

Hi my name is _____. I'm calling on behalf of the North Dakota Department of Public Instruction. The North Dakota Department of Public Instruction gathers and reports information about what students are doing one year after leaving high school in order to improve services for students. I'll ask you questions about education/training and work.

Add student geographic code to demographics section: (Rural or Urban) OR Will having the students ID number allow us to pull from Tienet? (This won't be a question the interviewers ask but should be collected off Tienet and recorded as part of the preliminary work for the survey.)

Indicate which person is responding to the questions:

- (1) Student
- (2) Parent
- (3) Guardian
- (4) Sibling
- (5) Grandparent
- (6) Other family member
- (7) Family friend
- (8) Other _____

EDUCATION SECTION:

A1. At any time since leaving high school, have you ever attended any school, education program, or job training program? (for example, this includes enrolling in a college, university, or vo-tech program and participating in an occupational training program, a church or humanitarian mission, or the job corps)

- (1) Yes
- (2) No

A2. Did you complete an entire term? (NOTE: this can be any complete term including quarter, semester, inter-session, summer, on-line)

- (1) Yes
- (2) No
- (3) Don't know
- (4) Refused

A3. Describe the kind of school or job training program you were enrolled in. (CHECK ONE OPTION) [NOTE: If telephone survey, ask as an open-ended question and train interviewers to check the appropriate response.]

- ___ High school completion program (e.g., Adult Basic Education, GED)
- ___ Short-term education or employment training program (e.g., WIA, Job Corps or DVR)
- ___ Vocational, technical, trade school (a certificate program or less than a 2-year program)
- ___ Training program that lasts at least a year for a particular occupation
- ___ Two-year Community or Technical College
- ___ Four-year College or University
- ___ Other (Specify):
- ___ Don't Know
- ___ Refused

EMPLOYMENT SECTION:

B1: At any time since leaving high school, have you ever worked?

- (1) Yes
- (1) No
- (2) Don't know
- (3) Refused to answer

B2. Have you/did you work at this job for at least 90 days (NOTE: Days do not need to be in a row)?

- (4) Yes
- (5) No
- (6) Don't know
- (7) Refused to answer

Ask the following questions about the current job and if not currently working, ask about the longest job held since leaving high school.

B3. Describe the job you have or have had. (CHECK ONE OPTION) [Note: If a telephone survey, ask this question as an open-ended question and train interviewers to mark appropriate response]

Record the company name: _____

- (1) in a company, business, or service in your community with people with and without disabilities
- (2) in your family's business (farm, catering, store, ranching, etc.)
- (3) as a homemaker?
- (4) in the military?
- (5) In a sheltered setting (where most workers have disabilities)?
- (6) in a supported employment setting (paid work in community with support services)?
- (7) Within jail or prison?
- (8) Unpaid volunteer or internship
- (9) Other (Specify)
- (10) Don't know
- (11) Refused to answer

B4. On this job, are you (were you) paid at least minimum hourly wage (\$7.25/hour in North Dakota)?

- (1) Yes
- (2) No
- (3) Don't know
- (4) Refused to answer

B5. How many hours do you (did you) usually work per week at this job? _____ *(Record one number – not a range)*

- (1) Don't know
- (2) Refused to answer

B6. When doing your job, did you interact or talk with co-workers without a disability to get your job done?
(NOTE: Emphasis is on interaction with other employees, not supervisors or customers)

- (1) Yes
- (2) No

- (3) Don't know
- (4) Refused to answer

B7. In this job, were you eligible for (can you get) a pay raise or promotion?

- (1) Yes
- (2) No
- (3) Don't know
- (4) Refused to answer

B8. Were you paid the same as other people who work in a similar job with the same skills, experience and training? (NOTE: Ask this or other probing questions if the interviewer is unfamiliar with the company described in Question B3; otherwise consider this to be Yes.)

- (1) Yes
- (2) No
- (3) Don't know
- (4) Refused to answer

B9. In this job, did you receive benefits (group insurance like health, dental, vision, paid sick leave or vacation; social security, unemployment insurance, workers' compensation)? (NOTE: Ask this or other probing questions if the interviewer is unfamiliar with the company described in Questions B3; otherwise consider this to be Yes.)

- (1) Yes
- (2) No
- (3) Don't know
- (4) Refused to answer

OTHER QUESTIONS

C1. Since exiting high school are you receiving any of the following services? (Choose as many as apply.)

- (1) Vocational Rehabilitation
- (2) Developmental Disabilities
- (3) Job Service
- (4) Independent Living Centers
- (5) Disability Support Services
- (6) Other (**Specify**)
- (7) None of the above

C2. Do you have health insurance?

- (1) Yes
- (2) No

C2a. If yes, please identify the source of the insurance.

- (1) Parent's insurance
- (2) Through (student)'s job
- (3) Self-purchased
- (4) Other (Specify)

C3. What is your current living arrangement? (Pick best fit from the description)

- (1) Own home or is buying it
- (2) Live independently in a rented apartment/house with or without a roommate



- (3) Live with parents
- (4) Live with relatives (not parents)
- (5) Live in a dormitory (*"Dorms" includes college/university or military.)
- (6) Live in a residential facility (such as an institution like the Developmental Center or vocational program with on-site housing like Job Corps) (*Any housing that is required as enrollment in a service.)
- (7) Other (Specify)

C4. Do you think you were prepared for life after leaving high school?

- (1) Yes
- (2) No

C4a. Please explain your answer:

DROP OUT QUESTIONS

D1. According to our records, you dropped out of high school. What was the reason you left?

D2. What would have helped you to stay in school and graduate?

End of Interview:

Thank you very much for taking the time to answer my questions.

Accessibility Report

Filename:

2021 Revised Survey2.pdf

Report created by:**Organization:**

[Enter personal and organization information through the Preferences > Identity dialog.]

Summary

The checker found no problems in this document.

- Needs manual check: 0
- Passed manually: 2
- Failed manually: 0
- Skipped: 0
- Passed: 30
- Failed: 0

Detailed Report

Document

Rule Name	Status	Description
Accessibility permission flag	Passed	Accessibility permission flag must be set
Image-only PDF	Passed	Document is not image-only PDF
Tagged PDF	Passed	Document is tagged PDF
Logical Reading Order	Passed manually	Document structure provides a logical reading order
Primary language	Passed	Text language is specified
Title	Passed	Document title is showing in title bar
Bookmarks	Passed	Bookmarks are present in large documents
Color contrast	Passed manually	Document has appropriate color contrast

Page Content

Rule Name	Status	Description
Tagged content	Passed	All page content is tagged
Tagged annotations	Passed	All annotations are tagged
Tab order	Passed	Tab order is consistent with structure order
Character encoding	Passed	Reliable character encoding is provided
Tagged multimedia	Passed	All multimedia objects are tagged
Screen flicker	Passed	Page will not cause screen flicker
Scripts	Passed	No inaccessible scripts
Timed responses	Passed	Page does not require timed responses
Navigation links	Passed	Navigation links are not repetitive

Forms

Rule Name	Status	Description
Tagged form fields	Passed	All form fields are tagged
Field descriptions	Passed	All form fields have description

Alternate Text

Rule Name	Status	Description
Figures alternate text	Passed	Figures require alternate text
Nested alternate text	Passed	Alternate text that will never be read
Associated with content	Passed	Alternate text must be associated with some content
Hides annotation	Passed	Alternate text should not hide annotation
Other elements alternate text	Passed	Other elements that require alternate text

Tables

Rule Name	Status	Description
Rows	Passed	TR must be a child of Table, THead, TBody, or TFoot
TH and TD	Passed	TH and TD must be children of TR
Headers	Passed	Tables should have headers
Regularity	Passed	Tables must contain the same number of columns in each row and rows in each column
Summary	Passed	Tables must have a summary

Lists

Rule Name	Status	Description
List items	Passed	LI must be a child of L
Lbl and LBody	Passed	Lbl and LBody must be children of LI

Headings

Rule Name	Status	Description
Appropriate nesting	Passed	Appropriate nesting

[Back to Top](#)