

High School and Beyond Fourth Follow-up

1992 Phone Interview (CATI), Sophomore Cohort

Prepared for: The National Center for Education Statistics
by: NORC, University of Chicago

1. TODAY'S DATE: [Write in MONTH / DAY / YEAR] ____ / ____ / ____

2. What were you doing last week? [Circle number of ALL that apply]
 - 1 WORKING FOR PAY AT A FULL-TIME OR PART-TIME JOB?
 - 2 LOOKING FOR WORK?
 - 3 HOLDING A JOB BUT ON TEMPORARY LAYOFF FROM WORK OR WAITING TO REPORT TO WORK?
 - 4 TAKING VOCATIONAL OR TECHNICAL COURSES?
 - 5 TAKING UNDERGRADUATE COLLEGE ACADEMIC COURSES?
 - 6 TAKING COURSES AT A GRADUATE OR PROFESSIONAL SCHOOL?
 - 7 SERVING IN AN APPRENTICESHIP PROGRAM OR GOVERNMENT TRAINING PROGRAM?
 - 8 SERVING ON ACTIVE DUTY IN THE ARMED FORCES?
 - 9 KEEPING HOUSE?
 - 10 TAKING A BREAK FROM WORKING OR FROM SCHOOL?
 - 11 OTHER [Write in] _____

3. Do you live alone? [Circle number of correct answer]
 - 1 I live alone [Skip to item 5]
 - 2 I live with other people in my household
 [Please complete item 4]

4. Please describe the numbers of each type of person(s) in your household. [Enter the number of each type of household member in the space provided. Enter ZERO (0) if none. Please do not leave any blank.]

Number	Type
_____	HUSBAND, WIFE, OR PARTNER
_____	CHILDREN OR STEP-CHILDREN
_____	FATHER
_____	OTHER MALE GUARDIAN (<i>SUCH AS A STEPFATHER</i>)
_____	MOTHER
_____	OTHER FEMALE GUARDIAN (<i>SUCH AS A STEPMOTHER</i>)
_____	BROTHER(S) (<i>INCLUDING STEP- OR HALF-BROTHERS</i>)
_____	SISTER(S) (<i>INCLUDING STEP- OR HALF-SISTERS</i>)
_____	GRANDPARENT(S)
_____	OTHER RELATIVE(S) (<i>INCLUDING CHILDREN AND ADULTS</i>)
_____	NON-RELATIVE(S) (<i>INCLUDING CHILDREN AND ADULTS</i>)

5. What was your marital status in February of 1986?
[Circle number of correct answer]

1 MARRIED
2 SEPARATED
3 DIVORCED
4 WIDOWED
5 NEVER MARRIED

6. Has there been any change in your marital status since February of 1986?
[Circle number of correct answer]

1 NO [Skip to item 9 on page 7]
2 YES [Please complete item 7]

7. Marital history since **February, 1986** [Please record ALL changes in your marital status since February, 1986. Write in MONTH / YEAR and indicate NEW STATUS]

A. First change in marital status ...

a. New marital status [Circle number of correct answer]

- 1 MARRIED
- 2 SEPARATED
- 3 DIVORCED
- 4 REUNITED
- 5 REMARRIED
- 6 WIDOWED

b. Date [Write in MONTH / YEAR]: _____ / _____

c. Were there any other changes?
[Circle number of correct answer]

- 1 NO [Skip to item 8 on page 7]
- 2 YES [Please complete B]

B. Second change in marital status ...

a. New marital status [Circle number of correct answer]

- 1 MARRIED
- 2 SEPARATED
- 3 DIVORCED
- 4 REUNITED
- 5 REMARRIED
- 6 WIDOWED

b. Date [Write in MONTH / YEAR]: _____ / _____

c. Were there any other changes?
[Circle number of correct answer]

- 1 NO [Skip to item 8 on page 7]
- 2 YES [Please complete C]

C. Third change in marital status ...

a. New marital status [Circle number of correct answer]

- 1 MARRIED
- 2 SEPARATED
- 3 DIVORCED
- 4 REUNITED
- 5 REMARRIED
- 6 WIDOWED

b. Date [Write in MONTH / YEAR]: _____ / _____

c. Were there any other changes?
[Circle number of correct answer]

- 1 NO [Skip to item 8 on page 7]
- 2 YES [Please complete D]

D. Fourth change in marital status ...

a. New marital status [Circle number of correct answer]

- 1 MARRIED
- 2 SEPARATED
- 3 DIVORCED
- 4 REUNITED
- 5 REMARRIED
- 6 WIDOWED

b. Date [Write in MONTH / YEAR]: _____ / _____

c. Were there any other changes?
[Circle number of correct answer]

- 1 NO [Skip to item 8 on page 7]
- 2 YES [Please complete E]

E. Fifth change in marital status ...

a. New marital status [Circle number of correct answer]

- 1 MARRIED
- 2 SEPARATED
- 3 DIVORCED
- 4 REUNITED
- 5 REMARRIED
- 6 WIDOWED

b. Date [Write in MONTH / YEAR]: _____ / _____

c. Were there any other changes?
[Circle number of correct answer]

- 1 NO [Skip to item 8 on page 7]
- 2 YES [Please complete F]

F. Sixth change in marital status ...

a. New marital status [Circle number of correct answer]

- 1 MARRIED
- 2 SEPARATED
- 3 DIVORCED
- 4 REUNITED
- 5 REMARRIED
- 6 WIDOWED

b. Date [Write in MONTH / YEAR]: _____ / _____

c. Were there any other changes?
[Circle number of correct answer]

- 1 NO [Skip to item 8 on page 7]
- 2 YES [Please complete G]

G. Seventh change in marital status ...

a. New marital status [Circle number of correct answer]

- 1 MARRIED
- 2 SEPARATED
- 3 DIVORCED
- 4 REUNITED
- 5 REMARRIED
- 6 WIDOWED

b. Date [Write in MONTH / YEAR]: _____ / _____

c. Were there any other changes?
[Circle number of correct answer]

- 1 NO [Skip to item 8 on page 7]
- 2 YES [Please complete H]

H. Eighth change in marital status ...

a. New marital status [Circle number of correct answer]

- 1 MARRIED
- 2 SEPARATED
- 3 DIVORCED
- 4 REUNITED
- 5 REMARRIED
- 6 WIDOWED

b. Date [Write in MONTH / YEAR]: _____ / _____

c. Were there any other changes?
[Circle number of correct answer]

- 1 NO
- 2 YES

8. What is your current marital status? [Circle number of correct answer]

- 1 MARRIED
- 2 SEPARATED
- 3 DIVORCED
- 4 WIDOWED
- 5 NEVER MARRIED

9. Did you receive a high school diploma, a GED, or equivalent?
[Circle and complete appropriate response]

- 1 NO [Please complete item 10]
- 2 YES, AWARDED A HIGH SCHOOL DIPLOMA
[Write in MONTH / YEAR] _____ / _____
- 3 YES, PASSED GENERAL EDUCATIONAL DEVELOPMENT (GED) EXAM
[Write in MONTH / YEAR] _____ / _____
- 4 YES, AWARDED AN EQUIVALENT CERTIFICATE
[Write in MONTH / YEAR] _____ / _____

[Please skip to item 11]

10. What is your current high school status? [Circle number of correct answer]

- 1 Currently working toward a high school diploma?
- 2 Currently working toward a GED?
- 3 Currently working toward a high school equivalency certificate?
- 4 Other [Write in] _____

11. Since **June, 1982**, have you ever attended university, college, or vocational / technical / trade school where you took courses **for credit**?

[Circle number of correct answer]

- 1 NO [Skip to item 20 on page 26]
- 2 YES [Please complete item 12]

12. Describe the FIRST period of attendance...

A. Institution Name: [Write in, please do not abbreviate]

B. Institution Address: [Write in, please do not abbreviate]

(CITY) **(STATE)**

C. Date started: [Write in MONTH / YEAR] ____ / ____

D. Date stopped: [Write in MONTH / YEAR] ____ / ____

{Normal summer and holiday breaks do NOT count as stops. SKIPPING A TERM STOPS A PERIOD.}

E. Enrollment status: [Circle number of best response]

1 FULL-TIME FOR THE ENTIRE PERIOD

2 MOSTLY FULL-TIME, BUT SOME PART-TIME

3 SOME FULL-TIME AND SOME PART-TIME

4 LESS THAN FULL-TIME, BUT SEVERAL COURSES PER TERM,
OR MOST OF PERIOD

5 ONE OR TWO COURSES PER TERM

6 OTHER [Write in] _____

F. Major field of study: [Write in]

12 Continued... Continue to describe the FIRST period of attendance...

H. Degree or other award attempted: [Circle number of correct response]

- 1 NONE
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD
- 3 ASSOCIATE'S DEGREE
- 4 BACHELOR'S DEGREE
- 5 MASTER'S DEGREE OR EQUIVALENT
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT)
- 7 DOCTORATE DEGREE (PH.D., ED.D.)

I. Degree(s) attained: [Circle numbers and provide MONTH / YEAR dates for ALL degrees attained during the period]

- 1 NONE ATTAINED
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD ____ / ____
- 3 ASSOCIATE'S DEGREE ____ / ____
- 4 BACHELOR'S DEGREE ____ / ____
- 5 MASTER'S DEGREE OR EQUIVALENT ____ / ____
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT) ____ / ____
- 7 DOCTORATE DEGREE (PH.D., ED.D.) ____ / ____

J. Did you hold an on-campus job while enrolled at this university, college, or school? [Circle number of correct response]

- 1 NO
- 2 YES

12 Continued... Continue to describe the FIRST period of attendance...

K. Did you participate in varsity intercollegiate athletics while enrolled at this university, college, or school? [Circle number of correct response]

- 1 NO [Skip to item 13]
- 2 YES, FOOTBALL
- 3 YES, BASKETBALL
- 4 YES, OTHER SPORT(S) [Write in] _____

L. Did you receive an athletic scholarship? [Circle number of correct response]

- 1 NO
- 2 YES

M. Did you attend other universities, colleges, or schools or have other periods of attendance? [Circle number of correct response]

- 1 NO [Skip to item 20 on page 26]
- 2 YES [Please complete item 13]

13. Describe the SECOND period of attendance...

A. Institution Name: [Write in, please do not abbreviate]

B. Institution Address: [Write in, please do not abbreviate]

(CITY) **(STATE)**

C. Date started: [Write in MONTH / YEAR] ____ / ____

D. Date stopped: [Write in MONTH / YEAR] ____ / ____

{Normal summer and holiday breaks do NOT count as stops. SKIPPING A TERM STOPS A PERIOD.}

E. Enrollment status: [Circle number of best response]

1 FULL-TIME FOR THE ENTIRE PERIOD

2 MOSTLY FULL-TIME, BUT SOME PART-TIME

3 SOME FULL-TIME AND SOME PART-TIME

4 LESS THAN FULL-TIME, BUT SEVERAL COURSES PER TERM,
OR MOST OF PERIOD

5 ONE OR TWO COURSES PER TERM

6 OTHER [Write in] _____

F. Major field of study: [Write in]

13 Continued... Continue to describe the SECOND period of attendance...

H. Degree or other award attempted: [Circle number of correct response]

- 1 NONE
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD
- 3 ASSOCIATE'S DEGREE
- 4 BACHELOR'S DEGREE
- 5 MASTER'S DEGREE OR EQUIVALENT
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT)
- 7 DOCTORATE DEGREE (PH.D., ED.D.)

I. Degree(s) attained: [Circle numbers and provide MONTH / YEAR dates for ALL degrees attained during the period]

- 1 NONE ATTAINED
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD ____ / ____
- 3 ASSOCIATE'S DEGREE ____ / ____
- 4 BACHELOR'S DEGREE ____ / ____
- 5 MASTER'S DEGREE OR EQUIVALENT ____ / ____
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT) ____ / ____
- 7 DOCTORATE DEGREE (PH.D., ED.D.) ____ / ____

J. Did you hold an on-campus job while enrolled at this university, college, or school? [Circle number of correct response]

- 1 NO
- 2 YES

13 Continued... Continue to describe the SECOND period of attendance...

K. Did you participate in varsity intercollegiate athletics while enrolled at this university, college, or school? [Circle number of correct response]

- 1 NO [Skip to item 14]
- 2 YES, FOOTBALL
- 3 YES, BASKETBALL
- 4 YES, OTHER SPORT(S) [Write in] _____

L. Did you receive an athletic scholarship? [Circle number of correct response]

- 1 NO
- 2 YES

M. Did you attend other universities, colleges, or schools or have other periods of attendance? [Circle number of correct response]

- 1 NO [Skip to item 20 on page 26]
- 2 YES [Please complete item 14]

14. Describe the THIRD period of attendance...

A. Institution Name: [Write in, please do not abbreviate]

B. Institution Address: [Write in, please do not abbreviate]

(CITY) **(STATE)**

C. Date started: [Write in MONTH / YEAR] ____ / ____

D. Date stopped: [Write in MONTH / YEAR] ____ / ____

{Normal summer and holiday breaks do NOT count as stops. SKIPPING A TERM STOPS A PERIOD.}

E. Enrollment status: [Circle number of best response]

1 FULL-TIME FOR THE ENTIRE PERIOD

2 MOSTLY FULL-TIME, BUT SOME PART-TIME

3 SOME FULL-TIME AND SOME PART-TIME

4 LESS THAN FULL-TIME, BUT SEVERAL COURSES PER TERM,
OR MOST OF PERIOD

5 ONE OR TWO COURSES PER TERM

6 OTHER [Write in] _____

F. Major field of study: [Write in]

14 Continued... Continue to describe the THIRD period of attendance...

H. Degree or other award attempted: [Circle number of correct response]

- 1 NONE
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD
- 3 ASSOCIATE'S DEGREE
- 4 BACHELOR'S DEGREE
- 5 MASTER'S DEGREE OR EQUIVALENT
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT)
- 7 DOCTORATE DEGREE (PH.D., ED.D.)

I. Degree(s) attained: [Circle numbers and provide MONTH / YEAR dates for ALL degrees attained during the period]

- 1 NONE ATTAINED
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD ____ / ____
- 3 ASSOCIATE'S DEGREE ____ / ____
- 4 BACHELOR'S DEGREE ____ / ____
- 5 MASTER'S DEGREE OR EQUIVALENT ____ / ____
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT) ____ / ____
- 7 DOCTORATE DEGREE (PH.D., ED.D.) ____ / ____

J. Did you hold an on-campus job while enrolled at this university, college, or school? [Circle number of correct response]

- 1 NO
- 2 YES

K. Did you attend other universities, colleges, or schools or have other periods of attendance? [Circle number of correct response]

- 1 NO [Skip to item 20 on page 26]
- 2 YES [Please complete item 15]

15. Describe the FOURTH period of attendance...

A. Institution Name: [Write in, please do not abbreviate]

B. Institution Address: [Write in, please do not abbreviate]

(CITY) **(STATE)**

C. Date started: [Write in MONTH / YEAR] ____ / ____

D. Date stopped: [Write in MONTH / YEAR] ____ / ____

{Normal summer and holiday breaks do NOT count as stops. SKIPPING A TERM STOPS A PERIOD.}

E. Enrollment status: [Circle number of best response]

1 FULL-TIME FOR THE ENTIRE PERIOD

2 MOSTLY FULL-TIME, BUT SOME PART-TIME

3 SOME FULL-TIME AND SOME PART-TIME

4 LESS THAN FULL-TIME, BUT SEVERAL COURSES PER TERM,
OR MOST OF PERIOD

5 ONE OR TWO COURSES PER TERM

6 OTHER [Write in] _____

F. Major field of study: [Write in]

15 Continued... Continue to describe the FOURTH period of attendance...

H. Degree or other award attempted: [Circle number of correct response]

- 1 NONE
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD
- 3 ASSOCIATE'S DEGREE
- 4 BACHELOR'S DEGREE
- 5 MASTER'S DEGREE OR EQUIVALENT
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT)
- 7 DOCTORATE DEGREE (PH.D., ED.D.)

I. Degree(s) attained: [Circle numbers and provide MONTH / YEAR dates for ALL degrees attained during the period]

- 1 NONE ATTAINED
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD ____ / ____
- 3 ASSOCIATE'S DEGREE ____ / ____
- 4 BACHELOR'S DEGREE ____ / ____
- 5 MASTER'S DEGREE OR EQUIVALENT ____ / ____
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT) ____ / ____
- 7 DOCTORATE DEGREE (PH.D., ED.D.) ____ / ____

J. Did you hold an on-campus job while enrolled at this university, college, or school? [Circle number of correct response]

- 1 NO
- 2 YES

K. Did you attend other universities, colleges, or schools or have other periods of attendance? [Circle number of correct response]

- 1 NO [Skip to item 20 on page 26]
- 2 YES [Please complete item 16]

16. Describe the FIFTH period of attendance...

A. Institution Name: [Write in, please do not abbreviate]

B. Institution Address: [Write in, please do not abbreviate]

(CITY) **(STATE)**

C. Date started: [Write in MONTH / YEAR] ____ / ____

D. Date stopped: [Write in MONTH / YEAR] ____ / ____

{Normal summer and holiday breaks do NOT count as stops. SKIPPING A TERM STOPS A PERIOD.}

E. Enrollment status: [Circle number of best response]

1 FULL-TIME FOR THE ENTIRE PERIOD

2 MOSTLY FULL-TIME, BUT SOME PART-TIME

3 SOME FULL-TIME AND SOME PART-TIME

4 LESS THAN FULL-TIME, BUT SEVERAL COURSES PER TERM,
OR MOST OF PERIOD

5 ONE OR TWO COURSES PER TERM

6 OTHER [Write in] _____

F. Major field of study: [Write in]

16 Continued... Continue to describe the FIFTH period of attendance...

H. Degree or other award attempted: [Circle number of correct response]

- 1 NONE
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD
- 3 ASSOCIATE'S DEGREE
- 4 BACHELOR'S DEGREE
- 5 MASTER'S DEGREE OR EQUIVALENT
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT)
- 7 DOCTORATE DEGREE (PH.D., ED.D.)

I. Degree(s) attained: [Circle numbers and provide MONTH / YEAR dates for ALL degrees attained during the period]

- 1 NONE ATTAINED
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD ____ / ____
- 3 ASSOCIATE'S DEGREE ____ / ____
- 4 BACHELOR'S DEGREE ____ / ____
- 5 MASTER'S DEGREE OR EQUIVALENT ____ / ____
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT) ____ / ____
- 7 DOCTORATE DEGREE (PH.D., ED.D.) ____ / ____

J. Did you hold an on-campus job while enrolled at this university, college, or school? [Circle number of correct response]

- 1 NO
- 2 YES

K. Did you attend other universities, colleges, or schools or have other periods of attendance? [Circle number of correct response]

- 1 NO [Skip to item 20 on page 26]
- 2 YES [Please complete item 17]

17. Describe the SIXTH period of attendance...

A. Institution Name: [Write in, please do not abbreviate]

B. Institution Address: [Write in, please do not abbreviate]

(CITY) **(STATE)**

C. Date started: [Write in MONTH / YEAR] ____ / ____

D. Date stopped: [Write in MONTH / YEAR] ____ / ____

{Normal summer and holiday breaks do NOT count as stops. SKIPPING A TERM STOPS A PERIOD.}

E. Enrollment status: [Circle number of best response]

1 FULL-TIME FOR THE ENTIRE PERIOD

2 MOSTLY FULL-TIME, BUT SOME PART-TIME

3 SOME FULL-TIME AND SOME PART-TIME

4 LESS THAN FULL-TIME, BUT SEVERAL COURSES PER TERM,
OR MOST OF PERIOD

5 ONE OR TWO COURSES PER TERM

6 OTHER [Write in] _____

F. Major field of study: [Write in]

17 Continued... Continue to describe the SIXTH period of attendance...

H. Degree or other award attempted: [Circle number of correct response]

- 1 NONE
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD
- 3 ASSOCIATE'S DEGREE
- 4 BACHELOR'S DEGREE
- 5 MASTER'S DEGREE OR EQUIVALENT
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT)
- 7 DOCTORATE DEGREE (PH.D., ED.D.)

I. Degree(s) attained: [Circle numbers and provide MONTH / YEAR dates for ALL degrees attained during the period]

- 1 NONE ATTAINED
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD ____ / ____
- 3 ASSOCIATE'S DEGREE ____ / ____
- 4 BACHELOR'S DEGREE ____ / ____
- 5 MASTER'S DEGREE OR EQUIVALENT ____ / ____
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT) ____ / ____
- 7 DOCTORATE DEGREE (PH.D., ED.D.) ____ / ____

J. Did you hold an on-campus job while enrolled at this university, college, or school? [Circle number of correct response]

- 1 NO
- 2 YES

K. Did you attend other universities, colleges, or schools or have other periods of attendance? [Circle number of correct response]

- 1 NO [Skip to item 20 on page 26]
- 2 YES [Please complete item 18]

18. Describe the SEVENTH period of attendance...

A. Institution Name: [Write in, please do not abbreviate]

B. Institution Address: [Write in, please do not abbreviate]

(CITY) **(STATE)**

C. Date started: [Write in MONTH / YEAR] ____ / ____

D. Date stopped: [Write in MONTH / YEAR] ____ / ____

{Normal summer and holiday breaks do NOT count as stops. SKIPPING A TERM STOPS A PERIOD.}

E. Enrollment status: [Circle number of best response]

1 FULL-TIME FOR THE ENTIRE PERIOD

2 MOSTLY FULL-TIME, BUT SOME PART-TIME

3 SOME FULL-TIME AND SOME PART-TIME

4 LESS THAN FULL-TIME, BUT SEVERAL COURSES PER TERM,
OR MOST OF PERIOD

5 ONE OR TWO COURSES PER TERM

6 OTHER [Write in] _____

F. Major field of study: [Write in]

18 Continued... Continue to describe the SEVENTH period of attendance...

H. Degree or other award attempted: [Circle number of correct response]

- 1 NONE
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD
- 3 ASSOCIATE'S DEGREE
- 4 BACHELOR'S DEGREE
- 5 MASTER'S DEGREE OR EQUIVALENT
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR
EQUIVALENT)
- 7 DOCTORATE DEGREE (PH.D., ED.D.)

I. Degree(s) attained: [Circle numbers and provide MONTH / YEAR dates for ALL degrees attained during the period]

- 1 NONE ATTAINED
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD ____ / ____
- 3 ASSOCIATE'S DEGREE ____ / ____
- 4 BACHELOR'S DEGREE ____ / ____
- 5 MASTER'S DEGREE OR EQUIVALENT ____ / ____
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR
EQUIVALENT) ____ / ____
- 7 DOCTORATE DEGREE (PH.D., ED.D.) ____ / ____

J. Did you hold an on-campus job while enrolled at this university, college, or school? [Circle number of correct response]

- 1 NO
- 2 YES

K. Did you attend other universities, colleges, or schools or have other periods of attendance? [Circle number of correct response]

- 1 NO [Skip to item 20]
- 2 YES [Please complete item 19]

19. Describe your LAST period of attendance... [If already described, indicate item number of last period]

A. Institution Name: [Write in, please do not abbreviate]

B. Institution Address: [Write in, please do not abbreviate]

(CITY) **(STATE)**

C. Date started: [Write in MONTH / YEAR] ____ / ____

D. Date stopped: [Write in MONTH / YEAR] ____ / ____

{Normal summer and holiday breaks do NOT count as stops. SKIPPING A TERM STOPS A PERIOD.}

E. Enrollment status: [Circle number of best response]

1 FULL-TIME FOR THE ENTIRE PERIOD

2 MOSTLY FULL-TIME, BUT SOME PART-TIME

3 SOME FULL-TIME AND SOME PART-TIME

4 LESS THAN FULL-TIME, BUT SEVERAL COURSES PER TERM,
OR MOST OF PERIOD

5 ONE OR TWO COURSES PER TERM

6 OTHER [Write in] _____

F. Major field of study: [Write in]

19 Continued... Continue to describe your LAST period of attendance...

H. Degree or other award attempted: [Circle number of correct response]

- 1 NONE
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD
- 3 ASSOCIATE'S DEGREE
- 4 BACHELOR'S DEGREE
- 5 MASTER'S DEGREE OR EQUIVALENT
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT)
- 7 DOCTORATE DEGREE (PH.D., ED.D.)

I. Degree(s) attained: [Circle numbers and provide MONTH / YEAR dates for ALL degrees attained during the period]

- 1 NONE ATTAINED
- 2 CERTIFICATE/LICENSE/TECHNICAL AWARD ____ / ____
- 3 ASSOCIATE'S DEGREE ____ / ____
- 4 BACHELOR'S DEGREE ____ / ____
- 5 MASTER'S DEGREE OR EQUIVALENT ____ / ____
- 6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT) ____ / ____
- 7 DOCTORATE DEGREE (PH.D., ED.D.) ____ / ____

J. Did you hold an on-campus job while enrolled at this university, college, or school? [Circle number of correct response]

- 1 NO
- 2 YES

20. What is the highest level of education you expect to complete? [Circle number of correct response]

- 1 SOME HIGH SCHOOL [Skip to item 32 on page 28]
- 2 HIGH SCHOOL DIPLOMA, GED, OR EQUIVALENT CERTIFICATE [Skip to item 32 on page 28]
- 3 SOME POST HIGH SCHOOL VOCATIONAL/TECHNICAL, BUT NO DEGREE [Skip to item 28]
- 4 SOME COLLEGE, BUT NO DEGREE [Skip to item 28]
- 5 CERTIFICATE/LICENSE/TECHNICAL AWARD [Skip to item 28]
- 6 ASSOCIATE'S DEGREE [Skip to item 28]
- 7 BACHELOR'S DEGREE [Complete to item 21]
- 8 MASTER'S DEGREE OR EQUIVALENT [Complete to item 21]
- 9 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT) [Complete to item 21]
- 10 DOCTORATE DEGREE (PH.D., ED.D.) [Complete to item 21]

21. Have you taken any Graduate or Professional School Admission exams?
[Circle number(s) of all that apply]

- 1 NO [Skip to item 28]
- 2 Dental Admission Test (DAT)
- 3 Graduate Management Admission Test (GMAT or ATGSB)
- 4 Graduate Record Examination (GRE)
- 5 Law School Admission Test (LSAT)
- 6 Medical College Admission Test (MCAT)
- 7 OTHER [Write in] _____

22. Have you applied to a college or university for graduate or professional schooling?
[Circle number of correct response]

- 1 NO [Skip to item 28]
- 2 YES

23. How many institutions did you apply to? [Write in number] _____

24. What is the name and location of your FIRST CHOICE graduate/professional college or university that you applied to?

A. Institution Name: [Write in, please do not abbreviate]

B. Institution Address: [Write in, please do not abbreviate]

(CITY) **(STATE)**

25. Were you accepted at your FIRST CHOICE [from item 24]?
[Circle number of correct response]

1 NO [Skip to item 28]

2 YES

3 DON'T KNOW YET

26. Did you apply for financial aid at your FIRST CHOICE?
[Circle number of correct response]

1 NO [Skip to item 28]

2 YES

27. Were you offered financial aid at your FIRST CHOICE?
[Circle number of correct response]

1 NO

2 YES

3 DON'T KNOW YET

28. Have you received any loans for education since leaving high school?
[Circle number of correct response]

1 NO [Skip to item 32]

2 YES

29. What was the total amount you borrowed for your education?

[Write in dollar amount] \$ _____

30. How much do you still owe for your education loan(s)?

[Write in dollar amount] \$ _____

31. Have any of your education loan payments been deferred or forgiven?

[Circle number of correct response]

1 NO

2 YES

32. What is the highest degree that you have attained?

[Circle number of correct response]

1 NONE [Skip to item 34]

2 CERTIFICATE/LICENSE/TECHNICAL AWARD

3 ASSOCIATE'S DEGREE

4 BACHELOR'S DEGREE

5 MASTER'S DEGREE OR EQUIVALENT

6 PROFESSIONAL DEGREE (M.D., L.L.B., J.D., D.D.S., OR EQUIVALENT)

7 DOCTORATE DEGREE (PH.D., ED.D.)

33. Where and when did you get this degree (or award)?

A. Institution Name: [Write in, please do not abbreviate]

B. Institution Address: [Write in, please do not abbreviate]

(CITY)

(STATE)

C. Date started: [Write in MONTH / YEAR] ____ / ____

34. Have you been involved in any of the following adult education programs on a not for credit basis between 1982 and now?

A. Continuing education courses or noncredit courses?

[Circle number of correct response]

1 NO

2 YES

B. Courses by mail, television, radio, or newspaper?

[Circle number of correct response]

1 NO

2 YES

35. Since high school have you had any of the following types of employment- or career-related training: [Circle correct response]

A. Executive or management development training? NO YES

B. Supervisory training? NO YES

C. Professional development training? NO YES

D. Technical or skilled worker training? NO YES

E. Word processing or computer software training? NO YES

F. Job health and safety training? NO YES

G. Training in areas such as quality control or statistical process control? NO YES

H. Sales and marketing training? NO YES

36. Have you taken any licensing or certification exams?

[Circle number of all that apply and give MONTH / YEAR if passed]

- | | | |
|-----------|---|-----------|
| 1 | NONE | |
| 2 | ACCOUNTING (CPA) | ___ / ___ |
| 3 | AIRCRAFT PILOT (commercial only) | ___ / ___ |
| 4 | AIR TRAFFIC CONTROL | ___ / ___ |
| 5 | ARCHITECTURE (AIA) | ___ / ___ |
| 6 | BROADCASTING (FCC license) | ___ / ___ |
| 7 | CLINICAL PSYCHOLOGIST | ___ / ___ |
| 8 | DIETICIAN | ___ / ___ |
| 9 | ELECTRICIAN | ___ / ___ |
| 10 | ENGINEERING | ___ / ___ |
| 11 | LAW (state bar) | ___ / ___ |
| 12 | MEDICAL/DENTAL (boards, specialty boards) | ___ / ___ |
| 13 | MORTICIAN | ___ / ___ |
| 14 | NURSING (RN) | ___ / ___ |
| 15 | NURSING (LPN) | ___ / ___ |
| 16 | PHARMACIST | ___ / ___ |
| 17 | PHYSICAL THERAPIST | ___ / ___ |
| 18 | REAL ESTATE | ___ / ___ |
| 19 | SCHOOL PSYCHOLOGIST | ___ / ___ |
| 20 | SCHOOL TEACHER (NTE) | ___ / ___ |
| 21 | VETERINARY | ___ / ___ |
| 22 | OTHER [Write in] _____ | ___ / ___ |

37. For each month of each year below, were you working (holding one or more jobs for pay or on temporary furlough/layoff), unemployed (able to work, looking for work, and without a job), or out of the labor force (unable to work or not looking for work)?

[Write in

- W if you were working any part of the month,
- C if unemployed and receiving unemployment compensation,
- U if unemployed and NOT receiving unemployment compensation,
- O if out of the labor force]

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
1982	x	x	x	x	x							
1983												
1984												
1985												
1986												
1987												
1988												
1989												
1990												
1991												
1992							x	x	x	x	x	x

38. In calendar year **1982**,

- A. How many jobs did you hold? [Write in number] _____
 [If ZERO, skip to item 39]
- B. What were your total annual earnings? [Write in number] \$ _____
- C. For the job you held the **longest**, ...
 - 1. Describe the type of business or industry (for example, grocery store, restaurant, retail shoe store, automobile factory, state government agency) [Write in]

 - 2. Describe your job (for example, cook, truck driver, cashier, salesman, nurse, school teacher, lawyer, doctor) [Write in]

39. In calendar year **1983**,

- A. How many jobs did you hold? [Write in number] _____
[If ZERO, skip to item 40]
- B. What were your total annual earnings? [Write in number] \$ _____
- C. For the job you held the **longest**, ...
1. Describe the type of business or industry (for example, grocery store, restaurant, retail shoe store, automobile factory, state government agency) [Write in]

 2. Describe your job (for example, cook, truck driver, cashier, salesman, nurse, school teacher, lawyer, doctor) [Write in]

40. In calendar year **1984**,

- A. How many jobs did you hold? [Write in number] _____
[If ZERO, skip to item 41]
- B. What were your total annual earnings? [Write in number] \$ _____
- C. For the job you held the **longest**, ...
1. Describe the type of business or industry (for example, grocery store, restaurant, retail shoe store, automobile factory, state government agency) [Write in]

 2. Describe your job (for example, cook, truck driver, cashier, salesman, nurse, school teacher, lawyer, doctor) [Write in]

41. In calendar year **1985**,

- A. How many jobs did you hold? [Write in number] _____
[If ZERO, skip to item 42]
- B. What were your total annual earnings? [Write in number] \$ _____
- C. For the job you held the **longest**, ...
1. Describe the type of business or industry (for example, grocery store, restaurant, retail shoe store, automobile factory, state government agency) [Write in]

 2. Describe your job (for example, cook, truck driver, cashier, salesman, nurse, school teacher, lawyer, doctor) [Write in]

42. In calendar year **1986**,

- A. How many jobs did you hold? [Write in number] _____
[If ZERO, skip to item 43]
- B. What were your total annual earnings? [Write in number] \$ _____
- C. For the job you held the **longest**, ...
1. Describe the type of business or industry (for example, grocery store, restaurant, retail shoe store, automobile factory, state government agency) [Write in]

 2. Describe your job (for example, cook, truck driver, cashier, salesman, nurse, school teacher, lawyer, doctor) [Write in]

43. In calendar year **1987**,

- A. How many jobs did you hold? [Write in number] _____
[If ZERO, skip to item 44]
- B. What were your total annual earnings? [Write in number] \$ _____
- C. For the job you held the **longest**, ...
1. Describe the type of business or industry (for example, grocery store, restaurant, retail shoe store, automobile factory, state government agency) [Write in]

 2. Describe your job (for example, cook, truck driver, cashier, salesman, nurse, school teacher, lawyer, doctor) [Write in]

44. In calendar year **1988**,

- A. How many jobs did you hold? [Write in number] _____
[If ZERO, skip to item 45]
- B. What were your total annual earnings? [Write in number] \$ _____
- C. For the job you held the **longest**, ...
1. Describe the type of business or industry (for example, grocery store, restaurant, retail shoe store, automobile factory, state government agency) [Write in]

 2. Describe your job (for example, cook, truck driver, cashier, salesman, nurse, school teacher, lawyer, doctor) [Write in]

45. In calendar year **1989**,

- A. How many jobs did you hold? [Write in number] _____
[If ZERO, skip to item 46]
- B. What were your total annual earnings? [Write in number] \$ _____
- C. For the job you held the **longest**, ...
1. Describe the type of business or industry (for example, grocery store, restaurant, retail shoe store, automobile factory, state government agency) [Write in]

 2. Describe your job (for example, cook, truck driver, cashier, salesman, nurse, school teacher, lawyer, doctor) [Write in]

46. In calendar year **1990**,

- A. How many jobs did you hold? [Write in number] _____
[If ZERO, skip to item 47]
- B. What were your total annual earnings? [Write in number] \$ _____
- C. For the job you held the **longest**, ...
1. Describe the type of business or industry (for example, grocery store, restaurant, retail shoe store, automobile factory, state government agency) [Write in]

 2. Describe your job (for example, cook, truck driver, cashier, salesman, nurse, school teacher, lawyer, doctor) [Write in]

47. In calendar year **1991**,

- A. How many jobs did you hold? [Write in number] _____
[If ZERO, skip to item 48]
- B. What were your total annual earnings? [Write in number] \$ _____

C. For the job you held the **longest**, ...

1. Describe the type of business or industry (for example, grocery store, restaurant, retail shoe store, automobile factory, state government agency) [Write in]

2. Describe your job (for example, cook, truck driver, cashier, salesman, nurse, school teacher, lawyer, doctor) [Write in]

48. In your **current job** (the one you have held longest if more than one)

- A. What were your total monthly earnings? [Write in number] \$ _____
[Write in ZERO if no job and skip to item 49]

- B. Describe the type of business or industry (for example, grocery store, restaurant, retail shoe store, automobile factory, state government agency) [Write in]

- C. Describe your job (for example, cook, truck driver, cashier, salesman, nurse, school teacher, lawyer, doctor) [Write in]

49. Think about the jobs you've held since high school...

A. How different were they from the jobs you were trained or educated to do?

[Circle number of best answer]

1 NONE

2 SOME

3 A LOT

B. Did you use the tools or equipment you were trained to use?

[Circle number of best answer]

1 A GREAT DEAL

2 SOME

3 NOT AT ALL

C. Do you think you could have gotten a job without the education and training you have had since high school?

[Circle number of best answer]

1 NO

2 YES

D. Would you say that your job skills were learned in school, learned in a training program outside of school, or learned in both places?

[Circle number of best answer]

1 LEARNED IN SCHOOL

2 LEARNED IN A TRAINING PROGRAM OUTSIDE OF SCHOOL

3 LEARNED IN BOTH PLACES

50. During the last 12 months, have you received employer-provided training?

[Circle number of best answer]

1 NO [Skip to item 54 on page 39]

2 YES

51. What type of training/education have you received within the last 12 months?

[Circle number of all that apply]

- 1 Employer-provided training during working hours on employer premises
- 2 Informal on-the-job training
- 3 Employer-provided training during working hours away from employer premises
- 4 Tuition aid and/or financial assistance for attending educational institutions after working hours
- 5 Other [Write in] _____

52. What was the total number of weeks this training lasted? *{Please include all training received during the last 12 months.}*

[Circle number of best response]

- 1 1 WEEK OR LESS
- 2 1 TO 2 WEEKS
- 3 2 TO 4 WEEKS
- 4 4 WEEKS TO 3 MONTHS
- 5 3 TO 6 MONTHS
- 6 MORE THAN 6 MONTHS

53. How many hours per week did this training last? *{If you received more than one type of training during the last 12 months, please describe the one that lasted the longest.}*

[Write in number of hours] _____

54. How long have you worked (or did you work) at your current (or most recent) job?

[Write in number of years and months]

YEARS: _____ **MONTHS:** _____

55. Have you received formal training or education for your current or most recent job?

[Circle number of best answer]

1 NO

2 YES

56. Please describe your satisfaction with your current or most recent job below.

[Circle YES to indicate you are satisfied, NO to indicate dissatisfaction]

A. The job's pay and fringe benefits? YES NO

B. Its importance and challenge? YES NO

C. Its working conditions? YES NO

D. The opportunity for promotion and advancement? YES NO

E. Its security and permanence? YES NO

F. Your supervisor(s)? YES NO

G. Your relationship with co-workers? YES NO

H. The opportunity for further education? YES NO

57. Do you have any children? *{Please include adopted, foster, and step children, as well as children born to you. Also include any children who are living outside your household.}*

[Circle number of best answer]

1 NO [Skip to item 60 on page 42]

2 YES

58. How many children do you have?

[Write in number of children]

59. Please describe all your children. [Complete all rows for each child]

		Child [Use one column for each child]											
		1	2	3	4	5	6	7	8	9	10	11	12
A.	How old is this child? [Write in age in years]	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
B.	What is this child's sex? [Circle M for Male or F for Female]	1 M F	2 M F	3 M F	4 M F	5 M F	6 M F	7 M F	8 M F	9 M F	10 M F	11 M F	12 M F
C.	What is this child's relationship to you? [Circle correct response]	1	2	3	4	5	6	7	8	9	10	11	12
	Born to you	B	B	B	B	B	B	B	B	B	B	B	B
	Adopted	A	A	A	A	A	A	A	A	A	A	A	A
	Step-child	S	S	S	S	S	S	S	S	S	S	S	S
	Foster-care child	F	F	F	F	F	F	F	F	F	F	F	F
D.	Does child live with you? [Circle correct response]	1	2	3	4	5	6	7	8	9	10	11	12
	NO	No	No	No	No	No	No	No	No	No	No	No	No
	YES	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
E.	Is (or was) this child enrolled in preschool? [Circle correct response]	1	2	3	4	5	6	7	8	9	10	11	12
	NO	No	No	No	No	No	No	No	No	No	No	No	No
	YES	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
F.	What kind of school does this child attend? [Circle correct response]	1	2	3	4	5	6	7	8	9	10	11	12
	Public school	U	U	U	U	U	U	U	U	U	U	U	U
	Private school	R	R	R	R	R	R	R	R	R	R	R	R
	Not enrolled	N	N	N	N	N	N	N	N	N	N	N	N
G.	What grade is this child currently in? [Write in]	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
		1	2	3	4	5	6	7	8	9	10	11	12

60. Do you contribute to anyone's support? For example, do you support grandparents, aunts, or other relatives? [Circle number of best answer]

1 NO [Skip to item 62]

2 YES

61. How much would you estimate you spend annually for (this/these) persons' support?

[Write in dollar amount]

\$_____

62. Please indicate if the following statements are IMPORTANT to you.

[Circle Yes if important, No if not important]

Being successful in your line of work? Yes No

Having lots of money? Yes No

Having strong friendships? Yes No

Being able to find steady work? Yes No

Being able to give your children better opportunities than
you've had? Yes No

63. Please describe the volunteer work for any groups or organizations that you have done during the past 12 months. [Circle numbers for all that apply]

- 1 NONE
- 2 YOUTH ORGANIZATIONS – SUCH AS A LITTLE LEAGUE COACH, SCOUT LEADER, ETC.
- 3 UNION, FARM, TRADE, OR PROFESSIONAL ASSOCIATION
- 4 POLITICAL CLUBS OR ORGANIZATIONS
- 5 CHURCH OR CHURCH-RELATED ACTIVITIES (NOT INCLUDING WORSHIP SERVICES)
- 6 ORGANIZED VOLUNTEER WORK – SUCH AS IN A HOSPITAL
- 7 SPORTS TEAMS OR SPORTS CLUBS
- 8 EDUCATIONAL ORGANIZATIONS – SUCH AS PTA OR ACADEMIC GROUP
- 9 SERVICE ORGANIZATIONS – SUCH AS ROTARY, JUNIOR CHAMBER OR COMMERCE, VETERANS, KIWANIS, ELKS, LIONS, ETC.
- 10 ANOTHER VOLUNTARY GROUP [Write in] _____

64. Did you vote in the 1988 Presidential election?
[Circle number of best answer]

- 1 NO
- 2 YES

65. During the last 12 months, have you voted in any local, state, or national elections?
[Circle number of best answer]

- 1 NO
- 2 YES

66. Are you currently registered to vote?
[Circle number of best answer]

- 1 NO
- 2 YES

67. Please indicate all sources of YOUR income in calendar year 1991.

[Circle number(s) of ALL sources that apply]

- 1 Wages, salaries commissions or tips
- 2 Net income from a business or farm
- 3 Dividends, interest, rental income, or investment income
- 4 Social Security benefits
- 5 Veteran's benefits
- 6 Unemployment compensation
- 7 Public assistance, welfare, AFDC, etc.
- 8 Income in the form of gifts from relatives or friends
- 9 Scholarships, fellowships, grants, loans, etc.
- 10 Any nontaxable income not included above
- 11 No income

68. Please indicate all sources of YOUR SPOUSE'S income in calendar year 1991.

[Circle number(s) of ALL sources that apply]

- 1 Wages, salaries commissions or tips
- 2 Net income from a business or farm
- 3 Dividends, interest, rental income, or investment income
- 4 Social Security benefits
- 5 Veteran's benefits
- 6 Unemployment compensation
- 7 Public assistance, welfare, AFDC, etc.
- 8 Income in the form of gifts from relatives or friends
- 9 Scholarships, fellowships, grants, loans, etc.
- 10 Any nontaxable income not included above
- 11 No income
- 12 No spouse

69. What was your total household income, before taxes, in 1991?

[Write in dollar amount]

\$ _____

70. What are your monthly payments for the following?

[Write in dollar amounts. Write in ZERO if none.]

Home mortgage [Do not report rent, but include equity loans] \$ _____

Auto loans [Combine if multiple autos] \$ _____

Other debt [Do not include education loans, but include credit cards and bank loans] \$ _____

71. What is your race/ethnicity? [Circle number that best describes you]

1 HISPANIC

2 AMERICAN INDIAN OR ALEUTIAN ISLANDER

3 ASIAN OR PACIFIC ISLANDER

4 BLACK/AFRICAN AMERICAN

5 WHITE

6 OTHER [Write in] _____

72. What percentage of the people in the neighborhood where you grew up were the same race/ethnicity as you are?

[Write in number, Zero through 100] _____%

73. What percentage of the people in your present neighborhood are the same race/ethnicity as you are?

[Write in number, Zero through 100] _____%

74. What percentage of people in your (present/most recent) workplace are the same race/ethnicity as you are?

[Write in number, Zero through 100] _____%

75. What is your driver's license identification number, and in what state was it issued?
[Write in number and state, if none write in NONE]

LICENSE #: _____

STATE: _____

76. In case we need to reach you again, please write in your address, for the coming year.

ADDRESS: _____

CITY: _____

STATE: _____

ZIP: _____

77. What is your spouse's/partner's full name? [Write in, if none write NONE]

THANK YOU FOR COMPLETING THE QUESTIONNAIRE.

PLEASE PLACE THIS QUESTIONNAIRE IN THE ENCLOSED ENVELOPE AND MAIL IT AS SOON AS POSSIBLE.