

**Indicator 14: Post-School Outcome Survey**  
**Appendix B Survey Questions**  
**Collected by Black Hills State University**

**Mail Survey: Part 1**

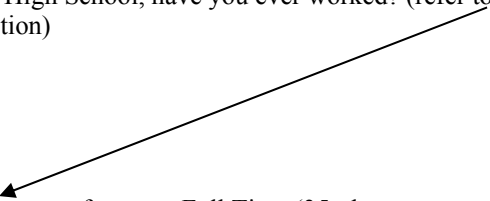
- 1) High School Graduate/exiter name \_\_\_\_\_
- 2) High School last attended \_\_\_\_\_
- 3) Person completing this survey \_\_\_\_\_ Graduate/exiter \_\_\_\_\_ Family member  
\_\_\_\_\_ Other

**Post-Secondary Questions: Part 2**

- 4) *If you dropped out of High School during last year, did you return to High School this year?*  
\_\_\_\_\_ Yes \_\_\_\_\_ No
- 5) *If you answered "No" to #4 which of the following are reasons you chose not to return to school:*  
\_\_\_\_\_ Academic difficulty  
\_\_\_\_\_ Economic e.g., needed to work  
\_\_\_\_\_ Social/Interpersonal difficulties  
\_\_\_\_\_ Health reasons  
\_\_\_\_\_ Independent living  
\_\_\_\_\_ Other
- 6) *At any time since leaving High School have you ever attended any type of School, Job Training or education program?*  
\_\_\_\_\_ Yes  
\_\_\_\_\_ No  
\_\_\_\_\_ Don't know
- 7) *Did you complete the entire term?*  
\_\_\_\_\_ Yes  
\_\_\_\_\_ No
- 8) Post-secondary school name: \_\_\_\_\_
- 9) Enrollment Status:  
\_\_\_\_\_ Full Time (12+ credit hours)  
\_\_\_\_\_ Part Time (fewer than 12 credit hours)  
\_\_\_\_\_ Don't know
- 10) Type of School  
\_\_\_\_\_ University/College (e.g., 2-4 year college)  
\_\_\_\_\_ Vocational/technical college/Community (e.g., less than a 2 year program)  
\_\_\_\_\_ Military (Branch of military) \_\_\_\_\_  
\_\_\_\_\_ Vocational training program  
\_\_\_\_\_ Certificate program (GED)  
\_\_\_\_\_ Union apprenticeship  
\_\_\_\_\_ Employment/Job training (Job Corps)  
\_\_\_\_\_ Don't know

- Other \_\_\_\_\_
- 11) What do you believe to be the reason that you have not enrolled in post-secondary education since high school? (Check up to 3 reasons)
- ☐ Lack of post-secondary opportunities in the immediate area
- ☐ Lack the necessary skills/qualifications to enter post-secondary education
- ☐ Lack of transportation
- ☐ Have not received necessary services from community agencies
- ☐ Student is working
- ☐ Have personal/family obligations that preclude going to post-secondary education
- ☐ Did not want to go to post-secondary education
- ☐ Have a health problem that precludes going to post-secondary education
- ☐ Cannot afford post-secondary education
- ☐ Other \_\_\_\_\_
- 12) Have you made any contact with an adult service agency such as, Division of Vocational Rehabilitation, Division of Developmental Disabilities, etc?
- ☐ Yes
- ☐ No
- ☐ Don't know
- (If "yes" to #12 mark agencies contacted in #13. NOTE: this does not necessarily mean that you are receiving services, only that you have contacted the agency)
- 13) Agency Type:
- ☐ Division of Vocational Rehabilitation
- ☐ Division of Developmental Disabilities
- ☐ Student Services (college)
- ☐ Mental Health
- ☐ Yes, but don't know agencies name
- ☐ Other \_\_\_\_\_

### **Employment Questions: Part 3**

- 14) At any time since leaving High School, have you ever worked? (refer to *Type of work for pay??* below to answer this question)
- ☐ Yes  
☐ No  
☐ Don't know
- Type of work for pay??* 
- ☐ Competitive Employment for pay-- Full Time (35+ hours per week)  
☐ Competitive Employment for pay--Part Time (less than 35 hours per week)  
☐ In the Military (Branch) \_\_\_\_\_  
☐ Family member's business  
☐ Sheltered Employment for workers with Developmental Disabilities  
☐ Supported Employment program in community for workers with Developmental Disabilities  
☐ Working while incarcerated  
☐ Competitive Employment as a volunteer or in a training capacity  
☐ Work Study--College  
☐ Are you working more than one job? ☐ Yes ☐ No  
☐ Other
- 15) Since leaving high school, have you worked for a total of 3 months (about 90 days). (These days do not have to be in a row)
- ☐ Yes  
☐ No  
☐ Don't know
- 16) Did you work on average 20 or more hours per week (or about half-time of a 40 hour week?)
- ☐ Yes  
☐ No  
☐ Don't know
- 17) Were you paid at least minimum wage? (\$7.25 per hour)
- ☐ Yes  
☐ No
- 18) *Employer/Employer's name:* \_\_\_\_\_
- 19) *Number of hours worked per week:*
- ☐ Less than 10 hours  
☐ 10-19 hours per week  
☐ 20-29 hours per week  
☐ 30-39 hours per week  
☐ More than 40 hours per week
- 20) *How long have you been with this employer??*
- ☐ Less than 1 month  
☐ 1-3 months  
☐ 3-6 months  
☐ 6-9 months  
☐ 9-12 months  
☐ More than 12 months
- 21) *Is this the only employer you have had since graduation?*
- ☐ Yes

- \_\_\_\_\_ No
- 22) Wage amount hourly \_\_\_\_\_
- 23) You said you have not worked since high school. Why not? (Check up to 3 reasons. If more than 3 reasons are indicated, pick the 3 most important ones)
- \_\_\_\_\_ Lack of employment opportunities in the immediate area  
 \_\_\_\_\_ Lack of necessary employment skills  
 \_\_\_\_\_ Lack of transportation  
 \_\_\_\_\_ Have not received necessary services from community agencies (e.g., VR)  
 \_\_\_\_\_ Enrolled in school  
 \_\_\_\_\_ Have family obligations  
 \_\_\_\_\_ Do not want to work  
 \_\_\_\_\_ Feel I would lose benefits if employed (e.g., SSI/disability/etc.)  
 \_\_\_\_\_ Health issues that keep student from working  
 \_\_\_\_\_ Other
- 24) Do you currently live with your family?  
 \_\_\_\_\_ Yes  
 \_\_\_\_\_ No
- 25) Are you covered by your families' health insurance?  
 \_\_\_\_\_ Yes  
 \_\_\_\_\_ No  
 \_\_\_\_\_ Don't know
- 26) Are you covered by any other insurance (unemployment, Medicaid, SSI, etc.)  
 \_\_\_\_\_ Yes  
 \_\_\_\_\_ No  
 \_\_\_\_\_ Don't know
- 27) Type of Insurance \_\_\_\_\_
- 28) Below is a list of areas that young people sometimes have a problem. Usually there are programs and services in every community that can help. Indicate if you want more information about how to contact them (check one option per service).
- |                          |                    |                   |
|--------------------------|--------------------|-------------------|
| Employment:              | _____ No _____ Yes | _____ Yes, Crisis |
| Living in the Community: | _____ No _____ Yes | _____ Yes, Crisis |
| Education:               | _____ No _____ Yes | _____ Yes, Crisis |
| Finances:                | _____ No _____ Yes | _____ Yes, Crisis |
| Medical Care:            | _____ No _____ Yes | _____ Yes, Crisis |
| Transportation:          | _____ No _____ Yes | _____ Yes, Crisis |
| Legal:                   | _____ No _____ Yes | _____ Yes, Crisis |
| Social/Leisure:          | _____ No _____ Yes | _____ Yes, Crisis |
| Other _____:             | _____ No _____ Yes | _____ Yes, Crisis |
- 29) Please provide any additional comments below or on back: