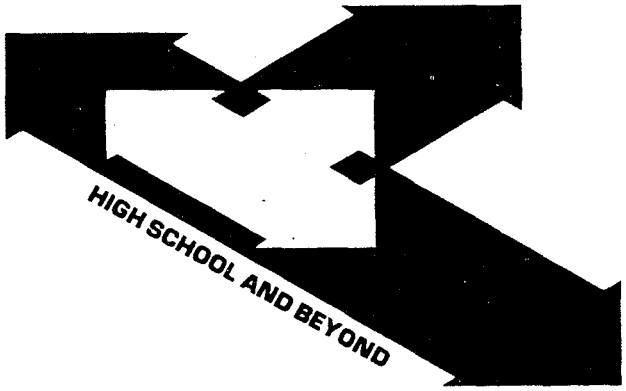
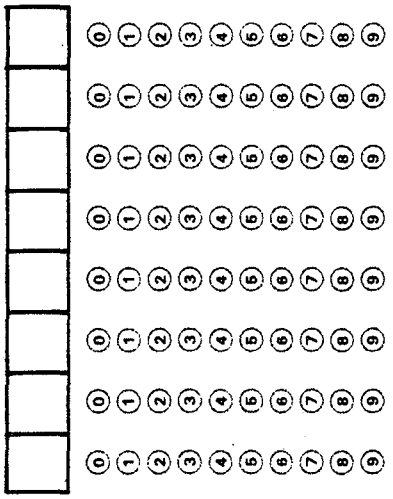


THIRD FOLLOW-UP QUESTIONNAIRE

Prepared for: U.S. Department of Education
Center for Statistics

by: NORC, A Social Science Research Center
University of Chicago



Form Approved
O.M.B. No. 1850-0557
App. Exp.: 10/31/86

ED/CS Form No. 2422-1

1986

The Federal Privacy Act of 1974 requires that each survey respondent be informed of the following:

(1) This survey is authorized by law (20 USC 1221e-1). While you are not required to respond, your cooperation will make the results of this survey comprehensive, accurate, and timely.

(2) You are subject to no penalty for not providing all or any part of the requested information.

(3) The purpose for which this information is to be used is to provide statistics on a national sample of students as they move out of the American high school system into the critical years of early adulthood. These statistics will be related to postsecondary educational costs and financial aid and other factors on the educational, work, and career choices of young adults.

(4) The routine uses of these data will be statistical in nature as detailed in paragraph 9 of Appendix B of the Department Regulations (34 CFR 5b) published in the Federal Register, Vol. 45, No. 92, May 9, 1980.

NOTE: The O.M.B. approval number listed on the front cover does not apply to questions marked with an asterisk (*). These questions are supported by a research grant which, under Federal Regulations, is not subject to O.M.B. approval.

INTERVIEWER USE ONLY

INT. ☐☐☐☐☐☐☐

DISP. ☐☐

BEFORE YOU START . . . READ THIS!

MARKING DIRECTIONS

Filling out this questionnaire is as easy as 1-2-3!

For questions on which you respond by filling in an oval, please make heavy black marks that completely fill the oval. If you make a mistake, completely erase the incorrect answer and enter the correct one.

CORRECT MARKS ●○●○○

INCORRECT MARKS ⊗✓⊙O

Please do not make stray marks of any kind. If any stray marks are made by accident, please erase them completely.

Instructions are included with each question. Below are examples of the different kinds of instructions you will see and the correct way to answer each kind of question. Be sure to use the No. 2 pencil we have provided. Do not use a ballpoint or felt-tip pen.

1. CIRCLE OR MARK ANSWER CATEGORIES:

It is important to circle or mark (as specified) one or more numbers that go with your answers.

EXAMPLE A

What is the color of your eyes? (MARK ONE)

○ Brown ● Green
○ Blue ○ Another color

"My eyes are green."

EXAMPLE B

Last week did you do any of the following? (MARK ALL THAT APPLY)

● See a play
● Go to a movie
○ Attend a sporting event

"Last week I saw a movie and a play."

EXAMPLE C

Do you plan to do any of the following next week? (CIRCLE ONE NUMBER FOR EACH LINE)

	Yes	No	Not Sure
a. Visit a relative	1	(2)	3
b. Go to a museum	1	2	(3)
c. Go to a library	(1)	2	3

"I don't plan to visit a relative next week. I may go to a museum and I'm definitely going to the library."

EXAMPLE D

Where do you usually buy the following reading materials? (CIRCLE ALL THAT APPLY FOR EACH LINE)

	Newsstand	Drugstore	Bookstore	Other	Never Buy
a. Newspaper	(1)	1	1	1	1
b. Magazines	(1)	(1)	1	1	1
c. Paperback books	1	1	1	1	(1)

"I usually buy newspapers at a newsstand. I buy magazines at newsstands or drugstores. I don't buy paperback books."

EXAMPLE E

What is your favorite sport? (MARK ONE)

○ Football ○ Basketball
○ Baseball ● Other (WRITE IN) → Ice Hockey

"My favorite sport is ice hockey."

(On write-in items, please confine writing to inside the box.)

2. AMOUNTS OF MONEY ARE ENTERED IN BOXES:

EXAMPLE A **Salary of $6.50 an hour**

RIGHT: $ | | , | | 6 . 5 0

WRONG: $ ~~| | , 6 5 0 . | |~~

EXAMPLE B **My television costs $500.**

RIGHT: $ | | , 5 0 0 . 0 0

WRONG: $ ~~5 0 0~~ | | |

3. DATES AND OTHER NUMBERS ARE ALSO ENTERED IN BOXES OR GRIDS:

EXAMPLE A How many hours did you work last week? (WRITE IN BELOW)

"I worked 5 hours."

0 5 — RIGHT

~~5~~ — WRONG

EXAMPLE B **June, 1983**

RIGHT: 0 6 (MONTH) 8 3 (YEAR)

WRONG: ~~6~~ ~~8 3~~ (MONTH) (YEAR)

EXAMPLE C Number of Children

RIGHT: 0 3

WRONG: ~~3~~

EXAMPLE D

February 23, 1964

RIGHT →

MONTH		DAY						YEAR	
○ Jan	○ July	①	⑦	⑬	⑲	㉕	㉛	○ 60	○ 65
● Feb	○ Aug	②	⑧	⑭	⑳	㉖		○ 61	○ 66
○ Mar	○ Sep	③	⑨	⑮	㉑	㉗		○ 62	○ 67
○ Apr	○ Oct	④	⑩	⑯	㉒	㉘		○ 63	○ 68
○ May	○ Nov	⑤	⑪	⑰	●	㉙		● 64	
○ June	○ Dec	⑥	⑫	⑱	㉔	㉚			

WE HOPE YOU WILL ANSWER EVERY QUESTION THAT APPLIES TO YOU,
BUT YOU MAY SKIP ANY QUESTION YOU DO NOT WISH TO ANSWER.

BACKGROUND INFORMATION

1. What is today's date?

MONTH		DAY					
		①	⑦	⑬	⑲	㉕	㉛
○ Feb	○ June	②	⑧	⑭	⑳	㉖	
○ Mar	○ July	③	⑨	⑮	㉑	㉗	
○ Apr	○ Aug	④	⑩	⑯	㉒	㉘	
○ May		⑤	⑪	⑰	㉓	㉙	
		⑥	⑫	⑱	㉔	㉚	

2. What is your birthdate?

MONTH		DAY						YEAR	
○ Jan	○ July	①	⑦	⑬	⑲	㉕	㉛	○ 60	○ 65
○ Feb	○ Aug	②	⑧	⑭	⑳	㉖		○ 61	○ 66
○ Mar	○ Sep	③	⑨	⑮	㉑	㉗		○ 62	○ 67
○ Apr	○ Oct	④	⑩	⑯	㉒	㉘		○ 63	○ 68
○ May	○ Nov	⑤	⑪	⑰	㉓	㉙		○ 64	
○ June	○ Dec	⑥	⑫	⑱	㉔	㉚			

3. What were you doing the <u>first week of February</u> 1986? (CIRCLE ALL THAT APPLY)
§

a. Working for pay at a full-time or part-time job 1
b. Taking vocational or technical courses at any kind of school or college (for example, vocational, trade, business, or other career training school) 1
c. Taking academic courses at a two- or four-year college 1
d. Taking courses at a graduate or professional school (law, medicine, pharmacy, dentistry, etc.) 1
e. Serving in an apprenticeship program or government training program 1
f. Serving on active duty in the Armed Forces (or service academy) 1
g. Keeping house (without other job) 1
h. Holding a job but on temporary layoff from work or waiting to report to work 1
i. Looking for work 1
j. Taking a break from working and from school 1
k. Other (PLEASE SPECIFY) 1

4. With whom did you live the <u>first week of February</u> 1986? (MARK ALL THAT APPLY)

○ a. I lived alone
○ b. Father
○ c. Other male guardian (stepfather or foster father)
○ d. Mother
○ e. Other female guardian (stepmother or foster mother)
○ f. Brother(s) and/or sister(s) (including step- or half-)
○ g. Grandparents
○ h. My husband/wife
○ i. My child or my children
○ j. Other relative(s) (children or adults)
○ k. Non-relative(s) (children or adults)

5. **How many brothers and sisters do you have in each of the age groups below? Please include step-brothers and step-sisters if they live, or have lived, in the same household.** (CIRCLE ONE ON EACH LINE)

How many brothers and sisters do you have who are:	None	One	Two	Three	Four	Five or More
5 or more years older	00	01	02	03	04	05
Between 04 and 05 years older	00	01	02	03	04	05
Between 03 and 04 years older	00	01	02	03	04	05
Between 02 and 03 years older	00	01	02	03	04	05
Between 01 and 02 years older	00	01	02	03	04	05
Up to 01 year older	00	01	02	03	04	05
Same age as you	00	01	02	03	04	05
Up to 01 year younger	00	01	02	03	04	05
Between 01 and 02 years younger	00	01	02	03	04	05
Between 02 and 03 years younger	00	01	02	03	04	05
Between 03 and 04 years younger	00	01	02	03	04	05
Between 04 and 05 years younger	00	01	02	03	04	05
5 or more years younger	00	01	02	03	04	05

6. a. **As of the first week of February 1986, did you own a house, apartment, co-op, condominium or mobile home?** (MARK ONE)

○ Yes ○ No

b. **How far is your place of residence from the city or community where you lived in your last year of high school?** (MARK ONE)

○ Same place I lived in when I was in my last year of high school
○ Less than 50 miles
○ 50 to 99 miles
○ 100 to 199 miles
○ 200 to 499 miles
○ 500 miles or more

WORK EXPERIENCE

In this section, we would like to find out about the jobs you have held, particularly in the period between March 1984 and the present time. Include full-time jobs, part-time jobs, apprenticeships, on-the-job training, military service and so on.

We are interested in learning about the kinds of jobs you have held, the hours you worked and your income from these jobs, the level of your job satisfaction and the relation of your training and education to your work experience. This information will help us better understand the movement of young people into the world of work and the reasons for changes in job situations.

---

7. Between March 1984 and the present time, did you hold a full-time or part-time job of any kind? This includes
§ PAID jobs, VOLUNTEER jobs, working WITHOUT PAY on a family farm or business or being in the MILITARY.
(CIRCLE ONE)

1. Yes (CONTINUE TO INSTRUCTIONS BELOW)

2. No (SKIP TO Q. 15)

IMPORTANT INSTRUCTIONS

We would like information about all of the jobs you had since March 1984. Start with your current or most recent job and work backward in time to March 1984. There is room to discuss four jobs. Since March 1984 . . .

IF YOU ONLY HAD ONE JOB:	Enter that job at Q.8; answer parts A-L.
IF YOU HAD TWO JOBS:	Enter current or most recent job at Q.8 and the 2nd most recent job at Q.9; answer parts A-L.
IF YOU HAD THREE JOBS:	Continue as above
IF YOU HAVE HAD MORE THAN 4 JOBS:	Enter the most recent three jobs in Qs.8 to 10 and then enter the job you held in March 1984 or the first job thereafter in Q.11.
IF YOU HELD TWO JOBS AT THE SAME TIME:	Enter both jobs but enter them on separate pages.
IF YOU HAVE BEEN IN THE MILITARY:	Please consider your entire military experience as one job.

8. CURRENT OR MOST RECENT JOB HELD SINCE MARCH 1984 (ANSWER PARTS A–L)

A. What kind of job or occupation did you or do you have? (For example, salesperson, waitress, secretary,
§ **assembler, etc.)** WRITE IN →

B. What kind of business or industry was this job in? (For example, retail shoe store, restaurant, electronic assembly plant) WRITE IN →

C. What were your main activities or duties on this job? (For example, selling shoes, waiting on tables, putting computer boards together) WRITE IN →

D. On this job were you (MARK ONE)

- ◯ Employee of a PRIVATE company
- ◯ GOVERNMENT employee (federal, state, local)
- ◯ Self-employed in your OWN business
- ◯ Working WITHOUT PAY on a family business or farm
- ◯ Working WITHOUT PAY in a volunteer job

E. When were you working at this job? (CIRCLE ALL THE MONTHS THAT APPLY FOR EACH YEAR)
§

	JAN	FEB	MAR	APR	MAY	JUNE	JUL	AUG	SEPT	OCT	NOV	DEC
1984	--	--	03	04	05	06	07	08	09	10	11	12
1985	01	02	03	04	05	06	07	08	09	10	11	12
1986	01	02	03	04	05	06	07	--	--	--	--	--

F. Was this a seasonal job? (For example, harvester, life-guard, ski-instructor) (MARK ONE)

◯ Yes ◯ No

G. Write in below your starting salary (before deductions) on this job.
(AVERAGE IN ANY TIPS OR COMMISSION. IF YOU ARE NOT SURE, GIVE YOUR BEST ESTIMATE)
(WRITE IN) →

$ ☐☐,☐☐☐.☐☐

Is the figure you entered an hourly, weekly, bi-weekly, monthly or yearly wage? (CIRCLE ONE)

Hourly.....01	Monthly 04
Weekly.....02	Yearly 05
Bi-weekly 03	Working without pay 06

H. Write in below your current salary (before deductions) on this job or your salary at the time you left. (AVERAGE IN ANY TIPS OR COMMISSION. IF YOU ARE NOT SURE OF THE EXACT AMOUNT, GIVE YOUR BEST ESTIMATE)

(WRITE IN)

$ ☐☐,☐☐☐.☐☐

Is the figure you entered an hourly, weekly, bi-weekly, monthly or yearly wage? (CIRCLE ONE)

Hourly.....01	Monthly 04
Weekly.....02	Yearly 05
Bi-weekly 03	Working without pay 06

I. About how many hours a week did or do you usually work in this job? (WRITE IN BELOW)

HOURS PER WEEK: ☐☐

J. How did you find this job? (MARK THE ONE MOST IMPORTANT CATEGORY)

- ◯ School employment or placement service
- ◯ Public employment service
- ◯ Private employment agency
- ◯ Newspaper advertisement
- ◯ Checked with employer directly
- ◯ Through a relative
- ◯ Through a friend
- ◯ Civil Service application
- ◯ Union registration
- ◯ Other (WRITE IN)

K. Why did you leave this job? (MARK THE ONE MOST IMPORTANT CATEGORY)

- ◯ Job ended (temporary job, laid off, or fired)
- ◯ School-related reasons (graduated, school started, school year ended)
- ◯ Quit because job, hours, or pay, etc., unsatisfactory
- ◯ Found a better job or was promoted
- ◯ Moved elsewhere
- ◯ Health-related reasons (illness, injury, pregnancy)
- ◯ Other (WRITE IN)
- ◯ STILL HAVE THIS JOB

L. Did you hold any other jobs since March 1, 1984? (CIRCLE ONE)

§

1. Yes (ENTER 2ND JOB AT Q.9)
2. No (SKIP TO Q. 12)

9. SECOND MOST RECENT JOB HELD SINCE MARCH 1984 (ANSWER PARTS A–L)

A. What kind of job or occupation did you or do you have? (For example, salesperson, waitress, secretary, assembler, etc.) WRITE IN

B. What kind of business or industry was this job in? (For example, retail shoe store, restaurant, electronic assembly plant) WRITE IN

C. What were your main activities or duties on this job? (For example, selling shoes, waiting on tables, putting computer boards together) WRITE IN

D. On this job were you (MARK ONE)

- ◯ Employee of a PRIVATE company
- ◯ GOVERNMENT employee (federal, state, local)
- ◯ Self-employed in your OWN business
- ◯ Working WITHOUT PAY on a family business or farm
- ◯ Working WITHOUT PAY in a volunteer job

E. When were you working at this job? (CIRCLE ALL THE MONTHS THAT APPLY FOR EACH YEAR)

	JAN	FEB	MAR	APR	MAY	JUNE	JUL	AUG	SEPT	OCT	NOV	DEC
1984	--	--	03	04	05	06	07	08	09	10	11	12
1985	01	02	03	04	05	06	07	08	09	10	11	12
1986	01	02	03	04	05	06	07	--	--	--	--	--

F. Was this a seasonal job? (For example, harvester, life-guard, ski-instructor) (MARK ONE)

◯ Yes ◯ No

G. Write in below your starting salary (before deductions) on this job.
(AVERAGE IN ANY TIPS OR COMMISSION. IF YOU ARE NOT SURE, GIVE YOUR BEST ESTIMATE)
(WRITE IN)

$ ___,___.___

Is the figure you entered an hourly, weekly, bi-weekly, monthly or yearly wage? (CIRCLE ONE)

Hourly.....01	Monthly 04
Weekly.....02	Yearly 05
Bi-weekly 03	Working without pay 06

H. **Write in below your current salary (before deductions) on this job or your salary at the time you left. (AVERAGE IN ANY TIPS OR COMMISSION. IF YOU ARE NOT SURE OF THE EXACT AMOUNT, GIVE YOUR BEST ESTIMATE)**

(WRITE IN)

$ ☐☐,☐☐☐.☐☐

Is the figure you entered an hourly, weekly, bi-weekly, monthly or yearly wage? (CIRCLE ONE)

Hourly.....01	Monthly 04
Weekly.....02	Yearly 05
Bi-weekly 03	Working without pay 06

I. **About how many hours a week did or do you usually work in this job?** (WRITE IN BELOW)

HOURS PER WEEK: ☐☐

J. **How did you find this job?** (MARK THE ONE MOST IMPORTANT CATEGORY)

- ◯ School employment or placement service
- ◯ Public employment service
- ◯ Private employment agency
- ◯ Newspaper advertisement
- ◯ Checked with employer directly
- ◯ Through a relative
- ◯ Through a friend
- ◯ Civil Service application
- ◯ Union registration
- ◯ Other (WRITE IN)

K. **Why did you leave this job?** (MARK THE ONE MOST IMPORTANT CATEGORY)

- ◯ Job ended (temporary job, laid off, or fired)
- ◯ School-related reasons (graduated, school started, school year ended)
- ◯ Quit because job, hours, or pay, etc. unsatisfactory
- ◯ Found a better job or was promoted
- ◯ Moved elsewhere
- ◯ Health-related reasons (illness, injury, pregnancy)
- ◯ Other (WRITE IN)
- ◯ STILL HAVE THIS JOB

L. **Did you hold any other jobs since March 1, 1984?** (CIRCLE ONE)

§

1. Yes (ENTER 3RD JOB AT Q.10)
2. No (SKIP TO Q. 12)

10. THIRD MOST RECENT JOB HELD SINCE MARCH 1984 (ANSWER PARTS A–L)

A. What kind of job or occupation did you or do you have? (For example, salesperson, waitress, secretary, assembler, etc.) WRITE IN →

B. What kind of business or industry was this job in? (For example, retail shoe store, restaurant, electronic assembly plant) WRITE IN →

C. What were your main activities or duties on this job? (For example, selling shoes, waiting on tables, putting computer boards together) WRITE IN →

D. On this job were you (MARK ONE)

- ◯ Employee of a PRIVATE company
- ◯ GOVERNMENT employee (federal, state, local)
- ◯ Self-employed in your OWN business
- ◯ Working WITHOUT PAY on a family business or farm
- ◯ Working WITHOUT PAY in a volunteer job

E. When were you working at this job? (CIRCLE ALL THE MONTHS THAT APPLY FOR EACH YEAR)
§

	JAN	FEB	MAR	APR	MAY	JUNE	JUL	AUG	SEPT	OCT	NOV	DEC
1984	--	--	03	04	05	06	07	08	09	10	11	12
1985	01	02	03	04	05	06	07	08	09	10	11	12
1986	01	02	03	04	05	06	07	--	--	--	--	--

F. Was this a seasonal job? (For example, harvester, life-guard, ski-instructor) (MARK ONE)

◯ Yes ◯ No

G. Write in below your starting salary (before deductions) on this job.
(AVERAGE IN ANY TIPS OR COMMISSION. IF YOU ARE NOT SURE, GIVE YOUR BEST ESTIMATE)
(WRITE IN) →

$ ☐☐,☐☐☐.☐☐

Is the figure you entered an hourly, weekly, bi-weekly, monthly or yearly wage? (CIRCLE ONE)

Hourly.....01	Monthly 04
Weekly.....02	Yearly 05
Bi-weekly 03	Working without pay 06

H. Write in below your current salary (before deductions) on this job or your salary at the time you left. (AVERAGE IN ANY TIPS OR COMMISSION. IF YOU ARE NOT SURE OF THE EXACT AMOUNT, GIVE YOUR BEST ESTIMATE)

(WRITE IN)

$ ☐☐,☐☐☐.☐☐

Is the figure you entered an hourly, weekly, bi-weekly, monthly or yearly wage? (CIRCLE ONE)

Hourly.....01	Monthly 04
Weekly.....02	Yearly 05
Bi-weekly 03	Working without pay 06

I. About how many hours a week did or do you usually work in this job? (WRITE IN BELOW)

HOURS PER WEEK: ☐☐

J. How did you find this job? (MARK THE ONE MOST IMPORTANT CATEGORY)

- ◯ School employment or placement service
- ◯ Public employment service
- ◯ Private employment agency
- ◯ Newspaper advertisement
- ◯ Checked with employer directly
- ◯ Through a relative
- ◯ Through a friend
- ◯ Civil Service application
- ◯ Union registration
- ◯ Other (WRITE IN)

K. Why did you leave this job? (MARK THE ONE MOST IMPORTANT CATEGORY)

- ◯ Job ended (temporary job, laid off, or fired)
- ◯ School-related reasons (graduated, school started, school year ended)
- ◯ Quit because job, hours, or pay, etc. unsatisfactory
- ◯ Found a better job or was promoted
- ◯ Moved elsewhere
- ◯ Health-related reasons (illness, injury, pregnancy)
- ◯ Other (WRITE IN)
- ◯ STILL HAVE THIS JOB

L. Did you hold any other jobs since March 1, 1984? (CIRCLE ONE)

§

1. Yes (ENTER 4TH JOB AT Q.11)
2. No (SKIP TO Q.12)

11. FOURTH MOST RECENT JOB HELD SINCE MARCH 1984 (ANSWER PARTS A–L)

A. What kind of job or occupation did you or do you have? (For example, salesperson, waitress, secretary, assembler, etc.) WRITE IN →

B. What kind of business or industry was this job in? (For example, retail shoe store, restaurant, electronic assembly plant) WRITE IN →

C. What were your main activities or duties on this job? (For example, selling shoes, waiting on tables, putting computer boards together) WRITE IN →

D. On this job were you (MARK ONE)

- ◯ Employee of a PRIVATE company
- ◯ GOVERNMENT employee (federal, state, local)
- ◯ Self-employed in your OWN business
- ◯ Working WITHOUT PAY on a family business or farm
- ◯ Working WITHOUT PAY in a volunteer job

E. When were you working at this job? (CIRCLE ALL THE MONTHS THAT APPLY FOR EACH YEAR)

	JAN	FEB	MAR	APR	MAY	JUNE	JUL	AUG	SEPT	OCT	NOV	DEC
1984	--	--	03	04	05	06	07	08	09	10	11	12
1985	01	02	03	04	05	06	07	08	09	10	11	12
1986	01	02	03	04	05	06	07	--	--	--	--	--

F. Was this a seasonal job? (For example, harvester, life-guard, ski-instructor) (MARK ONE)

◯ Yes ◯ No

G. Write in below your starting salary (before deductions) on this job.
(AVERAGE IN ANY TIPS OR COMMISSION. IF YOU ARE NOT SURE, GIVE YOUR BEST ESTIMATE)
(WRITE IN) →

$ ___,___.___

Is the figure you entered an hourly, weekly, bi-weekly, monthly or yearly wage? (CIRCLE ONE)

Hourly 01	Monthly 04
Weekly 02	Yearly 05
Bi-weekly 03	Working without pay 06

H. Write in below your current salary (before deductions) on this job or your salary at the time you left. (AVERAGE IN ANY TIPS OR COMMISSION. IF YOU ARE NOT SURE OF THE EXACT AMOUNT, GIVE YOUR BEST ESTIMATE)

(WRITE IN)

$ ☐☐,☐☐☐.☐☐

Is the figure you entered an hourly, weekly, bi-weekly, monthly or yearly wage? (CIRCLE ONE)

Hourly.....01	Monthly 04
Weekly.....02	Yearly 05
Bi-weekly 03	Working without pay 06

I. About how many hours a week did or do you usually work in this job? (WRITE IN BELOW)

HOURS PER WEEK: ☐☐

J. How did you find this job? (MARK THE ONE MOST IMPORTANT CATEGORY)

- ○ School employment or placement service
- ○ Public employment service
- ○ Private employment agency
- ○ Newspaper advertisement
- ○ Checked with employer directly
- ○ Through a relative
- ○ Through a friend
- ○ Civil Service application
- ○ Union registration
- ○ Other (WRITE IN)

K. Why did you leave this job? (MARK THE ONE MOST IMPORTANT CATEGORY)

- ○ Job ended (temporary job, laid off, or fired)
- ○ School-related reasons (graduated, school started, school year ended)
- ○ Quit because job, hours, or pay, etc. unsatisfactory
- ○ Found a better job or was promoted
- ○ Moved elsewhere
- ○ Health-related reasons (illness, injury, pregnancy)
- ○ Other (WRITE IN)
- ○ STILL HAVE THIS JOB

L. Did you hold any other jobs since March 1, 1984? (CIRCLE ONE)

§

1. Yes
2. No

(CONTINUE WITH Q.12 ON FOLLOWING PAGE)

12. **Have you received formal training to do your current (or most recent) job? (Do not include on-the-job or employer training.)** (CIRCLE ONE)

1. Yes (GO TO A)

2. No (SKIP TO Q.13)

A. Where did you receive this training? (MARK ALL THAT APPLY)

- ◯ High school
- ◯ Vocational, trade, business, or other career training school
- ◯ Apprenticeship or government training program
- ◯ Junior or community college
- ◯ College or university (four years or more)
- ◯ Independent graduate or professional school (medical, dental, law, theology, etc.)
- ◯ Military service
- ◯ Other (DESCRIBE)

B. How did your training relate to your experiences on this job? (MARK ALL THAT APPLY)

- ◯ I was able to apply most of what I learned in school
- ◯ I would have liked more job-related training before I started working
- ◯ The way the job was done was different from the way I was trained
- ◯ I did not use, on the job, the tools or equipment I was trained to use
- ◯ I could have gotten my job without the training
- ◯ I realized I had taken coursework associated with my training which was not helpful in performing my job
- ◯ Most of what I did on the job I learned to do in school
- ◯ I considered myself to be doing as well as others with similar training
- ◯ I considered going to school and getting the training a wise choice

C. Did your training include instruction in the use of machines or equipment (include instruction in the operation of office machines, computers, machine tools, vehicles, or other such equipment)? (MARK ONE)

- ◯ Yes (ANSWER D)
- ◯ No (SKIP TO Q.13)

D. Thinking about the formal training you have received, was the equipment on which you were trained up to date? (MARK ONE)

- ◯ Yes
- ◯ No

13. **Have you held a full-time job at any time between March 1984, and the end of February 1986?** (CIRCLE ONE)

1. Yes (ANSWER A) 2. No (SKIP TO Q.14)

A. **Considering the most recent full-time job you have held, did you receive or participate in any type of employer-provided training benefits or training programs?** (CIRCLE ONE)

1. Yes (CONTINUE WITH B) 2. No (SKIP TO Q.14)

B. **Circle "1" in Column 1 for each type of training benefit or program you participated in. Then record the number of hours per week in Column 2 and the total number of weeks in Column 3.**

COLUMN 1 TYPES OF TRAINING PROGRAMS OR TRAINING BENEFITS (CIRCLE ALL THAT APPLY)	COLUMN 2 NUMBER OF **HOURS** PER WEEK	COLUMN 3 TOTAL NUMBER OF **WEEKS**
Employer-provided job training during working hours on employer premises 1		
Informal on-the-job training (e.g., assigned to work with someone for instruction or guidance, etc.)..... 1		
Employer-provided education or training during working hours away from employer premises..... 1		
Tuition aid and/or financial assistance for attending educational institutions after working hours..... 1		
Other ..... 1 (PLEASE SPECIFY) →		

14. **How satisfied were you with the following aspects of your present or most recent job?** (MARK ONE FOR EACH LINE)

	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied
a. Pay and fringe benefits	○	○	○	○
b. Importance and challenge	○	○	○	○
c. Working conditions	○	○	○	○
d. Opportunity for promotion and advancement with this employer	○	○	○	○
e. Opportunity for promotion and advancement in this line of work	○	○	○	○
f. Opportunity to use past training and education	○	○	○	○
g. Security and permanence	○	○	○	○
h. Supervisor(s)	○	○	○	○
i. Opportunity for developing new skills	○	○	○	○
j. The pride and respect I received from my family and friends by being in this line of work	○	○	○	○
k. Relationships with co-workers	○	○	○	○
l. Job as a whole	○	○	○	○

15. **Write in here the name of the job or occupation that you expect or plan to have when you are 30 years old. Even if you are not at all sure, write in your ONE best guess.**

A. **Which of the categories below comes closest to describing that job?** (CIRCLE ONE)

§

CLERICAL such as bank teller, bookkeeper, secretary, typist, mail carrier, ticket agent 01
CRAFTSMAN such as baker, automobile mechanic, machinist, painter, plumber, telephone installer, carpenter 02
FARMER, FARM MANAGER 03
HOMEMAKER (without other job) 04
LABORER such as construction worker, car washer, sanitary worker, farm laborer 05
MANAGER, ADMINISTRATOR such as sales manager, office manager, school administrator, buyer, restaurant manager, government official 06
MILITARY such as career officer, enlisted man or woman in the Armed Forces 07
OPERATIVE such as meat cutter, assembler, machine operator, welder, taxicab, bus or truck driver 08
PROFESSIONAL such as accountant, artist, registered nurse, engineer, librarian, writer, social worker, actor, actress, athlete, politician, but not including school teacher 09
PROFESSIONAL such as clergyman, dentist, physician, lawyer, scientist, college teacher 10
PROPRIETOR OR OWNER such as owner of a small business, contractor, restaurant owner 11
PROTECTIVE SERVICE such as detective, police officer or guard, sheriff, fire fighter 12
SALES such as salesperson, advertising or insurance agent, real estate broker 13
SCHOOL TEACHER such as elementary or secondary 14
SERVICE such as barber, beautician, practical nurse, private household worker, janitor, waiter, waitress 15
TECHNICAL such as draftsman, medical or dental technician, computer programmer 16
NOT WORKING 17

16. **How important is each of the following factors in determining the kind of work you plan to be doing for most of your life?** (MARK ONE FOR EACH LINE)

	Not Important	Somewhat Important	Very Important
a. Previous work experience in the area	○	○	○
b. Good income to start or within a few years	○	○	○
c. Job security and permanence	○	○	○
d. Work that seems important and interesting to me	○	○	○
e. Freedom to make my own decisions	○	○	○
f. Meeting and working with sociable, friendly people	○	○	○
g. A job that has high status and prestige	○	○	○
h. A job where most problems are quite difficult and challenging	○	○	○
i. A job which allows you to establish roots in a community and not have to move from place to place	○	○	○
j. A job which leaves a lot of time for other things in my life	○	○	○

PERIODS UNEMPLOYED

17. Between March 1984 and the present time, were you ever without a job, available for work, and looking
§ **for work at the same time?** (CIRCLE ONE)

1. Yes (ANSWER A-D)

2. No (SKIP TO Q.18)

A. During which months or parts of a month were you without a job, available for work, and looking for work? (MARK ALL THAT APPLY)

	JAN	FEB	MAR	APR	MAY	JUNE	JUL	AUG	SEPT	OCT	NOV	DEC
1984			○	○	○	○	○	○	○	○	○	○
1985	○	○	○	○	○	○	○	○	○	○	○	○
1986	○	○	○	○	○	○	○					

B. During the most recent period indicated above, on average about how many hours per week did you spend actively looking for work? (ENTER NUMBER OF HOURS)

HOURS PER WEEK ☐☐

C. What was the lowest salary or wage rate you would have accepted during the most recent period indicated above? (ENTER AMOUNT BELOW)

SALARY OR WAGE RATE: $ ☐☐,☐☐☐.☐☐

(CIRCLE ONE)

Hourly..... 01
Weekly..... 02
Monthly 04
Yearly 03

D. Did you receive unemployment insurance at any time during these years? (MARK ONE FOR EACH YEAR)

1984	1985	1986
○ Yes	○ Yes	○ Yes
○ No	○ No	○ No

EDUCATION

18. With regard to your high school education, please indicate which of the following applies to you. (CIRCLE ONE)

§

Graduated with class or earlier 01
Left high school but returned to earn a regular diploma 02
Left high school but since earned an equivalent certificate (such as GED) 03
— (ANSWER A)

Currently working toward a regular high school diploma 04
Currently working toward an equivalent of high school diploma (such as GED) 05
Did not graduate or earn an equivalent certificate 06
— (GO TO Q.19)

IF YOU EARNED A HIGH SCHOOL DIPLOMA OR EQUIVALENCY CERTIFICATE

A. When did you earn the high school diploma or equivalency certificate?

§

ENTER MONTH AND YEAR: ☐☐ ☐☐
MONTH YEAR

19. As things stand now, do you think you will go further in your education? (CIRCLE ONE)

§

1. Yes (ANSWER A)
2. No (SKIP TO Q.20)

A. How far in school do you think you will get? (CIRCLE YOUR ONE BEST GUESS)

§

Some high school 01

Finish high school or earn a high school equivalency diploma or certificate 02

Vocational, trade, or business school after high school
- Less than two years 03
- Two years or more 04

College program
- Less than two years of college 05
- Two or more years of college (including two-year degree) 06
- Finish college (four- or five-year degree) 07

Master's degree or equivalent 08

Ph.D., M.D., or other advanced professional degree 09

20. **Since March 1984, have you attended and taken classes for credit at any school such as a college or university,**
§ **graduate or professional school, service academy or school, business school, trade school, technical institute, vocational school, community college, and so forth? DO NOT INCLUDE ARMED FORCES TRAINING PROGRAMS, MANPOWER TRAINING PROGRAMS, OR NONCREDIT COURSES.** (CIRCLE ONE)

1. Yes (GO TO INSTRUCTIONS BELOW)

2. No, but attended a college or other postsecondary school after leaving high school and before March, 1984. (GO TO Q.23)

3. No, did not attend a postsecondary school like those listed above after leaving high school. (GO TO Q.35)

IMPORTANT INSTRUCTIONS

Next we would like information about the schools you have attended between March 1984 and the present time. There is room to provide information about 2 schools. At Q.21 write the name of the school you were attending on March 1, 1984. If you were not in school at that time, enter the name of the first school you attended after March 1, 1984. Answer parts A–J of Q.21 about that school. Provide information about the next school you attended at Q.22.

IF YOU ATTENDED MORE THAN 2 SCHOOLS:	Provide information about the first school you attended in Q.21. At Q.22 provide information about the most recent school you attended.
IF YOU ATTENDED TWO SCHOOLS AT THE SAME TIME:	Provide information about both schools but use a separate question (page) for each.

21. **What is the exact name and location of the 1st school you attended after March 1, 1984?**
§ (WRITE IN AND DO NOT ABBREVIATE THE SCHOOL NAME)

SCHOOL NAME
STREET ADDRESS
CITY STATE ZIP CODE

A. What kind of school is this? (MARK ONE)

- ◯ Vocational, trade, business, or other career training school
- ◯ Junior or community college (2-year)
- ◯ College or university (4 years or more)
- ◯ Independent graduate or professional school (medical, dental, law, theology, etc.)
- ◯ Other (WRITE IN) →

B. Is this a public or private school? (MARK ONE)

- ◯ Public
- ◯ Private
- ◯ Don't Know

C. When did you attend this school? (CIRCLE ALL THE MONTHS ATTENDED FOR EACH YEAR LISTED)
§

	JAN	FEB	MAR	APR	MAY	JUNE	JUL	AUG	SEPT	OCT	NOV	DEC
1984	--	--	03	04	05	06	07	08	09	10	11	12
1985	01	02	03	04	05	06	07	08	09	10	11	12
1986	01	02	03	04	05	06	07	--	--	--	--	--

D. During the last month you attended, how were you classified by the school? (MARK ONE)

- ◯ Freshman
- ◯ Sophomore
- ◯ Junior
- ◯ Senior
- ◯ Graduate/Professional student
- ◯ Special student
- ◯ Other (WRITE IN) →
- ◯ School did not classify students
- ◯ Don't know

E. During the last month you attended this school, were you classified as a full-time student? (MARK ONE)

- ◯ Yes
- ◯ No
- ◯ Don't know

F. **During the last month you attended, about how many hours a week were your classes scheduled to meet?** (INCLUDE LECTURES, SHOP, LAB TIME, ETC. ENTER HOURS)

TOTAL HOURS PER WEEK: ☐☐

G. **During the last month you attended, what was your actual or intended Field of Study or training (for example, agriculture, education, or secretarial, etc.)?** (WRITE IN NAME OF SPECIFIED FIELD OR AREA)

H. **During the last month you attended, what kind of certificate, license, diploma, or degree were you studying for?** (MARK ONE)

- ○ None (SKIP TO J)
- ○ Certificate (IN WHAT? - WRITE IN):
- ○ License (IN WHAT? - WRITE IN):
- ○ Two- or three-year vocational degree or diploma
- ○ Two-year academic degree or diploma
- ○ Four- or five-year Bachelor's degree
- ○ A Master's Degree or equivalent
- ○ A Ph.D. or equivalent
- ○ An M.D., L.L.B., J.D., D.D.S. or equivalent
- ○ Other (WRITE IN):

(ANSWER I)

I. **Did you complete all the requirements for that certificate, degree or diploma from this school?** (MARK ONE)

○ Yes
○ No

MARK MONTH AND YEAR RECEIVED

MONTH		YEAR
○ Jan	○ July	○ 84
○ Feb	○ Aug	○ 85
○ Mar	○ Sep	○ 86
○ Apr	○ Oct	
○ May	○ Nov	
○ June	○ Dec	

J. **Between March 1984 and the present time, did you**
§ **attend any other school?** (CIRCLE ONE)

1. Yes (GO TO Q.22)
2. No (SKIP TO Q.23)

22. **What is the exact name and location of the 2nd school you attended after March 1, 1984? (WRITE IN AND DO NOT**
§ **ABBREVIATE THE SCHOOL NAME. IF YOU ATTENDED MORE THAN 2 SCHOOLS, PROVIDE INFORMATION ABOUT THE MOST RECENT SCHOOL YOU ATTENDED)**

SCHOOL NAME

STREET ADDRESS

CITY STATE ZIP CODE

A. What kind of school is this? (MARK ONE)

- ○ Vocational, trade, business, or other career training school
- ○ Junior or community college (2-year)
- ○ College or university (4 years or more)
- ○ Independent graduate or professional school (medical, dental, law, theology, etc.)
- ○ Other (WRITE IN) →

B. Is this a public or private school? (MARK ONE)

- ○ Public
- ○ Private
- ○ Don't Know

C. When did you attend this school? (CIRCLE ALL THE MONTHS ATTENDED FOR EACH YEAR LISTED)
§

	JAN	FEB	MAR	APR	MAY	JUNE	JUL	AUG	SEPT	OCT	NOV	DEC
1984	--	--	03	04	05	06	07	08	09	10	11	12
1985	01	02	03	04	05	06	07	08	09	10	11	12
1986	01	02	03	04	05	06	07	--	--	--	--	--

D. During the last month you attended, how were you classified by the school? (MARK ONE)

- ○ Freshman
- ○ Sophomore
- ○ Junior
- ○ Senior
- ○ Graduate/Professional student
- ○ Special student
- ○ Other (WRITE IN) →
- ○ School did not classify students
- ○ Don't know

E. During the last month you attended this school, were you classified as a full-time student? (MARK ONE)

- ○ Yes
- ○ No
- ○ Don't know

F. During the last month you attended, about how many hours a week were your classes scheduled to meet? (INCLUDE LECTURES, SHOP, LAB TIME, ETC. ENTER HOURS)

TOTAL HOURS PER WEEK: ☐☐

G. During the last month you attended, what was your actual or intended Field of Study or training (for example, agriculture, education, or secretarial, etc.)? (WRITE IN NAME OF SPECIFIED FIELD OR AREA) →

☐

H. During the last month you attended, what kind of certificate, license, diploma, or degree were you studying for? (MARK ONE)

- ◯ None (SKIP TO J)
- ◯ Certificate (IN WHAT? - WRITE IN): → ☐
- ◯ License (IN WHAT? - WRITE IN): → ☐
- ◯ Two- or three-year vocational degree or diploma
- ◯ Two-year academic degree or diploma
- ◯ Four- or five-year Bachelor's degree
- ◯ A Master's Degree or equivalent
- ◯ A Ph.D. or equivalent
- ◯ An M.D., L.L.B., J.D., D.D.S. or equivalent
- ◯ Other (WRITE IN): → ☐

(ANSWER I)

I. Did you complete all the requirements for that certificate, degree or diploma from this school? (MARK ONE)

◯ Yes
◯ No

MARK MONTH AND YEAR RECEIVED →

MONTH		YEAR
◯ Jan	◯ July	◯ 84
◯ Feb	◯ Aug	◯ 85
◯ Mar	◯ Sep	◯ 86
◯ Apr	◯ Oct	
◯ May	◯ Nov	
◯ June	◯ Dec	

J. Between March 1984 and the present time, did you
§ **attend any other school?** (CIRCLE ONE)

1. Yes
2. No

*23. **Please indicate if you have ever seriously considered applying for admission to any of the following graduate degree programs?** (MARK ALL THAT APPLY)

- ○ Dentistry
- ○ Law
- ○ Medicine
- ○ Master's In Business Administration (MBA) or similar degree
- ○ Master's Degree (not Business Administration)
- ○ Doctoral Degree (Ph.D) in any field
- ○ Other graduate degree (PLEASE SPECIFY) → [ ]
- ○ **I have never considered applying to a graduate degree program**

*24. § **Which of the following standardized professional or graduate school admission tests have you ever taken?** (CIRCLE ALL THAT APPLY)

a. Dental Admission Test (DAT) 1

b. Graduate Management Admission Test (GMAT or ATGSB) 1

c. Graduate Record Examination (GRE) 1

d. Law School Admission Test (LSAT) 1

e. Medical College Admission Test (MCAT) 1

f. Other (PLEASE SPECIFY) 1

[ ]

g. **I took NO graduate or professional school admission tests** 1

*25. § **Have you ever applied for admission to a business or management graduate program which offers the MBA or similar degree?** (CIRCLE ONE)

Yes.....1 (SKIP TO Q.27)

No.....2 (GO TO Q.26)

*26. **What are the chances that you will apply for admission to a business or management graduate program which offers the MBA or similar degree?** (CIRCLE ONE)

Certain to apply in the future..... 01
Very likely to apply..... 02
Somewhat likely to apply 03
Not very likely to apply..... 04
Not at all likely to apply in the future..... 05

(SKIP TO Q.28)

PLEASE DO NOT WRITE IN SHADED AREA

***27. Please list the name and location of the graduate management schools to which you applied. There are spaces to list three schools. If you enrolled in a school, list that school first. For each school, enter the date that you applied, whether you were accepted (and date), and whether you enrolled (and date of enrollment). Indicate whether you received a degree or left without a degree (and the date).**
PLEASE DO NOT ABBREVIATE THE SCHOOL NAME(S).

A. School Name: **City & State:**

When did you apply? (Enter Date)	Were you accepted? (CIRCLE ONE)	Did you enroll? (CIRCLE ONE)	Which of the following applies to you?
Month Year	Accepted .....1 → Month Year Not accepted.....2	Yes .....1 → Month Year No.....2	(CIRCLE ONE) (ENTER DATE) Received degree.....01 Left without degree..02 Still enrolled.....03 Never enrolled.....04 → Month Year

If you applied to a second school, continue to B. Otherwise skip to Q.28.

B. School Name: **City & State:**

When did you apply? (Enter Date)	Were you accepted? (CIRCLE ONE)	Did you enroll? (CIRCLE ONE)	Which of the following applies to you?
Month Year	Accepted .....1 → Month Year Not accepted.....2	Yes .....1 → Month Year No.....2	(CIRCLE ONE) (ENTER DATE) Received degree.....01 Left without degree..02 Still enrolled.....03 Never enrolled.....04 → Month Year

If you applied to a third school, continue to C. Otherwise skip to Q.28.

C. School Name: **City & State:**

When did you apply? (Enter Date)	Were you accepted? (CIRCLE ONE)	Did you enroll? (CIRCLE ONE)	Which of the following applies to you?
Month Year	Accepted .....1 → Month Year Not accepted.....2	Yes .....1 → Month Year No.....2	(CIRCLE ONE) (ENTER DATE) Received degree.....01 Left without degree..02 Still enrolled.....03 Never enrolled.....04 → Month Year

28. With regard to your education and training during the last year you were in postsecondary school, how satisfied as a whole were you with the following? (MARK ONE OVAL FOR EACH LINE)

	Very satisfied	Somewhat satisfied	Neutral or no opinion	Somewhat dissatisfied	Very dissatisfied
a. The ability, knowledge, and personal qualities of most teachers	○	○	○	○	○
b. The social life	○	○	○	○	○
c. Development of my work skills	○	○	○	○	○
d. My intellectual growth	○	○	○	○	○
e. Counseling or job placement	○	○	○	○	○
f. The buildings, library, equipment, etc	○	○	○	○	○
g. Cultural activities, music, art, drama, etc	○	○	○	○	○
h. The intellectual life of the school	○	○	○	○	○
i. Course curriculum	○	○	○	○	○
j. The quality of the instruction	○	○	○	○	○
k. Sports and recreation facilities	○	○	○	○	○
l. The financial cost of attending	○	○	○	○	○
m. The prestige of the school	○	○	○	○	○

29. During which of the following time periods did you attend any school (not including high school)? (CIRCLE ALL THAT APPLY)

Any or all months between Fall 1984 - Spring 1985 ..... 1 (ANSWER A)

Any or all months between Fall 1985 - Spring 1986 ..... 1 (ANSWER B)

Did not attend school during either of the two periods listed above ..... 1 (SKIP TO Q.33)

A. What were the total annual charges for tuition and fees for each year that you attended school? INCLUDE ALL TUITION AND FEES EVEN IF THEY WERE PAID COMPLETELY OR IN PART BY YOUR PARENTS, A SCHOLARSHIP OR A LOAN. WRITE IN YOUR BEST ESTIMATE; ROUND TO THE NEAREST DOLLAR.

§

Fall 1984-Spring 1985 $,

B. What were the total annual charges for tuition and fees for each year that you attended school? INCLUDE ALL TUITION AND FEES EVEN IF THEY WERE PAID COMPLETELY OR IN PART BY YOUR PARENTS, A SCHOLARSHIP OR A LOAN. WRITE IN YOUR BEST ESTIMATE; ROUND TO THE NEAREST DOLLAR.

§

Fall 1985-Spring 1986 $,

30. **Did you receive (or will you receive) any kind of scholarship, fellowship, grant, or benefit (not a loan) to go to school during these time periods?** (CIRCLE ALL THAT APPLY)

a. Yes, Fall 1984 - Spring 1985 ..... 1 ┐
b. Yes, Fall 1985 - Spring 1986 ..... 1 ┘ (ANSWER A AND B)

c. No ..... 1 (SKIP TO Q.31)

A. **What kind(s) of scholarship, fellowship, grant, or benefit (not a loan) did you or will you receive?** (MARK ALL THAT APPLY IN EACH COLUMN)

	(1) Fall 1984-Spring 1985	(2) Fall 1985-Spring 1986
a. Pell Grant or Basic Educational Opportunity Grant (BEOG)	○	○
b. Supplemental Educational Opportunity Grant	○	○
c. Other scholarship or grant	○	○

(PLEASE SPECIFY)

1984-85: [ ]

1985-86: [ ]

B. **Estimate the total dollar value of the amount you received and will receive from scholarships, fellowships, grants, or benefits (not loans) during each period. Enter a zero, "0," where you received no such funds.** (ENTER AMOUNTS; ROUND TO NEAREST DOLLAR)

REMEMBER: $,565 **RIGHT**

$ 56,5 **WRONG**

1. Fall 1984 - Spring 1985

Total Dollar Value: $,

2. Fall 1985 - Spring 1986

Total Dollar Value: $,

31. **Considering the same time periods, did you pay any of the costs to go to school from the money you had saved or earned?** (CIRCLE ALL THAT APPLY)

a. Yes, Fall 1984 - Spring 1985 1
b. Yes, Fall 1985 - Spring 1986 ..... 1 — (ANSWER A AND B)

c. No ..... 1 (SKIP TO Q.32)

A. What was (were) the source(s) of the money you paid or will pay to go to school from the money you had saved or earned? (MARK ALL THAT APPLY IN EACH COLUMN)

	(1) Fall 1984-Spring 1985	(2) Fall 1985-Spring 1986
a. Own savings from money I earned before I started postsecondary school	○	○
b. Own earnings (including summer earnings) since I started school but not while taking courses	○	○
c. Money earned from a college work-study job	○	○
d. Other earnings while taking courses	○	○

B. Estimate the total amount of money you paid or will pay to go to school from money you had saved or earned. Enter a zero, "0", where you paid no money. (ENTER AMOUNTS; ROUND TO NEAREST DOLLAR)

1. Fall 1984 - Spring 1985

Total Dollar Value: $ ___,___

2. Fall 1985 - Spring 1986

Total Dollar Value: $ ___,___

32. Considering the same time periods, did you or will you receive a loan to go to school? (CIRCLE ALL THAT APPLY)

§

a. Yes, Fall 1984 - Spring 1985 ..... 1 ┐
b. Yes, Fall 1985 - Spring 1986 ..... 1 ┘ (ANSWER A AND B)

c. No ..... 1 (SKIP TO Q.33)

A. From which of the following sources did you or will you receive a loan to go to school? (MARK ALL THAT APPLY IN EACH COLUMN)

	(1) Fall 1984-Spring 1985	(2) Fall 1985-Spring 1986
a. Federal Guaranteed Student Loan Program	○	○
b. National Direct Student Loan	○	○
c. Other loan	○	○

(PLEASE SPECIFY)

1984-85: ☐

1985-86: ☐

B. Estimate the total dollar value of the amounts you received or will receive as loans to go to school during each period. Enter a zero, "0", where you received no loans. (ENTER AMOUNTS; ROUND TO NEAREST DOLLAR)

1. Fall 1984 - Spring 1985

Total Dollar Value: $ ☐☐,☐☐☐

2. Fall 1985 - Spring 1986

Total Dollar Value: $ ☐☐,☐☐☐

33. Since leaving high school, have you received any loans for your education? (MARK ONE)

- ○ Yes (ANSWER A-C)
- ○ No (SKIP TO Q.34)

A. Have any of your student loan payments been deferred or forgiven? (MARK ONE)

- ○ Yes
- ○ No

B. Have any of your student loan repayment schedules begun? (MARK ONE)

- ○ Yes (ANSWER C)
- ○ No (SKIP TO Q.34)

C. When was your first payment due? (MARK CIRCLES FOR MONTH AND YEAR)

MONTH		YEAR
○ Jan	○ July	○ 80
○ Feb	○ Aug	○ 81
○ Mar	○ Sep	○ 82
○ Apr	○ Oct	○ 83
○ May	○ Nov	○ 84
○ June	○ Dec	○ 85
		○ 86

34. Did your parents take out loans or borrow money to finance your postsecondary schooling? (MARK ONE)

- ○ Yes (ANSWER A)
- ○ No (GO TO Q.35)
- ○ Don't Know (GO TO Q.35)

A. Did your parents borrow money under the Auxiliary Loan/PLUS loan program or through a Home Equity Loan? (MARK ONE)

- ○ Yes
- ○ No
- ○ Don't Know

35. Please indicate whether or not your parents (or guardians) claimed you as an exemption on their federal income tax during each of the following years: (CIRCLE ONE NUMBER FOR EACH LINE)

§

	Yes	No	Don't know
a. 1984	1	2	3
b. 1985	1	2	3

36. **For each year listed below, please estimate the number of days you lived in the home of your parents (or guardians).** (ENTER NUMBER. IF NONE, ENTER "0")

1984	1985
☐☐☐	☐☐☐

37. **For each year listed below, indicate which of the following were provided to you by your parents (or guardians), at no cost to you.** (MARK ALL THAT APPLY FOR EACH YEAR)

	1984	1985
a. Room (Living quarters)	○	○
b. Board (Food)	○	○
c. Use of parents' car or truck	○	○
d. Medical expenses or insurance	○	○
e. Clothing	○	○
f. None of the above for the year listed	○	○

38. **How much financial assistance (in cash or other gifts and support) did you receive from parents or guardians for each year specified below? (INCLUDE CASH ASSISTANCE, GIFTS OR SUPPORT RECEIVED).** (MARK ONE FOR EACH YEAR)

	1984	1985
a. None	○	○
b. $1 - $500	○	○
c. $501 - 750	○	○
d. $751 - 1,000	○	○
e. $1,001 - 1,250	○	○
f. $1,251 - 1,500	○	○
g. $1,501 - 2,000	○	○
h. $2,001 - 3,000	○	○
i. $3,001 - or More	○	○
j. Don't Know	○	○

39. **Have you formally applied for admission (filled out a form and sent it in) to any graduate or professional school (law, medicine, pharmacy, etc.) since the beginning of March 1984?** (MARK ONE)

○ Yes (ANSWER A AND B)
○ No (SKIP TO Q.40)

A. Were you accepted for admission at any graduate or professional school? (MARK ONE)

○ Yes
○ No

B. Did you apply for financial aid? (MARK ONE)

○ Yes (ANSWER C)
○ No (SKIP TO Q.40)

C. Were you offered financial aid? (MARK ONE)

○ Yes
○ No
○ Don't Know

OTHER TRAINING

40. Since March 1984, have you participated in any program such as on-the-job training, registered apprenticeships, § government training programs, personal enrichment, or correspondence courses? Do not include regular school and college programs or Armed Forces training programs. (CIRCLE ONE)

1. Yes (GO TO A)

2. No (SKIP TO Q.41)

A. What type of training program(s) or course(s) have you participated in? (CIRCLE ALL THAT APPLY)
§

a. Formal Registered Apprenticeship (your state or labor union) 1
b. Job Training Partnership Act (JTPA) 1
c. State or locally sponsored employment and training program 1
d. Other employment and training program 1
(PLEASE SPECIFY) →

e. Non-credit courses or activities in regular school 1
f. Correspondence courses 1
g. Courses given by a community group, labor organization, or church 1
h. Courses given by a private instructor 1
i. Courses given by television, radio or newspaper 1

B. How long is (or was) this program scheduled to last? (MARK ONE)

○ Less than one month
○ Between one month and one year
○ More than one year

C. Have you completed this program? (MARK ONE)

○ Yes
○ No, still enrolled
○ No, left without completing

D. Were you being trained for some kind of work? (MARK ONE)

○ Yes (ANSWER E)

○ No (SKIP TO Q.41)

E. What kind of work were you being trained for or learning about? If you have participated in more than one program, answer for the one in which you spent the most time. (Examples: photography, sales, auto mechanic work, plumbing, typing, etc.) (WRITE IN): →

FAMILY INFORMATION

41. What was your marital status the first week of February 1986? (CIRCLE ONE)

§

Divorced	02	(SKIP TO Q.46)
Widowed	03	
Separated	04	
Never married	01	(SKIP TO Q.48)
Not married but living in a marriage-like relationship (ANSWER Qs.42-45 FOR THIS PERSON)	06	(GO TO Q.42)
Married	05	

42. What was your spouse (husband, or wife, or live-in partner) doing the first week of February 1986? (MARK ALL THAT APPLY)

- ◯ He or she was working for pay at a full-time or part-time job
- ◯ Taking vocational or technical courses at any kind of school or college (for example, vocational, trade, business, or other career training school)
- ◯ Taking academic courses at a two- or four-year college
- ◯ Taking courses at a graduate or professional school (e.g., law, medicine, pharmacy, etc.)
- ◯ Serving on active duty in the Armed Forces (or service academy)
- ◯ Keeping house (without other job)
- ◯ Temporary layoff from work, looking for work, or waiting to report to work
- ◯ Other (PLEASE SPECIFY)

43. Did he or she hold a job the first week of February 1986? (CIRCLE ONE)

1. Yes (GO TO Q.44)
2. No (SKIP TO Q.45)

44. Please describe below the job he or she held during the first week of February 1986.

A. What kind of job or occupation did he or she have? (For example, salesperson, waitress, secretary, etc.)
(WRITE IN) →

B. What kind of business or industry was this job in? (For example, shoe store, restaurant, office, etc.)
(WRITE IN) →

C. What were his or her most frequent activities or duties on this job? (For example, selling shoes, waiting on tables, typing and filing, etc.) (WRITE IN) →

D. Was he or she: (MARK ONE)

- ○ An employee of a PRIVATE company, bank, business, school, or individual working for wages, salary or commissions?
- ○ A GOVERNMENT employee (Federal, State, county or local institution or school)?
- ○ Self-employed in his or her OWN business, professional practice, or farm?
- ○ Working WITHOUT PAY in family business or farm?
- ○ Working WITHOUT PAY in volunteer job?

E. When did he or she start working at this job? (ENTER MONTH AND YEAR)

MONTH YEAR

F. How many hours does he or she usually work at this job in an average week? (ENTER NUMBER OF HOURS)

HOURS PER WEEK

G. In an average week, approximately how much does he or she earn at this job? Report his or her gross earnings before taxes or other deductions. If not paid by the week, please estimate. (ENTER AMOUNT; ROUND TO NEAREST DOLLAR)

APPROXIMATE GROSS EARNINGS
DURING AVERAGE WEEK: → $,

H. Is he or she currently working at this job? (MARK ONE)

- ○ Yes
- ○ No (IF NO, MARK ONE FOR MONTH HE OR SHE LEFT)

○ February	○ April	○ June
○ March	○ May	○ July

45. As of the first week of February 1986, what was the highest level of education that he or she had attained? (MARK ONE)

- ○ Some high school
- ○ Finished high school or earned a high school equivalency diploma or certificate

Vocational, trade, or business school after high school

- ○ Less than two years
- ○ Two years or more

College program

- ○ Less than two years of college
- ○ Two or more years of college (including two-year degree)
- ○ Finished college (four- or five-year degree)

- ○ Master's degree or equivalent
- ○ Ph.D., M.D., or other advanced professional degree
- ○ Don't know

46. How many times have you been legally married? (CIRCLE ONE)

Once	01	(GO TO Q.47)
Twice	02	
Three or more times	03	
Never	04	(SKIP TO Q.48)

47. **Now we would like some information about your current or most recent marriage and any past marriage. Please start with your current or most recent marriage and then report the one before that, if any.**

COLUMN 1

Current or Most Recent Marriage

A. When did this marriage begin?
§ (ENTER MONTH AND YEAR)

MONTH YEAR

B. As of the first week of February 1986, were you (CIRCLE ONE)

Still married and living with your spouse..... 01 (ANSWER E)

Still married but temporarily living apart due to military service, work-related travel, hospitalization, imprisonment, etc..... 02 (ANSWER E)

Still married but separated from spouse ..... 03 (ANSWER C)

No longer married due to divorce or annulment ..... 04 (ANSWER D)

No longer married due to death of spouse ..... 05 (ANSWER D)

C. When did you stop living with your spouse? (ENTER MONTH AND YEAR)

MONTH YEAR (ANSWER E)

D. When did this marriage end?
§ (ENTER MONTH AND YEAR)

MONTH YEAR

E. Did you have a previous marriage?
§ (CIRCLE ONE)

Yes.....1 (GO TO COLUMN 2)

No.....2 (SKIP TO Q.48)

COLUMN 2

Previous Marriage

A. When did this marriage begin?
§ (ENTER MONTH AND YEAR)

MONTH YEAR

B. As of the first week of February 1986, were you (MARK ONE)

○ No longer married due to divorce or annulment

○ No longer married due to death of spouse

C. When did this marriage end?
§ (ENTER MONTH AND YEAR)

MONTH YEAR (GO TO Q.48)

48. How many children, including adopted and step-children, do you eventually expect to have? (MARK ONE)

- ○ None
- ○ One
- ○ Two
- ○ Three
- ○ Four
- ○ Five
- ○ Six or more

49. As of the first week of February 1986, how many children (including adopted, foster-care and stepchildren) have
§ **you ever had?** (ENTER NUMBER. IF NONE, WRITE "0" AND SKIP TO Q.54)

NUMBER OF CHILDREN ☐☐

Next we would like some information about your children (including adopted, foster-care, and stepchildren). Please start with your first (oldest) child and then report all others after that, if any.

Children	A. What is the birthdate of this child? (ENTER MONTH AND YEAR)	B. Is the child adopted, a step-child, a foster care child or a child born to you? (MARK ONE)
50. First (oldest) Child	☐☐ MONTH ☐☐ YEAR	○ Born to me ○ Stepchild ○ Adopted ○ Foster care
51. Second Child	☐☐ MONTH ☐☐ YEAR	○ Born to me ○ Stepchild ○ Adopted ○ Foster care
52. Third Child	☐☐ MONTH ☐☐ YEAR	○ Born to me ○ Stepchild ○ Adopted ○ Foster care
53. Fourth Child	☐☐ MONTH ☐☐ YEAR	○ Born to me ○ Stepchild ○ Adopted ○ Foster care

INCOME

54. Write in below your best estimate of your total yearly income before taxes for (a) ALL OF 1984, and (b) ALL OF 1985.

§ **Include your spouse's (husband, wife, or live-in partner) income where asked. EVERY LINE SHOULD HAVE DOLLAR AMOUNT ENTRY. IF YOU DID NOT RECEIVE ANY INCOME FROM A SOURCE, ENTER A ZERO, "0".**
(ENTER AMOUNTS; ROUND TO NEAREST DOLLAR)

SOURCE	Amount Received 1984	Amount Received 1985
a. Your own wages, salaries, commissions or tips. IF NONE: ENTER "0"	$ ___,___	$ ___,___
b. Your own net income from a business or farm. IF NONE: ENTER "0"	$ ___,___	$ ___,___
c. Your spouse's (husband or wife or live-in partner) wages, salaries, commissions, or tips, and his or her net income from a business or farm. IF NONE: ENTER "0"	$ ___,___	$ ___,___
d. Dividends, interest, rental income, investment income (include spouse's). IF NONE: ENTER "0"	$ ___,___	$ ___,___
e. Social Security benefits (include spouse's). IF NONE: ENTER "0"	$ ___,___	$ ___,___
f. Veteran's benefits (include spouse's). IF NONE: ENTER "0"	$ ___,___	$ ___,___
g. Your unemployment compensation. IF NONE: ENTER "0"	$ ___,___	$ ___,___
h. Your spouse's unemployment compensation. IF NONE: ENTER "0"	$ ___,___	$ ___,___
i. Public assistance, welfare, AFDC, etc. (include spouse's). IF NONE: ENTER "0"	$ ___,___	$ ___,___
j. Income you (and your spouse) received as gifts from relatives or friends. IF NONE: ENTER "0"	$ ___,___	$ ___,___
k. Your scholarships, fellowships, grants, loans, etc. IF NONE: ENTER "0"	$ ___,___	$ ___,___
l. Your spouse's scholarships, fellowships, grants, loans, etc. IF NONE: ENTER "0"	$ ___,___	$ ___,___
m. Nontaxable income not included above (include spouse's). IF NONE: ENTER "0"	$ ___,___	$ ___,___
n. TOTAL INCOME (ADD TOGETHER PARTS a-m)	$ ___,___	$ ___,___

EXPERIENCES AND OPINIONS

55. The following questions ask about your political participation. Thinking about the last 24 months. . . . (MARK ONE FOR EACH LINE)

	Frequently	Sometimes	Never
a. When you talked with your friends, did you ever talk about public problems – that is, what's happening in the country or in your community?	○	○	○
b. Did you ever talk about public problems with any of the following people?			
Your family	○	○	○
People where you work	○	○	○
Community leaders, such as club or church leaders	○	○	○
c. Did you ever talk about public problems with elected government officials or people in politics, such as Democratic or Republican leaders?	○	○	○
d. Did you ever talk to people to try to get them to vote for or against a candidate?	○	○	○
e. Did you ever give any money or buy tickets to help someone who was trying to win an election?	○	○	○
f. Did you ever go to any political meetings, rallies, barbecues, fish fries, or things like that in connection with an election?	○	○	○
g. Did you ever do any work to help a candidate in his or her campaign?	○	○	○
h. Did you ever hold an office in a political party or get elected to a government job?	○	○	○

56. Are you registered to vote? (MARK ONE)

○ Yes
○ No

57. Between March 1984 and the end of February 1986 have you voted in a local, state, or national election? (MARK ONE)

○ Yes
○ No

58. Did you vote in the 1984 Presidential election? (MARK ONE)

○ Yes
○ No

59. **To what extent have you voluntarily participated in the following groups during the last 24 months? (By voluntarily, we mean you are not an employee of the group; by active participant, we mean that you attend the meetings or events; by member only, we mean that you are on a mailing or telephone list so that you are kept informed of meetings and events.)** (MARK ONE FOR EACH LINE)

	Active Participant	Member Only	Not At All
a. Youth organizations--such as Little League coach, scouting, etc	O	O	O
b. Union, farm, trade or professional association	O	O	O
c. Political clubs or organizations	O	O	O
d. Church or church-related activities (not including worship services)	O	O	O
e. Community centers, neighborhood improvement, or social-action associations or groups	O	O	O
f. Organized volunteer work--such as in a hospital	O	O	O
g. A social, hobby, garden, or card playing group	O	O	O
h. Sports teams or sports clubs	O	O	O
i. A literary, art, discussion, music, or study group	O	O	O
j. Educational organizations--such as PTA or an academic group	O	O	O
k. Service organizations--such as Rotary, Junior Chamber of Commerce, Veterans, etc	O	O	O
l. Another voluntary group in which I participate	O	O	O

60. How do you feel about each of the following statements? (MARK ONE FOR EACH LINE)

	Agree strongly	Agree	Disagree	Disagree strongly
a. A working mother of pre-school children can be just as good a mother as the woman who doesn't work	○	○	○	○
b. It is usually better for everyone involved if the man is the achiever outside the home and the woman takes care of the home and family	○	○	○	○
c. Men and women should be paid the same money if they do the same work	○	○	○	○
d. Most women are happiest when they are making a home and caring for children	○	○	○	○
e. A woman should have exactly the same educational opportunities as a man	○	○	○	○
f. A preschool child is likely to suffer if the mother works	○	○	○	○
g. Women should be considered as seriously as men for jobs as executives or politicians	○	○	○	○
h. Other things being equal, a woman's job should be considered as seriously as a man's in making family decisions about whether to move, where to live, etc	○	○	○	○

61. How do you feel about each of the following statements? (MARK ONE FOR EACH LINE)

	Agree strongly	Agree	Disagree	Disagree strongly	No opinion
a. I take a positive attitude toward myself	O	O	O	O	O
b. Good luck is more important than hard work for success	O	O	O	O	O
c. I feel I am a person of worth, on an equal plane with others	O	O	O	O	O
d. I am able to do things as well as most other people	O	O	O	O	O
e. Every time I try to get ahead, something or somebody stops me	O	O	O	O	O
f. Planning only makes a person unhappy, since plans hardly ever work out anyway	O	O	O	O	O
g. People who accept their condition in life are happier than those who try to change things	O	O	O	O	O
h. On the whole, I am satisfied with myself	O	O	O	O	O
i. What happens to me is my own doing	O	O	O	O	O
j. At times I think I am no good at all	O	O	O	O	O
k. When I make plans, I am almost certain I can make them work	O	O	O	O	O
l. I feel I do not have much to be proud of	O	O	O	O	O

The next few questions are about your use of alcohol in the past month. (One drink = glass/can/bottle of beer or glass of wine or shot/highball/cocktail of hard liquor.)

***62. How many days in the past month (30 days) did you drink an alcoholic beverage, that is beer, wine or hard liquor?**
§ (CIRCLE ONE)

None	00	(SKIP TO Q.65)
1 day	01	(GO TO Q.63)
2 days	02	
3 days	03	
4 days	04	
5 days	05	
6-10 days	06	
11-15 days	07	
16-20 days	08	
21-25 days	09	
26-30 days	10	

***63. On how many days during the last 30 days, did you have six or more drinks?** (CIRCLE ONE)
§

None	00
1 day	01
2 days	02
3 days	03
4 days	04
5 days	05
6-10 days	06
11-15 days	07
16-20 days	08
21-25 days	09
26-30 days	10

***64. Considering only the days that you drank in the last 30 days. . . .**
§ (CIRCLE ONE FOR EACH LINE)

A. On the day that you had the fewest drinks, how many drinks did you have?

01 02 03 04 05 06 07 08 09 10 or more

B. On the day that you had the greatest number of drinks, how many drinks did you have?

01 02 03 04 05 06 07 08 09 10 or more

C. On days that you drank, what was the average number of drinks that you had?

01 02 03 04 05 06 07 08 09 10 or more

65. **In the LAST 12 MONTHS, how many times (if any) have you seen a doctor or other professional for each of the following?** (MARK ONE FOR EACH LINE)

	None	Once	Twice	3 to 5 Times	6 to 9 Times	10 or More Times
a. for a routine physical check-up	O	O	O	O	O	O
b. for an injury suffered in a fight, assault, or auto accident	O	O	O	O	O	O
c. for any other accidental injury	O	O	O	O	O	O
d. for some physical illness or symptom, not including pregnancy	O	O	O	O	O	O
e. for some emotional or psychological problem or symptom	O	O	O	O	O	O

66. **Do you have any of the following conditions?** (MARK ALL THAT APPLY)

- ○ Specific learning disability
- ○ Visual handicap (not corrected by glasses)
- ○ Hard of hearing
- ○ Deafness
- ○ Speech disability
- ○ Orthopedic handicap
- ○ Other physical disability or handicap
  (PLEASE SPECIFY)→ [ ]
- ○ NONE OF THESE CONDITIONS

67. **Do you feel that you have a physical condition that limits the kind or amount of work you can do on a job, or affects your chances for more education?** (MARK ONE)

- ○ Yes
- ○ No

68. How important is each of the following to you in your life? (MARK ONE FOR EACH LINE)

	Not important	Somewhat important	Very important
a. Being successful in my line of work	○	○	○
b. Finding the right person to marry and having a happy family life	○	○	○
c. Having lots of money	○	○	○
d. Having strong friendships	○	○	○
e. Being able to find steady work	○	○	○
f. Being a leader in my community	○	○	○
g. Being able to give my children better opportunities than I've had	○	○	○
h. Living close to parents and relatives	○	○	○
i. Getting away from this area of the country	○	○	○
j. Working to correct social and economic inequalities	○	○	○
k. Having children	○	○	○
l. Having leisure time to enjoy my own interests	○	○	○

*69. **If an 18-year old, who was like you in many ways, asked your advice about how to prepare for a career in business, which of the following education patterns would you recommend?** (MARK ONE)

- ◯ High school only with no college
- ◯ College bachelor's degree in business
- ◯ College bachelor's degree in a technical field such as engineering or computer science
- ◯ College bachelor's degree plus a master's degree in business (MBA or similar degree)
- ◯ College bachelor's degree plus a master's degree in economics
- ◯ College bachelor's degree plus a law degree
- ◯ College bachelor's degree plus certification, such as a Certified Public Accountant (CPA)

INFORMATION FOR FUTURE FOLLOW-UP

ID: ☐-☐☐☐☐-☐☐-☐

PRINT your name, address and telephone number (where you can be reached during the coming year).

Your Name

Spouse's Full Name

Spouse's Full Name

Your Maiden Name

Street Address

City

State ZIP Code

Spouse's Full Name

( )
TELEPHONE NUMBER

IN WHOSE NAME IS THE TELEPHONE NUMBER LISTED?
(CIRCLE ONE)

No phone 1
My name 2
Spouse's name 3
Other (PLEASE SPECIFY) _____ 4

PRINT name, address and telephone number of your parents (or one parent).

Parent's Name

Street Address

City

State ZIP Code

( )
TELEPHONE NUMBER

IN WHOSE NAME IS THE TELEPHONE NUMBER LISTED?
(CIRCLE ONE)

No phone 1
Parent's name 2
Other (PLEASE SPECIFY) _____ 3

PRINT the names and addresses of two other people who will know where to get in touch with you during the coming year. (List no more than one person who now lives with you.) Remember to record the relationship of these persons to you (for example, friend, sister, cousin, etc.).

Name

Street Address

City

State ZIP Code

Relationship to you
( )
TELEPHONE NUMBER

IN WHOSE NAME IS THE TELEPHONE NUMBER LISTED?
(CIRCLE ONE)

No phone 1
Person listed here 2
Other (PLEASE SPECIFY) _____ 3

Name

Street Address

City

State ZIP Code

Relationship to you
( )
TELEPHONE NUMBER

IN WHOSE NAME IS THE TELEPHONE NUMBER LISTED?
(CIRCLE ONE)

No phone 1
Person listed here 2
Other (PLEASE SPECIFY) _____ 3

Please give the following information about yourself: (MARK ONE)

DATE OF BIRTH ☐☐ ☐☐ ☐☐
MONTH DAY YEAR

SEX: (CIRCLE ONE)
Male 1
Female 2

THE INFORMATION PROVIDED ON THIS FORM IS PART OF THE SYSTEM OF RECORDS AS DEFINED BY THE PRIVACY ACT. THIS INFORMATION WILL BE PROTECTED TO THE EXTENT PERMISSIBLE BY THE FAMILY EDUCATIONAL RIGHTS AND PRIVACY ACT. PLEASE GO ON TO NEXT PAGE.

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SCHOOL RECORD INFORMATION

PERMISSION FORM

This form requests your permission to allow any school you attended after high school to give us certain record information and to obtain your social security number. The information will be used solely for purposes of this survey. We wish to thank you in advance for your help and cooperation.

Please give HIGH SCHOOL AND BEYOND a copy of my school records. This information includes grade point averages, honors, school costs, and financial aid awards.

Please SIGN
Your Name _____

PRINT Name
Signed Above _____

Street
Address _____

City/State/
ZIP Code _____

SOCIAL SECURITY NUMBER

Giving us your Social Security number is completely voluntary, and there is no penalty for not disclosing it. It is needed so that any later information gets correctly matched with the same individual. We are authorized to ask these questions by Section 406 of the General Education Provisions Act (20 USC 1221e-1).

Please print your Social Security number in the space below.

				-				-				

Social Security Number

THANK YOU VERY MUCH FOR YOUR COOPERATION.