCHOOL YEAR</u>. How many times have the following things happened to you since then? (Please remember that all of your answers are confidential.)

		Never	1-2 <u>Times</u>	3-6 <u>Times</u>	7-9 <u>Times</u>	Over 10 <u>Times</u>
64)	I was late for school.	Ο	Ο	Ο	Ο	Ο
65)	I cut or skipped my classes.	Ο	0	0	Ο	0
66)	I was tired in class.	Ο	Ο	Ο	Ο	Ο
67)	l went to class without a pencil, pen, or paper.	0	0	0	Ο	Ο
68)	l went to class without my books.	0	Ο	Ο	Ο	Ο
69)	I went to class without my homework completed.	0	0	0	0	Ο
70)	l got in trouble for not following school rules.	0	Ο	Ο	0	0
71)	I missed a day of school.	0	0	0	Ο	0
72)	l was put on in-school suspension.	0	Ο	Ο	0	Ο
73)	l was suspended or put on probation from school.	0	0	0	Ο	0

Please tell us how you feel about the following statements.

		Strongly <u>Agree</u>	<u>Agree</u>	<u>Disagree</u>	Strongly <u>Disagree</u>
74)	My schoolwork is a central aspect of my life.	0	0	0	0
75)	Kids at school see me as not fitting in.	0	0	0	0
76)	l feel I am a person of worth, the equal of other people.	0	0	0	0
77)	I feel that it is okay for me to cheat on tests in my classes.	0	0	0	0
78)	The opinions of my parent(s) or guardian(s) are very important to me.	0	0	0	0
79)	It is difficult to make friends with members of my own sex.	0	0	0	0
80)	l feel useless at times.	0	0	0	0
81)	l receive high levels of love and support from family members.	0	0	Ο	0
82)	On the whole I am satisfied with myself.	0	0	0	0
83)	Most people don't really care what happens to other people.	0	0	0	0

Please tell us how you feel about the following statements.

		Strongly <u>Agree</u>	<u>Agree</u>	<u>Disagree</u>	Strongly <u>Disagree</u>
84)	I feel that it is okay for me to work hard for good grades.	0	0	0	0
85)	My parent(s) or guardian(s) are usually unhappy or disappointed with what I do.	0	0	0	0
86)	I know some adults (who are not my parent(s) or guardian(s)) who can go to for advice and support.		0	0	0
87)	I feel that it is okay for me to copy someone else's homework.	0	0	0	0
88)	I am not popular with members of the opposite sex.	0	0	0	0
89)	My family will support me in whatever I choose to do after high school.	0	0	0	0
90)	At times, I think I am no good at all.	0	0	0	0
91)	The opinions of my teachers and other adults at school are important to me.	0	0	0	0
92)	My parent(s) or guardian(s) know many of the parent(s) or guardian(s) of my closest school friends.	0	0	0	0

93) What grade were you in when you started attending <u>this</u> high school (the high school you are currently enrolled in)?

(MARK ONE)

9 th Grade	0
10 th Grade	0
11 th Grade	0
12 th Grade	0

94) a) Have you attended any high school(s) other than the one you are in now?

Yes	 •••••	 	 	 	 	 O
No	 	 	 	 	 	 O

b) IF YES, please write the name of the most recent high school you attended and the city, state/country where it is located.

High School Name:	
-------------------	--

City:

State or Country:	
-------------------	--

95) Where did you begin first grade?

City:

State or Country: _____

96) a) How long have you lived in your current home?

_____ years

- b) How many times have you moved from one home to another since you started first grade?
 - O Never moved

_____ times

- c) IF YOU HAVE MOVED, did you live in the Tacoma school district or somewhere else just before you moved to your current home?
 - O Tacoma school district
 - O Somewhere else:

City	State	Country
------	-------	---------

97) Does your family own or rent the home you live in?

Own (with or without mortgage)	0
Rent	0
Don't know	0

Please tell us how you feel about the following statements.

		Strongly Agree	<u>Agree</u>	<u>Disagree</u>	Strongly <u>Disagree</u>
98)	I feel good about myself.	Ο	Ο	Ο	0
99)	My parent(s) or guardian(s) know many of my closest school friends	s. O	0	0	Ο
100)	I see myself as not fitting in.	Ο	0	0	Ο
101)	I have frequent, in-depth conversations with my parent(s) or guardian(s).	0	0	Ο	0
102)	I am able to do things as well as most other people.	Ο	0	0	0
103)	Working hard now will bring important payoffs to me in the future.	0	0	0	0
104)	l can go to my parent(s) or guardian(s) for advice and support.	Ο	0	0	Ο
105)	I don't have enough control over the direction my life is taking.	0	Ο	0	Ο
106)	Chance and luck are very importa for what happens in my life.	ant O	Ο	Ο	Ο
107)	I am optimistic about my future.	0	0	Ο	0

108) In general, how is your health?

(MARK ONE)

Excellent	С
Very Good	С
Good	С
Fair	С
Poor	С

109) Have you ever smoked cigarettes regularly, that is, at least 1 cigarette every day for 30 days?

I smoke regularly now	0
I used to smoke, but I do not smoke now	0
I have never smoked regularly	0

110)	What is your height (in feet and inches)		
	when you take off your shoes?	feet	inches

111) What is your weight (in pounds)? _____ pounds

112) When did you last have a dental examination?

Within the last 12 months	0
1 to 2 years ago	0
More than 2 years ago	0
I do not remember	0
I have never had a dental exam	0

113) What kind of job or occupation would you <u>LIKE</u> to have when you are 30 years old? Even if you are not sure, please write in your best guess.

For example, accountant, engineer, secretary, janitor, college teacher, truck driver, priest, gardener, electrician, high school teacher, restaurant manager, homemaker, actor or actress, etc.

114) Realistically speaking, what kind of job or occupation do you <u>EXPECT</u> or plan to have when you are 30 years old? Even if you are not sure, please write in your best guess.

For example, accountant, engineer, secretary, janitor, college teacher, truck driver, priest, gardener, electrician, high school teacher, restaurant manager, homemaker, actor or actress, etc.

115) To what extent do you think the things listed below will prevent you from having the kind of work that you would like to have?

	Not at all	<u>Somewhat</u>	<u>A lot</u>	
a) your religion	Ο	Ο	Ο	
b) your sex	0	0	0	
c) your sexual orientation	Ο	Ο	Ο	
d) your race or ethnicity	0	0	0	
e) your education	Ο	Ο	Ο	
f) your family background	0	0	0	
g) a learning disability	Ο	Ο	Ο	
h) a physical disability	0	0	0	
i) your political views	Ο	Ο	Ο	
j) lack of vocational training	0	0	0	
k) lack of ability	Ο	Ο	Ο	
 not knowing the right people 	0	0	0	
m) not wanting to work hard	Ο	Ο	0	
n) not wanting to conform	0	0	0	

(MARK ONE IN EACH LINE)

116) Have you thought at all about whether you would like to get married?

I have thought about it a lotC)
I have thought about it a little O)
I have not thought about it at allO)

117) At what age do you <u>EXPECT</u> to get married? If you have not thought about this issue, please make your best guess.

(MARK ONE)

(MARK ONE)

Before age 18O
Age 18 or 19O
Age 20 or 21 O
Age 22 or 23 O
Age 24 or 25 O
Age 26 to 30O
Age 31 to 35O
Age 36 or LaterO
I do not expect to marryO
I am currently marriedO

118) If it were just up to you, what would be the <u>IDEAL</u> age for you to get married? If you have not thought about this issue, please make your best guess.

Before age 18O
Age 18 or 19O
Age 20 or 21O
Age 22 or 23O
Age 24 or 25O
Age 26 to 30O
Age 31 to 35O
Age 36 or LaterO
I do not expect to marryO
I am currently marriedO

119) Have you thought at all about whether you would like to have children or how many children you would to have like?

(MARK ONE)

I have thought about it a lotO
I have thought about it a littleO
I have not thought about it at allO

120) At what age do you <u>EXPECT</u> to have your first child? If you have not thought about these issues, please make your best guess.

((MARK	ONE)

Before age 18	O
Age 18 or 19	O
Age 20 or 21	O
Age 22 or 23	O
Age 24 or 25	O
Age 26 to 30	O
Age 31 to 35	0
Age 36 or Later	O
I do not expect to have chi	drenO
Not Applicable because:	
l am pregnant OR my girlfrie	end/partner is pregnantO
l have a child	0

121) If it were just up to you, what would be the <u>IDEAL</u> time for you to have your first child? If you have not thought about these issues, please make your best guess.

Before age 18O
Age 18 or 19 O
Age 20 or 21 O
Age 22 or 23 O
Age 24 or 25 O
Age 26 to 30 O
Age 31 to 35 O
Age 36 or LaterO
I do not expect to have childrenO
Not Applicable because:
I am pregnant OR my girlfriend/partner is pregnantO
l have a childO

122) What is the highest degree or level of school that your FATHER or male guardian has completed?

No SchoolingO	11th GradeO
1 st Grade0	High School Graduate or GEDO
2 nd GradeO	Some College, No DegreeO
3 rd GradeO	2-Year or Community College Degree. O
4 th Grade0	4-Year College DegreeO
5 th Grade0	Master's Degree or EquivalentO
6 th Grade0	Ph.D., M.D., or
7 th GradeO	Other Professional DegreeO
8 th Grade0	
9 th GradeO	Not Applicable
10 th GradeO	(no male parent/guardian)O

(MARK ONLY ONE – THE HIGHEST LEVEL COMPLETED)

We are interested in finding out about the kind of work that your FATHER or male guardian does. If you do not have a father or a male guardian, mark "not applicable."

123) IN THE LAST MONTH, did your FATHER or male guardian do any work for either pay or profit?

Yes	O
Not applicable (no male parent/guardian)	$O \rightarrow SKIP TO QUESTION 130$
No	O

If your father or male guardian had more than one job, describe the one at which he worked the most hours. If he had no job or business in the last month, give the information for his last job or business.

124) For whom did your FATHER or male guardian work? If now on active duty in the Armed Forces, print the branch of the Armed Forces.

_____ (Name of Company or Business)

125) What kind of business or industry was this? Describe the activity at location where employed. (For example: hospital, newspaper publishing, mail order house, auto repair shop, bank)

126) Is this mainly –

Manufacturing?	O
Wholesale trade?	O
Retail trade?	O
Other (agriculture, construction, service, government, etc.)?	O

- **127)** What kind of work was your FATHER or male guardian doing? (For example: registered nurse, personnel manager, supervisor of order department, auto mechanic, accountant)
- **128)** What were his most important activities or duties? (For example: patient care, directing hiring policies, supervising order clerks, repairing automobiles, reconciling financial records)

129) Was your FATHER or male guardian -

Employee of a private company or business?	0
Government employee?	0
Self-Employed?	0
Working without pay in a family business or farm?	0

130) What is the highest degree or level of school that your MOTHER or female guardian completed?

No SchoolingO	11 th Grade0
1 st GradeO	High School Graduate or GED O
2 nd GradeO	Some College, No DegreeO
3 rd GradeO	2-Year or Community College Degree. O
4 th GradeO	4-Year College Degree O
5 th GradeO	Master's Degree or EquivalentO
6 th GradeO	Ph.D., M.D., or
7 th GradeO	Other Professional DegreeO
8 th GradeO	
9 th GradeO	Not Applicable
10 th GradeO	(no female parent/guardian)O

(MARK ONLY ONE - THE HIGHEST LEVEL COMPLETED)

We are interested in finding out about the kind of work that your MOTHER or female guardian does. If you do not have a mother or a female guardian, mark "not applicable."

131) IN THE LAST MONTH, did your MOTHER or female guardian do any work for either pay or profit?

Yes	.0	
Not applicable (no female parent/guardian)	0 →	SKIP TO QUESTION 138
No	0	

If your mother had more than one job, describe the one at which she worked the most hours. If she had no job or business last week, give the information for her last job or business.

132) For whom did your MOTHER or female guardian work? If now on active duty in the Armed Forces, print the branch of the Armed Forces.

_____ (Name of Company or Business)

133) What kind of business or industry was this? Describe the activity at location where employed. (For example: hospital, newspaper publishing, mail order house, auto repair shop, bank)

134) Is this mainly –

Manufacturing?	0
Wholesale trade?	0
Retail trade?	0
Other (agriculture, construction, service, government, etc.)?	0

- **135)** What kind of work was your MOTHER or female guardian doing? (For example: registered nurse, personnel manager, supervisor of order department, auto mechanic, accountant)
- **136)** What were her most important activities or duties? (For example: patient care, directing hiring policies, supervising order clerks, repairing automobiles, reconciling financial records)

137) Was your MOTHER or female guardian -

Employee of a private company or business?	0
Government employee?	0
Self-Employed?	0
Working without pay in a family business or farm?	0

138) a) Are you currently employed or have you ever been employed?

Please include work that you have done for pay. However, <u>do not include</u> work that you do around your own home (like mowing your lawn, taking care of younger brothers or sisters, or other chores) or volunteer work.

I have <u>never</u> been employed	. O → SKIP TO QUESTION 153 (on page 42)
I <u>have</u> been employed, but I am <u>not</u> employed now	O → GO TO QUESTION 139
I am currently employed	. O
b) What are your plans for your current job? Will you continue to at your current job after high school, or do you plan to stop worki this job? If you plan to stop working at this job, when do you think will occur?	king at
I will continue to work at this job after high school	. O → GO TO QUESTION 139
I plan to stop working at this job	.0
c) When do you plan to stop working at this job?	•

Month

Year

Now we would like to ask about work that you have done for pay on your <u>current</u> or <u>most recent</u> job. If you work/worked at more than one job, think about your <u>main</u> or <u>most important</u> job.

139) How many hours do/did you USUALLY work per week on this job during the school year?

_____ hours per week

140) In an average week, DURING THE SCHOOL YEAR, how many of these hours are on the WEEKEND – that is, on Friday night, anytime on Saturday, or Sunday during the day?

_____ hours per week

141) For whom do/did you work?

_____ (Name of Company or Business)

- 142) What kind of business or industry is/was this? Describe the activity at location where employed. (For example: renovate homes, child care, lawn maintenance, makes fast-food)
- 143) What kind of work are/were you doing? (For example: construction worker, babysitter, landscaper, hamburger cook)
- **144)** What are/were your most important activities or duties? (For example: install aluminum siding, change diapers, mow lawns, clean grill)

145) Are/were you -

Employee of a private company or business?	. O
Government employee?	. O
Self-Employed?	. O
Working without pay in a family business or farm?	. O

Please tell us how you feel about the following statements.

		Strongly <u>Agree</u>	<u>Agree</u>	<u>Disagree</u>	Strongly <u>Disagree</u>
146)	How well I do/did on my job is/was an important part of who I am as a person.	Ο	Ο	Ο	Ο
147)	My job is/was more important to me than my schoolwork.	0	0	Ο	0
148)	In the long run, doing well in school will pay off more than doing well on my job.	Ο	Ο	Ο	Ο

(MARK ONE FOR EACH LINE)

149) In what month and year did you begin your current/most recent job?

Month	Year					
150) IF YOU WERE PREVIOUS month and year did ye				rently em	Ployed: Ir	n what
Month	Year					
151) How much do/did you current/most recent jo		our includi _ dollars p		applicable	e) on your	
152) How much of your wo	rk income g	oes/went	to:			
(Mark one for each line))	None	Less Than <u>Half</u>	About <u>Half</u>	More Than <u>Half</u>	<u>All</u>
a) savings for college or after high school?	education	0	0	0	0	0
 b) help pay household k (groceries, heat/light) 		0	0	0	0	0
c) pay for car expenses gas, repairs, insuranc		0	0	0	0	0
 d) buy clothing, electror equipment, music (Cl other material posses 	Ds), or	0	0	0	0	0
 e) entertainment expension out, movies, concert 			0	0	0	0

153)	During the school year, do you babysit or take care of younger children?
	YesO→ GO TO QUESTION 154
	NoO → SKIP TO QUESTION 158
154)	Who do you babysit?
	(MARK ALL THAT APPLY)
	My younger brother(s) or sister(s)O
	Other relative(s)O
	My own child or childrenO
	Another child or childrenO
155)	Do you babysit for pay or for an allowance?
	(MARK ALL THAT APPLY)
	Not paidO
	Yes, for payO
	Yes, for an allowanceO
156)	How many hours per week do you USUALLY babysit DURING THE SCHOOL YEAR?
	hours per week

157) In an average week, DURING THE SCHOOL YEAR, how many of these hours are on the WEEKEND – that is, on Friday night, anytime on Saturday, or Sunday during the day?

_____ hours per week

158)	Are you Spanish/Hispanic/Latino? Mark the "No" box if not Spanish/Hispanic/Latino	
	0	No, not Spanish/Hispanic/Latino
	Ο	Yes, Mexican, Mexican Am., Chicano
	0	Yes, Puerto Rican
	0	Yes, Cuban
	0	Yes, other Spanish/Hispanic/Latino – <i>Print group.</i>
		→

159) What is your race?

Mark one or more races to indicate what race you consider yourself to be.

- O White
- O Black, African Am., or Negro
- O American Indian or Alaska Native print name of enrolled or principal tribe → _____
- O Asian Indian
- O Cambodian
- O Chinese
- O Filipino
- O Japanese
- O Korean
- O Laotian
- O Vietnamese
- O Other Asian print race. →
- O Native Hawaiian
- O Guamanian or Chamorro
- O Samoan
- O Other Pacific Islander
 - print race. → _____
- O Some other race $print race \rightarrow$ _____

160) What is your ancestry or ethnic origin?

(For example: Italian, Jamaican, Russian, African Am., Cambodian, Cape Verdean, Norwegian, Cuban, Puerto Rican, Amer. Indian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.)

- 161) Considering all the ethnic and racial categories, what is your primary ethnic and/or racial identity?
- 162) What ethnic and/or racial category do others put you in?

163) Where were you born?

State or Country

164) If you were not born in the United States, when did you arrive in the United States? If you do not know the year, how old were you when you arrived in the United States?

Year of Arrival: _____

Age at Arrival:

165) Are you a United States citizen?

YesO
NoO
Don't KnowO

166) What is your MOTHER or female guardian's ancestry or ethnic origin?

(For example: Italian, Jamaican, Russian, African Am., Cambodian, Cape Verdean, Norwegian, Cuban, Puerto Rican, Amer. Indian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.)

167) Where was your MOTHER or female guardian born?

State or Country

- 168) Did you answer questions 166 and 167 about your biological mother? Or were you referring to a woman who is not your biological mother, that is your step-mother, foster-mother, or guardian?
 - O Biological mother
 - O Not my biological mother

169) What is your FATHER or male guardian's ancestry or ethnic origin?

(For example: Italian, Jamaican, Russian, African Am., Cambodian, Cape Verdean, Norwegian, Cuban, Puerto Rican, Amer. Indian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.)

170) Where was your FATHER or male guardian born?

State or Country

- 171) Did you answer questions 169 and 170 about your biological father? Or were you referring to a man who is not your biological father, that is your step-father, foster-father, or guardian?
 - O Biological father
 - O Not my biological father

172) Do you speak a language other than English at home?

YesO	\rightarrow GO TO QUESTION 173
No O	\rightarrow SKIP TO QUESTION 178 (on page 48)

173) What language is that?

174) How well do you...

(MARK ONE ON EACH LINE)

	Very Well	<u>Well</u>	Not Well	Not at all	
a) understand the language?	Ο	Ο	Ο	0	
	-	<u> </u>	2	2	
b) speak the language?	0	0	0	0	
c) read the language?	0	Ο	Ο	Ο	
d) write the language?	0	0	0	0	

175) How often do you use your home language with...

(MARK ONE ON EACH LINE)

	Always or most of <u>the time</u>	About half <u>the time</u>	<u>Sometimes</u>	<u>Never</u>	Does not <u>apply</u>
a) Your mother or female guardian?	Ο	Ο	Ο	0	Ο
 b) Your father or male guardian? 	0	0	0	0	0
c) Your brothers and/or sisters?	0	Ο	0	0	Ο
d) Your friends?	Ο	0	0	0	0
e) Other people in your community?	Ο	Ο	0	Ο	0

176) How well do you...

(MARK ONE ON EACH LINE)

	Very Well	Well	Not Well	Not at all
a) Understand spoken English?	Ο	Ο	Ο	Ο
b) Speak English?	0	0	0	0
c) Read English?	Ο	Ο	Ο	Ο
d) Write English?	0	Ο	0	0
e) How well do others think you speak English?	Ο	Ο	Ο	0

177) In what language do you prefer to speak most of the time?

178) Have you ever experienced prejudice or discrimination based on your <u>race or</u> <u>ethnicity</u>?

(Mark one)

Often	0
Sometimes	O
Rarely	O
Never	O

179) Have you ever experienced prejudice or discrimination based on your <u>nationality</u> <u>or religion</u>?

(MARK ONE)

Often	. O
Sometimes	. O
Rarely	. O
Never	. O

180) Have you ever experienced prejudice or discrimination based on your gender?

(MARK ONE)

Often	O
Sometimes	O
Rarely	O
Never	O

181) Have you ever experienced prejudice or discrimination based on a <u>physical or</u> <u>mental disability</u>?

(MARK ONE)

Often	O
Sometimes	O
Rarely	O
Never	O

182) Have you ever experienced prejudice or discrimination based on <u>another</u> <u>personal characteristic</u>?

(please specify the characteristic(s):_____)

(MARK ONE)

OftenC	C
Sometimes C	С
RarelyC	C
NeverC	C

183) Do you think <u>people of your race/ethnicity/national origin group</u> have a harder time or an easier time <u>getting into a four-year college or university</u> than they used to?

	(MARK ONE)
Easier than before	O
About the same as before	O
Harder than before	O
Don't Know	0

184) Do you think <u>people of your race/ethnicity/national origin group</u> have a harder time or an easier time <u>getting financial aid to go to college</u> than they used to?

(MARK ONE)

Easier than beforeO
About the same as beforeO
Harder than beforeO
Don't Know O

185) Do you think <u>people of your race/ethnicity/national origin group</u> have a harder time or an easier time <u>getting a good job</u> than they used to?

(MARK ONE)

Easier than before	O
About the same as before	O
Harder than before	O
Don't Know	O

186) Are you living with both your mother and your father?

(MARK ONE)

YesO
NoO

187) a) Are your mother and your father married to each other?

(MARK ONE)

YesO
NoO

b) IF YOUR MOTHER AND FATHER ARE <u>NOT</u> CURRENTLY MARRIED, please tell us the circumstances.

(MARK ALL THAT APPLY)

They were divorced	O
They are separated	O
My biological father has died	O
My biological mother has died	O
They were never married	O
I do not know my biological parents	O
I do not know the reason	O

188) How many people usually live in the same household as you?

_____ people

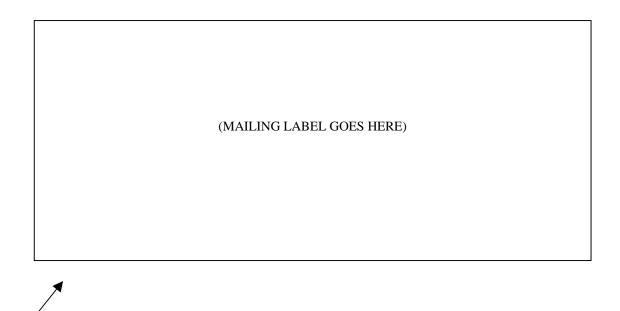
189) How many brothers and/or sisters have you ever had? Please include all full-, step-, half-, foster-, and adopted-siblings, even if they are no longer alive.

_____ Brothers and/or Sisters

190) Now we would like to know a little more about these brothers and/or sisters. Please include all full-, step-, half-, foster-, and adopted-siblings. Please tell us about <u>EACH ONE WHO IS STILL ALIVE</u>.

	Sex M/F	Twin Y/N	Age in years	Birthplace (state/country)	Relationship to you	In School? Y/N	Total Education and Last Degree
Ex.	М	N	29	Mexico	Step-Brother	N	<i>Two years of college, Associates degree</i>
Ex.	F	N	8	Colorado	Sister	Y	In 3 rd grade
1							
2							
3							
4							
5							
6							
7							
8							
9							

We would like to contact you in the future to find out more about your experiences after high school. We need the following information so that we can contact you. <u>We will never give this information to anyone who is not a part of this research project</u>.



191) If the above information about you is not correct and complete, please write the correct information below.

NAME:		
Last	First	Middle
ADDRESS:		
Number	Street	Apt. Number
City	State	Zip Code
What is your telephone num	ber? What is your email addre	ess (if applicable)?
TELEPHONE: () Area Code	Telephone Number	l do not have a telephoneO
FMAIL ADDRESS		l do not have an

192)

email address ... O

193) What is your mother's or female guardian's name?

NAME:______ First Middle

194) a) Is your mother's or female guardian's address and telephone number the same as yours?

(MARK ONE)

YesO
NoO
Don't know O
No female parent/guardianO

b) If it is not the same as yours, what is your mother's or female guardian's address, telephone number, and email (if applicable)?

ADDRESS:		
Number	Street	Apt. Number
City	State	Zip Code
TELEPHONE: () Area Code	Telephone Number	She does not have a telephoneO
EMAIL ADDRESS:		She does not have an email addressO

195) What is your father's or male guardian's name?

NAME:_____LastFirstMiddle

196) a) Is your father's or male guardian's address and telephone number the same as yours?

(MARK ONE)

Yes	O
No	O
Don't know	O
No male parent/guardian	0

b) If it is not the same as yours, what is your father's or male guardian's address, telephone number, and email (if applicable)?

ADDRESS:		
Number	Street	Apt. Number
City	State	Zip Code
TELEPHONE: ()_ Area Code	Telephone Number	He does not have a telephone0
EMAIL ADDRESS:		He does not have an email addressO

197) Please write in the name, address, and telephone number of a relative or close friend who does not live with you and <u>who will always know how to contact you</u> (for example, your grandmother, your best friend, or your aunt).

Last		First	Middle
ADDRESS:			
Number		Street	Apt. Number
City		State	Zip Code
TELEPHONE: (Area Co) ode T	elephone Number	He/she does not have a telephone O
EMAIL ADDRESS:			_ He/she does not have an email address O
What is this person's re	lationship	o to you?	
1)	MARK ON	E)	
A close friend	Ο		
Arelative	Ο	Relationship:	example: grandmother, aunt

198)

199) Please give us the <u>first and last names</u> of your three best friends <u>in this school</u> who are <u>seniors</u>? If you do not have three close senior friends, write the names of three people you like to spend time with who are seniors.

Name of Friend #1		
	FIRST NAME	LAST NAME
Name of Friend #1	FIRST NAME	LAST NAME
Name of Friend #1		
	FIRST NAME	LAST NAME

We appreciate any additional comments:

<u>Thank you</u> for completing this survey. We appreciate your cooperation.

Please seal the survey in the envelope and turn in the survey now.