

1. Welcome

This survey has been designed in a collaborative effort to assist The Ohio State University to learn more about the experiences of its graduate and professional students. Your answers will be used by Ohio State to evaluate existing services and programs, to design new ones, and to advise current and future students.

In all cases, all information on this survey will be kept confidential. The survey should take approximately 20 minutes to complete.

Thank you in advance for your help with this important project. Upon completion of the survey, you will be entered into the drawing for one of twenty \$50 VISA giftcards.

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2. Educational Status

1. In which degree program(s) are you currently enrolled? Choose all that apply.

- ☐ Master's degree in the Arts and Sciences (MA, MS)
- ☐ Master's degree in Business (MBA, M Acc, MLHR)
- ☐ Master's degree in Nursing (MSN, etc.)
- ☐ Other graduate/professional master's degree (MPA, MSW, etc.)
- ☐ Law degree (JD)
- ☐ Medical doctorate (MD, OD, DDS, DVM)
- ☐ Ph.D.
- ☐ Other doctorate (PharmD, DMA)

2. In what department or field are you pursuing your degree?

3. For joint degrees, please indicate department/field:

4. What was your age when you began this degree program?

- ☐ 20 or younger
- ☐ 21 - 25
- ☐ 26 - 30
- ☐ 31 - 35
- ☐ 36 - 40
- ☐ 41 - 45
- ☐ Over 45

5. What was your primary activity immediately prior to this program?

- ☐ Undergraduate student
- ☐ Graduate student
- ☐ Volunteer/Community service

- ☐ Cared for a family
- ☐ Employed in a field related to that of current study
- ☐ Employed in a field unrelated to that of current study
- ☐ Travel
- ☐ None of the above

6. What is your current official enrollment status?

- ☐ Full-time
- ☐ Part-time

7. When did you first enroll in your current program?

First Enrolled Quarter Year

8. What is your current year of study?

- ☐ 1st year
- ☐ 2nd year
- ☐ 3rd year
- ☐ 4th year
- ☐ 5th year
- ☐ 6th year
- ☐ 7th year
- ☐ 8th year
- ☐ 9th year
- ☐ 10th year or above

9. How many years TOTAL do you expect it will take to obtain your degree, from the time you started your current program until you complete it?

- ☐ Less than one year
- ☐ One year
- ☐ Two years
- ☐ Three years
- ☐ Four years



Five years

More than five years

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3. Satisfaction with Program, Quality of Interactions, and Coursework

10. Please rate the following dimensions of your program.

	Excellent	Very Good	Good	Fair	Poor
The intellectual quality of the faculty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The intellectual quality of my fellow graduate/professional students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The relationship between faculty and graduate/professional students	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program's ability to integrate recent developments in my field	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program space and facilities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall quality of graduate level teaching by faculty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of financial support	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of academic advising and guidance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Helpfulness of staff members in my department or program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Assistance in finding employment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The opportunity to interact across disciplines	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Academic standards in my program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall program quality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Please indicate your general satisfaction with the University and your program.

	Definitely	Probably	Maybe	Probably Not	Definitely Not
If you were to start your graduate/professional career again, would you select this same university?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If you were to start your graduate/professional career again, would you select the same field of study?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Would you recommend this university to someone considering your program?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Would you recommend this university to someone in another field?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

12. To what extent do you agree or disagree with each of the following statements?

	Strongly Agree	Agree	Ambivalent	Disagree	Strongly Disagree
Students in my program are treated with respect by faculty.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Faculty members are willing to work with me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Rapport between faculty and students in my program is good.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My own relationships and interaction with faculty are good.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There are tensions among faculty that affect students.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Financial support for students in my program is distributed fairly.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Students in my program are collegial.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My relationships and interaction with other students in my program are good.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall, the climate of my program is positive.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program activities foster a sense of intellectual community.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program content supports my research/professional goals.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program structure encourages student collaboration or teamwork.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program structure provides opportunities to take coursework outside my own department.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program structure provides opportunities to engage in interdisciplinary work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Amount of coursework seems appropriate to the degree.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. How would you rate your department on each of the following?

	Excellent	Very Good	Good	Fair	Poor
Availability of area courses I needed to complete my program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of instruction in my courses	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Encouragement to take courses outside my program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall, the quality of course work in my program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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4. Program Department Support

14. Please indicate whether you participated (if applicable) in any of the following activities during your graduate experience mark your level of satisfaction if you engaged in the listed activity.

	Participated in Activity?	If yes, how satisfied were you with activity?
Received advice on degree requirements.	<input type="checkbox"/>	
Received advice on how to avoid plagiarism and other violations of the standards of academic integrity.	<input type="checkbox"/>	
Had assistance in developing professional contacts outside your program.	<input type="checkbox"/>	
Received advice on how to search for a job.	<input type="checkbox"/>	
Received advice on how to prepare a resume or curriculum vitae.	<input type="checkbox"/>	
Received advice on how to prepare for a job interview.	<input type="checkbox"/>	

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5. Financial Support

15. Please estimate the amount of undergraduate educational debt, if any, plus the amount of graduate/professional educational debt, if any, you will have to repay when you have completed your graduate degree here.

	Undergraduate Educational Debt	Graduate/Professional Educational Debt
Amount of Debt	<input type="text"/>	<input type="text"/>

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6. University Resources and Student Life

16. Please rate the following university resources based on the two scales provided: first, your frequency of use of resources, and second, the quality you have experienced in using them. Please answer regarding your most recent year's experience in the graduate school at this university.

	Frequency of use? (if relevant)	Quality of experience? (if used)
Library facilities	<input type="checkbox"/>	<input type="checkbox"/>
On-campus computer facilities	<input type="checkbox"/>	<input type="checkbox"/>
Web-based campus computer services (e.g., for registration)	<input type="checkbox"/>	<input type="checkbox"/>
Main office of your current program	<input type="checkbox"/>	<input type="checkbox"/>
Health care services	<input type="checkbox"/>	<input type="checkbox"/>
Health insurance	<input type="checkbox"/>	<input type="checkbox"/>
Child care services	<input type="checkbox"/>	<input type="checkbox"/>
Financial Aid Office	<input type="checkbox"/>	<input type="checkbox"/>
Career Services	<input type="checkbox"/>	<input type="checkbox"/>
Student Counseling & Resource Center	<input type="checkbox"/>	<input type="checkbox"/>
Bursar or student accounts	<input type="checkbox"/>	<input type="checkbox"/>
Campus police	<input type="checkbox"/>	<input type="checkbox"/>
Athletic facilities	<input type="checkbox"/>	<input type="checkbox"/>
International Office	<input type="checkbox"/>	<input type="checkbox"/>
Housing assistance	<input type="checkbox"/>	<input type="checkbox"/>
Student Activities/Affairs Office	<input type="checkbox"/>	<input type="checkbox"/>
Student Advocacy Center	<input type="checkbox"/>	<input type="checkbox"/>
Availability of parking for students	<input type="checkbox"/>	<input type="checkbox"/>
Campus shuttle bus service	<input type="checkbox"/>	<input type="checkbox"/>
Dining services	<input type="checkbox"/>	<input type="checkbox"/>
University bookstore	<input type="checkbox"/>	<input type="checkbox"/>
Graduate/professional student government office	<input type="checkbox"/>	<input type="checkbox"/>
Registrar	<input type="checkbox"/>	<input type="checkbox"/>

17. How often do the following social activities occur on campus and how often do you attend them?

	Frequency of occurrence of activities? (if relevant)	Frequency of your attendance?
Organized university-wide social activities.	<input type="checkbox"/>	<input type="checkbox"/>
Organized social activities within your department.	<input type="checkbox"/>	<input type="checkbox"/>
Organized social activities within your advisor/research group.	<input type="checkbox"/>	<input type="checkbox"/>
Student government sponsored activities.	<input type="checkbox"/>	<input type="checkbox"/>

18. Which of the following housing situations best describes your CURRENT residence?

- ☐ On-campus student housing (no resident assistant/dorm responsibilities)
- ☐ On-campus student housing (with resident assistant/dorm responsibilities)
- ☐ Off-campus housing owned by this university
- ☐ Off-campus housing not owned by this university

19. How satisfied are you with student housing?

	Very Satisfied	Somewhat Satisfied	Somewhat Dissatisfied	Very Dissatisfied	Not Applicable
How satisfied are you with the availability of student housing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How satisfied are you with the cost of student housing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. How safe do you feel under each of the following circumstances?

	Very Safe	Reasonably Safe	Somewhat Unsafe	Unsafe	Not Applicable
Walking alone by day on campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking alone at night on campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking alone by day off campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walking alone at night off campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alone in your current home or residence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parking your car on or near campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Using public transportation to or from campus



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7. General Assessment**21. Overall, how would you rate the quality of:**

	Excellent	Very Good	Good	Fair	Poor
Your academic experience at this university?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your student life experience at this university?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your graduate/professional program at this university?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Your overall experience at this university?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

22. Rate the extent to which the following factors are an obstacle to your academic progress.

	Not an Obstacle	A Minor Obstacle	A Major Obstacle	Not Applicable
Work/financial commitments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Family obligations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Availability of faculty	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program structure or requirements	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Course scheduling	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Immigration laws or regulations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

23. If you selected "Other" in response to the previous question, please specify the other obstacles to your academic progress.

24. How likely are you to stay in your program until you receive your ultimate degree objective?

- ☐ Very likely
- ☐ Somewhat likely
- ☐ Somewhat unlikely
- ☐ Highly unlikely
- ☐ Uncertain

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8. Personal Demographics

25. Gender

- ☐ Male
- ☐ Female

26. Age

- ☐ 21 or younger
- ☐ 21 - 25
- ☐ 26 - 30
- ☐ 31 - 35
- ☐ 36 - 40
- ☐ 41 - 45
- ☐ Over 45

27. What is your marital status?

- ☐ Not Married
- ☐ Married/Living with Partner

28. Does your partner/spouse live full time in the same residence as you (if relevant)?

- ☐ Yes
- ☐ No

29. How many children do you support?

- ☐ None/Not Applicable
- ☐ 1 child
- ☐ 2 children
- ☐ 3 children
- ☐ 4 or more

30. Do you support adult dependents?

☐ Yes
☐ No

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9. Age of Children

31. Age of children

	1 yr. or less	2 to 4 yrs.	5 to 12 yrs.	13 to 17 yrs.	18 to 21 yrs.	More than 21 yrs.
Age of youngest child	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Age of oldest child	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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10. Personal Demographics II

32. What is your present citizenship status?

☐

U.S. citizen

☐

U.S. permanent resident (green card holder) and citizen of another country

☐

Citizen of another country with a student visa or other nonimmigrant visa

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11. Country of Origin

33. If, in the previous question, you indicated that you are a citizen of another country with a student visa or other nonimmigrant visa, please specify country.

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34. To which racial or ethnic group do you belong? Check all that apply.

35. What was the average grade that you received at your undergraduate institution?

36. What is the average grade that you have received up to now in your current program?

- 37. Please indicate how much time per week you've spent on the following activities on average during the current academic term.**

	0 hrs.	1 to 2 hrs.	3 to 5 hrs.	6 to 10 hrs.	11 to 15 hrs.	16 to 20 hrs.	20+ hrs.
Attend scheduled classes/labs							
Work on scheduled courses outside of class or lab							

Other academic work (include non-class research)							
Talking with faculty outside of class							
Exercise/fitness							
Socializing with friends							
Clubs/organized groups							
Watching TV							
Using computer for academic work							
Using computer apart from academic work							
Work for pay/stipend for your university							
Work for pay/stipend outside your university							
Volunteer work/activity							

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13. Local Questions

38. Please rate your level of agreement with the following statement: Students in my department have the ability to influence department decisions by:

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
Being a part of student associations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Serving as a member on department standing and ad hoc committees.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Serving on search committees.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

39. How important are the following sources of information to you?

	Very Important	Important	Not Important	Not Applicable	Not Aware of this Resource
OSU Weekly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
OnCampus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program Newsletters	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program Websites	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
CGS Announcements/Website	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
IPC Announcements/Website	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Graduate School Website	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lantern	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Campus Bus Signs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

40. Please indicate your level of agreement or disagreement with the following statement. The overall environment in my program is welcoming to people of diverse backgrounds.

- ☐ Strongly agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly disagree

41. Please indicate how often you have witnessed or personally experienced the following types of discrimination during your degree program at Ohio State.

	Have witnessed Discrimination	Have Personally Experienced Discrimination
Gender	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Perceived gender	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Race or ethnicity	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Country of origin	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Religion	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Sexual Orientation	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Disability	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Political or social beliefs	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

42. Have you experienced sexual harassmt during your experience at Ohio State?

















- ☒ Yes
- ☒ No

43. How satisfied are you with the level of financial support for the following?

	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Tuition and general fees	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Activity fees	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
COTA fee	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Stipends	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Health care	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Professional development (travel support)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

44. How important is it to you to receive additional financial support for the following?

- Very
Important
- Important
- Not
Important
at All

Tuition and general fees			
Activity fees			
COTA fee			
Stipends			
Health care			
Professional development (travel support)			

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14. Students in Final Year

This section contains additional questions for those students who expect to graduate by the end of the current academic year. If you are in your final year and would like to answer the additional questions, please select YES. Otherwise, select NO and you will be taken to another part of the survey.

45. Do you expect to graduate by the end of the current academic year?

☐

Yes

☐

No

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15. Post Graduation Plans

46. Which of the following best describes the current state of your employment plans immediately after you complete your degree?

- ☐ Employed or have a definite job offer related to my most recent degree
- ☐ Employed, but not in my field
- ☐ Negotiating with one or more specific organizations (in or out of field)
- ☐ Under consideration for a position but have not received final word (in or out of field)
- ☐ Seeking employment in my field, no offer at this time
- ☐ In military service
- ☐ Scholarship commitment
- ☐ Paid or volunteer work for the Peace Corps, Vista, etc.
- ☐ Not seeking employment immediately

47. Which of the following best describes your expectation for employment immediately after you complete your degree at this university?

- ☐ Postdoctoral researcher or fellow
- ☐ Researcher, academic setting
- ☐ Researcher, nonacademic setting (e.g., national lab/industry/medical center)
- ☐ Tenure track faculty position
- ☐ Non-tenure track faculty position
- ☐ Secondary school teaching position
- ☐ Manager or administrator
- ☐ Finance, Accounting
- ☐ Marketing, Sales
- ☐ Engineer, Manufacturing
- ☐ Management information systems, Programmer
- ☐ Medical professional
- ☐ Writer, Journalist, Artist, Musician
- ☐ Lawyer
- ☐ Analyst
- ☐ Clergy

48. Do you expect the position indicated above to be directly related to your graduate/professional training?

☐ Yes

☐ No

49. How would you categorize the employer you expect/hope to work for immediately after you complete your degree?

☐ U.S. federal government, or your home country if not the U.S.

☐ State or local government

☐ Industry or business

☐ Nonprofit organization or foundation

☐ College or university

☐ Community or junior college

☐ Elementary, secondary, or special focus school

☐ Self-employed, private practice, or consultant

☐ Hospital or clinic

50. Where would the employer you expect to work for most likely be located?

51. If you have already been hired, what is the name of your employing organization?

52. If you have already been hired, what will be your starting salary?



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16. Retrospective Assessment

53. How satisfied are you with your current employment options/opportunities?

- ☐ Very Satisfied
☐ Generally Satisfied
☐ Generally Dissatisfied
☐ Dissatisfied

54. Please indicate the importance to you, and the extent to which you feel your abilities in the following areas were enhanced, during your program.

	Importance to you	Degree to which abilities in area were enhanced
Research	<input type="text"/>	<input type="text"/>
Writing	<input type="text"/>	<input type="text"/>
Critical thinking	<input type="text"/>	<input type="text"/>
Ethical issues	<input type="text"/>	<input type="text"/>
Leadership	<input type="text"/>	<input type="text"/>
Teamwork	<input type="text"/>	<input type="text"/>
Communications skills	<input type="text"/>	<input type="text"/>
Time management skills	<input type="text"/>	<input type="text"/>

55. If you could change one thing about your experience as a graduate/professional student at this university to make it more successful or fulfilling, what would it be?

56. What advice would you offer to first-time graduate/professional students coming into your program at this

university?

57. Which aspect of your graduate/professional program pleased you the most?

58. Were there aspects of your graduate/professional program that you found problematic?

59. What changes would you recommend in your program/department in the future?

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17. Thank you!

Thank you for participating in our survey.

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