

**NATIONAL LONGITUDINAL TRANSITION STUDY - 2 (NLTS2)  
WAVE 2 INTERVIEW  
PARENT CONTINUATION 2A**

**PARENT PART 1**

- S Introduction .....
- A Living arrangements/student characteristics .....
- B Disability Characteristics .....
- C Health insurance .....
- D School status and secondary school experiences.....
- E Family involvement .....
- F. Services .....
- G. Youth behaviors .....
- H. Household .....
- I. Screen for continuation, overlap items, tracing questions .....

**PARENT CONTINUATION, PART 2A**

- J. Social and extracurricular activities .....
- K. Secondary school experiences continued, Postsecondary education .....
- L. Employment .....
- M. Youth's household .....
- N. Closing, tracing questions .....

**YOUTH CONTINUATION, PART 2B**

- O. Youth Introduction .....
- P. Social and extracurricular activities .....
- Q. Health .....
- R. Secondary school experiences/involvement .....
- S. Postsecondary education .....
- T. Employment .....
- U. Risk behaviors .....
- V. Youth's feelings and expectations .....
- W. Youth's household .....
- X. Closing .....

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**NATIONAL LONGITUDINAL TRANSITION STUDY - 2 (NLTS2)  
DRAFT WAVE 2 PARENT CONTINUATION 2A**

**J. SOCIAL AND EXTRACURRICULAR ACTIVITIES  
YOUTH BEHAVIORS**

Next I would like to ask about what YOUTH does in [his/her] spare time.

**CHECKPOINT:** IF NOT IN SCHOOL IN THE PAST YEAR [D1a OR D12a NE 1 GO TO J2].  
IF HOME SCHOOLED OR HOME BOUND [D2b=1or2], GO TO J2. ELSE GO TO J1.  
IF IN SCHOOL IN PAST YEAR, READ BRACKETED WORDS IN THIS SECTION.

NHES96, SEELS

J1. During the last 12 months has YOUTH taken part in any school activity outside of class, such as a sports teams, band or chorus, a school club, or student government?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NHES93, SIMILAR NELS88 AND NHES96, SEELS

J2. During the last 12 months, has [he/she] taken part in any [out-of-school] group activity, such as scouting, church or temple youth group, or nonschool team sports like soccer or softball?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF J1 OR J2=1, HAD GROUP ACTIVITY, ASK J3. ELSE GO TO J4.

NLTS and NELS (NELS asks "ever"), NSAF, SEELS

J3a. What kinds of groups has [he/she] belonged during the last 12 months]? DO NOT READ. CODE ALL THAT APPLY.

SCOUTING (E.G., CUB SCOUTS/BROWNIES, BOY/GIRL SCOUTS, CAMPFIRE/BLUEBIRDS)	1
RELIGIOUS GROUP, RELIGIOUS YOUTH GROUP	2
YMCA, YWCA, JCC CLUB/ACTIVITIES, BOYS-GIRLS CLUBS	3
SPORTS TEAM (E.G., LITTLE LEAGUE, AYSO SOCCER, OTHER SPORTS TEAM)	4
SPECIAL OLYMPICS	5
4-H CLUB	6
SPECIAL INTEREST CLUB (E.G., CHESS CLUB, COMPUTER CLUB, ENVIRONMENT CLUB)	7
PERFORMING GROUP (CHOIR, BAND, THEATER GROUP, DANCE TROUPE)	8
STUDENT GOVERNMENT	9
SCHOOL SUBJECT MATTER CLUB (E.G., SCIENCE, LANGUAGE, JOURNALISM, YEARBOOK, SCHOOL PAPER)	10
VOLUNTEER SERVICE GROUP (E.G., CANDYSTRIPERS)	11
DISABILITY-ORIENTED ADVOCACY, SUPPORT OR SOCIAL GROUP (E.G., ADHD)	12
CULTURAL AFFINITY GROUP (E.G., ASIAN STUDENTS CLUB, HISPANIC CLUB)	13
HOMEWORK CLUB	14
LEADERSHIP, YOUTH DEVELOPMENT CLUB	15
VOCATIONAL CLUBS (E.G., FUTURE HOMEMAKERS, DECA)	16
AFTER-SCHOOL CARE CENTER	17
OTHER SPECIFY: _____	18
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT1:** IF SAMPLE FILE OR RESPONDENT SAYS YOUTH DOES NOT HAVE A DISABILITY (B1c=2) OR IF ONLY DISABILITY IS LEARNING DISABILITY OR SPEECH (B1a=13 or 16 OR SAMPLE FILE) GO TO J4. ELSE GO TO CHECKPOINT 2.

**CHECKPOINT 2:** IF ONLY GROUP LISTED IN J3a IS STUDENT GOVERNMENT (J3a=9) GO TO J4. IF J3a NE 5 OR 12 (SPECIAL OLYMPICS OR DISABILITY ORIENTED GROUP) GO TO CHECKPOINT 3. ELSE GO TO J4.

**CHECKPOINT 3:** IF ONLY ONE TYPE OF GROUP IN J3a GO TO J3b. IF MORE THAN ONE TYPE OF GROUP CIRCLED GO TO J3c.

J3b. Does this group include only youth with disabilities?

GO TO J4	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

J3c. How many of these are groups that include only youth with disabilities? Would you say ... READ CATEGORIES. CIRCLE ONE.

DO NOT READ	None	1
	Some	2
	All	3
	DON'T KNOW	-1
	REFUSED	-2

SEELS

J4. During the last 12 months has YOUTH done any volunteer or community service activities? This could include community service that is part of a school class or other group activity.

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NELS, similar NSAF97, SEELS

J5. During the last 12 months has [he/she] taken lessons or classes [outside of school] in things like art, music, dance, a foreign language, religion, or computer skills?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF YOUTH DID NOT LIVE WITH PARENT, RELATIVE, OR GUARDIAN (A6a NE 1, 2, 3, OR 4) GO TO J9a. ELSE GO TO J6.

NLTS

J6. During the last 12 months about how many days a week did [he/she] usually get together with friends [outside of school and] outside of organized activities or groups?  
OK TO READ CATEGORIES IF NEEDED. CODE ONE.

	Never,	0
	Sometimes, but not every week,	1
	1 day a week,	2
	2 or 3 days a week,	3
	4 or 5 days a week, or	4
	6 or 7 days a week?	5
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

SEELS

J7. During the last 12 months has he/she been invited to other kids' social activities like over to their home or to a party?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

SEELS

J8. During the last 12 months how often have friends called YOUTH on the phone? Would you say ... READ CATEGORIES. CODE ONE.

	Never,	1
	Rarely/less than once a month,	2
	A few times a month, but not every week,	3
	About once a week, or	4
	Several days a week.	5
	Every day	6
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

NELS 88, SEELS

J9a. Does [he/she] know how to use a computer for: READ EACH ITEM TO CODE RESPONSE IN COLUMN A. FOR EACH YES IN a-c, ALSO READ J9b IMMEDIATELY FOR THAT COMPUTER USE AND CODE RESPONSE IN COLUMN B. IF YOUTH IS NOT NOW IN SCHOOL DO NOT GO TO J9bb. CODE NA FOR ITEM A IF DOESN'T GET HOMEWORK.

J9b. Does [he/she] use a computer for:

		A. ABLE TO USE COMPUTER FOR:					B. DOES USE COMPUTER FOR:			
		Y	N	DK	R	NA	Y	N	D K	R
a.	Homework and school assignments	1	2	-1	-2	0	1	2	-1	-2
b.	Playing games	1	2	-1	-2	0	1	2	-1	-2
c.	The internet	1	2	-1	-2	0	1	2	-1	-2
d.	E-mail	1	2	-1	-2	0				
e.	Taking part in chat rooms	1	2	-1	-2	0				

**CHECKPOINT:** IF J9ad OR J9ae=1 (EMAIL, CHAT ROOMS) ASK J10. ELSE GO TO J11.

NHES96, SEELS

J10. How frequently does [YOUTH] interact with others using e-mail or taking part in chat rooms? Would you say ... READ CATEGORIES. CIRCLE ONE CODE.

Several times a day	1
Once a day	2
Several times a week	3
Once a week, or	4
Less often	5
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF A6a NE 1, 2, 3, OR 4 (DOESN'T LIVE WITH PARENT/GUARDIAN/RELATIVE) GO TO J13. ELSE GO TO J11.

NLTS

J11. During the past few weeks, how has [he/she] spent most of [his/her] time when [he/she] wasn't working or going to school? DON'T READ. CODE ALL THAT APPLY.

VISITING WITH FAMILY MEMBERS	01
VISITING WITH FRIENDS	02
DOING HOMEWORK	03
READING FOR PLEASURE	04
GOING OUT ON DATES	05
JUST DRIVING AROUND (WITH FRIENDS OR ALONE)	06
TALKING WITH FRIENDS ON THE TELEPHONE	07
USING THE COMPUTER FOR GAMES	08
USING THE COMPUTER FOR EMAIL OR INTERNET OR CHAT ROOMS	09
THINKING OR DAYDREAMING	10
WATCHING TELEVISION/VIDEOS	11
LISTENING TO MUSIC	12
PLAYING SPORTS	13
SHOPPING/HANGING OUT AT THE MALL	14
HANGING OUT SOMEWHERE ELSE/DOING NOTHING	15
OTHER, SPECIFY _____	16
DON'T KNOW	-1
REFUSED	-2

AHW1

J12. About how many hours a week does [he/she] usually watch TV or videos?

DOESN'T WATCH TV	0
NUMBER: _____	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF G9 IN PART 1=5 OR SAMPLE FILE (YOUTH HAS DRIVERS LICENSE) GO TO J14a. ELSE ASK J13.

NLTS, SEELS

J13. Does YOUTH have a driver's license or learners permit?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS, SEELS

J14a. Does [he/she] get an allowance or have other money that [he/she] can decide how to spend? IF ASKED, THIS COULD INCLUDE MONEY EARNED FROM A JOB. CODE ONE.

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

J14b. Does [he/she] have a ... READ CATEGORIES, ONE CODE PER ITEM.

		Y	N	DK	R
a.	Savings account	1	2	-1	-2
b.	Checking account where [he/she] writes checks	1	2	-1	-2
c.	Credit cards or charge account in [his/her] name?	1	2	-1	-2

NLTS

J15a. My next few questions are about involvement with police and courts. Has YOUTH been arrested in the past 2 years? CODE ONE.

GO TO J15b	YES	1
GO TO J15d	NO	2
	DON'T KNOW	-1
	REFUSED	-2

J15b. In the past 2 years, has [he/she] been in jail overnight? CODE ONE .

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

J15c. In the past 2 years, has [he/she] been on probation or parole? CODE ONE.

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

J15d. In the past 2 years, has [he/she] been stopped and questioned by the police [IF J13=1, HAS A DRIVER'S LICENSE OR PERMIT, ADD: except for a traffic violation]? CODE ONE.

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF YOUTH IS 18 OR OLDER ASK J16. ELSE GO TO SECTION K.

NLTS

J16. Is YOUTH registered to vote?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**K. SECONDARY SCHOOL EXPERIENCES CONTINUED  
AND POSTSECONDARY EDUCATION**

Now I would like to ask you a few questions about YOUTH's school experiences.

**CHECKPOINT:** IF YOUTH WAS IN SECONDARY SCHOOL THIS YEAR (D1a OR D2a=1) GO TO K1. ELSE GO TO POST SECONDARY QUESTIONS CHECKPOINT BEFORE K5a.

SEELS

K1. How well would you say [YOUTH] has gotten along with other students at school this school year? Would you say...? READ CATEGORIES. CODE ONE.

	Very well	1
	Pretty well	2
	Not very well, or	3
	Not at all well?	4
DON'T READ	MIXED, SOME WELL, SOME NOT	5
	DOES NOT INTERACT WITH OTHER YOUTH	6
	DON'T KNOW	-1
	REFUSED	-2

SEELS

K2. How well would you say [he/she] has gotten along with teachers this school year? Would you say...? READ CATEGORIES. CODE ONE.

	Very well,	1
	Pretty well,	2
	Not very well, or	3
	Not at all well?	4
DON'T READ	MIXED, SOME WELL, SOME NOT	5
	DOES NOT INTERACT WITH TEACHERS	6
	DON'T KNOW	-1
	REFUSED	-2

NHES 96, all; NELS, a and b.; SSS a-e, SEELS

K3. Think about [YOUTH'S] experiences at [his/her] school since the beginning of this school year. Would you say you strongly agree, agree, disagree, or strongly disagree with each of the following statements? READ STATEMENTS. CODE ONE RESPONSE FOR EACH.

		Strongly Agree	Agree	Dis-agree	Strongly Dis-agree	DK	Ref
a.	School is challenging for [YOUTH].	1	2	3	4	-1	-2
b.	[He/she] enjoys school.	1	2	3	4	-1	-2
c.	There is an adult at the school who knows YOUTH well and cares about [him/her].	1	2	3	4	-1	-2
d.	The school is good at meeting [his/her] individual needs.	1	2	3	4	-1	-2
e.	[YOUTH] is getting the support and services from the school that [he/she] needs to do well in school	1	2	3	4	-1	-2

SSS, SEELS

K4. Has [YOUTH] had any of the following things happened during this school year? READ EACH. CODE ONE RESPONSE FOR EACH ITEM.

		Yes	No	NA	DK	Ref
a.	Has [YOUTH] had things stolen from [his/her] locker, desk, or other places at school?	1	2	3	-1	-2
b.	Has [he/she] been bullied or picked on by other students or made to do things like give them money, either at school or on the way to or from school?	1	2	3	-1	-2
c.	Has [he/she] bullied or picked on other students?	1	2	3	-1	-2
d.	Has [he/she] been teased or called names at school?	1	2	3	-1	-2
e.	Has [he/she] been physically attacked or in fights at school or on the way to or from school?	1	2	3	-1	-2

**POSTSECONDARY EDUCATION**

**CHECKPOINT:** IF YOUTH IS IN HIGH SCHOOL NOW (D1j or D2c=1) GO TO SECTION L. IF SUMMER VACATION (D1k or D2d=1) GO TO SECTION L.

IF YOUTH DID NOT GRADUATE OR TAKE A TEST FOR DIPLOMA IN EARLIER WAVE, OR THIS WAVE (D1k or D2d NE 2 OR 3) GO TO K5a. ELSE GO TO CHECKPOINT BEFORE K6a.

**DROPOUTS**

NLTS

K5a. Since leaving high school, has [he/she] taken classes or tests to earn a high school diploma, such as a GED course?

GO TO K6b	YES	1
	NO	2
GO TO K7a	DON'T KNOW	-1
	REFUSED	-2

NLTS

K5b. Did [he/she] get a high school diploma from this effort?

GO TO K7a	YES	1
	NO	2
GO TO K6c	DON'T KNOW	-1
	REFUSED	-2

NLTS

K5c. Is [he/she] taking classes to earn a high school diploma or certificate now?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

K5d. Was it a diploma or a certificate?

DIPLOMA	1
CERTIFICATE	2
DON'T KNOW	-1
REFUSED	-2

**2-YEAR COLLEGE –**

**CHECKPOINT:** IF PARENT SAID EARLIER TOOK CLASSES IN 2 YEAR COLLEGE (D4a1=1) GO TO K6A. ELSE GO TO CHECKPOINT BEFORE K7a.

NLTS

K6a. Earlier you told me that YOUTH has taken classes from a 2-year, junior, or community college. About how long after leaving high school was it before [he/she] started going to a 2-year college?

_____	DAYS	1
NUMBER	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT:** IF EARLIER SAID IS NOT GOING NOW (D4b1=2) GO TO K6b. ELSE GO TO K6c.

K6b. You told me earlier that YOUTH is not going to a 2-year or community college now. Why did [he/she] stop going to a 2-year or community college? DO NOT READ CATEGORIES. CODE ALL THAT APPLY.

COMPLETED PROGRAM/ RECEIVED DEGREE	01
CHANGED SCHOOLS, WENT TO A DIFFERENT SCHOOL	02
TRANSPORTATION PROBLEMS	03
DIDN'T GET SERVICES NEEDED	04
TOO EXPENSIVE/COULDN'T AFFORD IT	05
DIDN'T HAVE TIME; SCHEDULE CONFLICTS; CONFLICTED WITH OTHER DEMANDS (E.G., JOB)	06
POOR GRADES/NOT DOING WELL IN SCHOOL	07
DIDN'T LIKE SCHOOL	08
WANTED/NEEDED TO FIND A JOB	09
OFFERED A JOB/CHOSE TO WORK	10
WANTED TO ENTER MILITARY	11
DIDN'T GET INTO THE PROGRAM [HE/SHE] WANTED	12
ILLNESS/DISABILITY; TOO SICK TO GO	13
GOT MARRIED	14
GOT PREGNANT OR HAD A CHILD	15
MOVED	16
SCHOOL TOO DANGEROUS	17
WANTED TO TRAVEL	18
FRIENDS WEREN'T IN SCHOOL/WERE DROPPING OUT	19
COULDN'T GET ALONG WITH TEACHERS	20
COULDN'T GET ALONG WITH OTHER STUDENTS	21
COULDN'T GET CHILDCARE	22
PARENTS/FAMILY DIDN'T WANT YOUTH TO GO	23
OTHER (SPECIFY)	24
DON'T KNOW	-1
REFUSED	-2

K6c. [IF D4b1=1: Has YOUTH been enrolled] [IF D4b1 NE 1: Was [he/she] enrolled] steadily during the school year, or [IF K7b NE 2: has YOUTH been enrolled] [IF K7b=2, was [he/she] enrolled] off and on, taking classes some semesters or quarters but not others?

STEADILY	1
OFF AND ON	2
DON'T KNOW	-1
REFUSED	-2

NLTS

K6d. [IF D4b1 NE 1: Has YOUTH gone] [IF D4b1=1: Is [he/she] going] to a 2-year or community college full time or part time? IF ASKED, BY FULL TIME, WE MEAN TAKING A FULL COURSE LOAD OF 12 CREDITS OR MORE AT A TIME OR BEING IN CLASS AT LEAST 12 HOURS PER WEEK.

FULL TIME	1
PART TIME	2
DON'T KNOW	-1
REFUSED	-2

K6e. Has YOUTH taken mostly vocational courses to train for a job, like computer or business courses, or has YOUTH taken mostly academic courses, like English or science?

GO TO K6f	MOSTLY VOCATIONAL	1
GO TO K6h	MOSTLY ACADEMIC	2
GO TO K6f	BOTH, MIXED	3
GO TO K7a	NEITHER, CLASSES ARE FOR PERSONAL INTEREST, RECREATION	4
GO TO K6i	DON'T KNOW	-1
	REFUSED	-2

K6f. What kind of job [IF D4b1=1: is [he/she] training for] [IF D4b1 NE 1: did [he/she] train for]? CODE ALL THAT APPLY.

AGRICULTURE, GROUNDSKEEPING, HORTICULTURE	01
ANIMAL CARE – E.G., VETERINARY HELPER	02
ARTS, DRAMA, DANCE, MUSIC, GRAPHIC DESIGN/ARTS, FASHION DESIGN	03
COMMUNICATIONS, JOURNALISM, TV/RADIO, ENTERTAINMENT INDUSTRY	04
BUSINESS	05
CHILD CARE, EARLY CHILDHOOD EDUCATION	06
CLERICAL – E.G., FILING, RECEPTIONIST, SECRETARY, TYPIST	07
COMPUTER SUPPORT – E.G., DATA ENTRY, PROGRAMMING, WEB PAGE DEVELOPMENT	08
EDUCATION, TEACHING, TUTORING	09
ENGINEERING (ELECTRICAL, MECHANICAL, CHEMICAL, MATERIALS)	10
FINANCIAL SERVICES	11
FOOD SERVICE, RESTAURANT MANAGEMENT	12
HEALTH CARE – PERSONAL CARE ATTENDANT, NURSE'S AIDE	13
MARKETING, ADVERTISING	14
MECHANICS (AUTO, MACHINERY REPAIR)	15
POLICE SCIENCE, CRIMINAL JUSTICE	16
RETAIL SALES	17
SKILLED CRAFTS (PLUMBING, ELECTRICAL WORK, CARPENTRY)	18
OTHER, SPECIFY _____	19
DON'T KNOW	-1
REFUSED	-2

K6h. [IF D4b1=1: Does] [IF D4b1 NE 1: did] [he/she] have a tutor or [IF K7c=1: does] [IF K7c NE 1: did] [he/she] ever go to a study center or writing center at school to get help with [his/her] school work?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF PARENT ASSERTS A DISABILITY [B1a NE 00, OR SAMPLE FILE] ASK K6i. ELSE, GO TO K6m.

K6i. Did [he /she] tell the school that [he/she] has a disability... READ CATEGORIES. CODE ONE RESPONSE.

	Before [he/she] enrolled there	1
	After [he/she] enrolled, or	2
	Has YOUTH not told them at all?	3
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

K6j. [IF D4b1 NE 1: Did [he/she] receive] [IF D4b1=1: Has YOUTH received] any services, accommodations, or other help from the school, like a tutor or more time to take tests, because [he/she] has a learning problem, disability, or other special need?

GO TO K6l	YES	1
	NO	2
GO TO K6k	DON'T KNOW	-1
	REFUSED	-2

K6k. [IF D4b1 NE 1: Did [he/she] ask or apply] [IF D4b1=1: Has YOUTH asked or applied] for any services, accommodations, or other help from the school?

GO TO K7n	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

K6I. What services, accommodations, or other help has YOUTH received? IF HAS ATTENDED MORE THAN ONE 2-YEAR, JUNIOR, OR COMMUNITY COLLEGE, WE WANT TO KNOW ABOUT SERVICES FROM ANY OF THEM.

<b>1</b>	<b>Testing Accommodations</b>	
	More time in taking tests	01
	Having tests and other materials read to youth	02
	Different tests	03
	Different grading standards	04
	Different setting to take tests	05
	Instructions given in sign language or manual communication	06
<b>2</b>	<b>Accommodations in assignments</b>	
	Additional time to finish assignments	07
	Different assignments, like shorter assignments or different lab assignments in a science class	08
<b>3</b>	<b>Materials/technology adaptations</b>	
	Large print or Braille materials or large print computer	09
	Books on tape	10
	Use of computer or spell checker in class or during test taking	11
	Computer software designed for students with disabilities	12
	Computer hardware adapted for student's needs (e.g., alternative keyboard, switch interface)	13
	Special use of calculator (e.g., use for tests that other students don't have)	14
<b>4</b>	<b>Human aides</b>	
	A reader or interpreter	15
	Note taker in class	16
	A personal aide or instructional assistant to help you in class	17
	Tutor	18
	Support person to monitor academic progress and help with managing academic workload	19
<b>5</b>	<b>Out-of-classroom learning supports</b>	
	A behavior management program	20
	Help with learning strategies or study skills (e.g., writing center)	21
	Support group for students with disabilities	22
	Early registration	23
<b>6</b>	<b>Physical adaptations in classrooms</b>	
	Physical changes to the classroom, special desks	24
	Changes to equipment, like different lab equipment in a science class	25
<b>7</b>	<b>Independent living supports</b>	
	Transportation assistance (i.e., to get to classes)	26
	Housing assistance (e.g., modified living arrangements)	27
	Orientation and mobility services	28
	Social activities for students with disabilities	29
	Food service arrangements or accommodations	30
	Medical supports (e.g., ????)	31
<b>8</b>	<b>Therapies</b>	
	Psychological or mental health services or counseling	32
	Social work services	33
	Occupational therapy or life skills training	34
<b>9</b>	<b>Service coordination or case management</b>	35
<b>10</b>	<b>Childcare</b>	36
<b>11</b>	<b>Other. Specify:</b> _____	37
	DON'T KNOW	-1
	REFUSED	-2

NOTE: THE FOLLOWING PROBES ARE IMPLEMENTED SO AS NOT TO DUPLICATE PROBES FOR YOUTH WITH MORE THAN ONE TYPE OF DISABILITY.

**CHECKPOINT:**

IF NO RESPONSES IN CATEGORY 5: Have there been any supports for you outside of class, like a support group for students with disabilities?

IF NO RESPONSES IN CATEGORY 4: Has there been any person assigned to help you with your work, like a person who helps you with study skills, a tutor, or someone who takes notes for you in class?

**CHECKPOINT: IF DISABILITY FROM SAMPLE FILE IS LD OR MR OR SPEECH OR MULTIPLE, PROBE:**

IF NO RESPONSES IN CATEGORY 1: Has YOUTH had any accommodations in how you take tests, like more time to take tests, or a different setting to take tests?

IF NO RESPONSES IN CATEGORY 2: Has YOUTH had any accommodations in how you handle class assignments, like having more time to finish assignments or getting different assignments?

IF NO RESPONSES IN CATEGORY 3: Has YOUTH been allowed to use any different kinds of technology in class because of a disability, like using a calculator in math class when other students don't get to use one?

**CHECKPOINT: IF DISABILITY IS ORTHOPEDIC, OHI, MULTIPLE, VISUAL, OR DEAF/BLIND, PROBE:**

IF NO RESPONSES IN CATEGORY 4: Has there been any person assigned to help you, like a person who helps you get between classes, a tutor, or someone who takes notes for you in class?

IF NO RESPONSES IN CATEGORY 6: Have there been any adaptations to your classrooms, like you having a special desk or different equipment because of a disability?

IF NO RESPONSES IN CATEGORY 7: Has YOUTH had any services or supports to help you live or get around at school, like help with transportation or special campus housing or dining arrangements?

**CHECKPOINT: IF DISABILITY IS HEARING IMPAIRED, PROBE:**

IF NO RESPONSES IN CATEGORY 4. Has there been any person assigned to help you, like a sign language interpreter or someone who takes notes for you?

**CHECKPOINT: IF DISABILITY IS OHI PROBE:**

IF NO RESPONSES IN CATEGORY 7. Do you have any special medical support services at school because of your health problem or disability, like ????

IF NO RESPONSES IN CATEGORY 6: Have there been any adaptations to your classrooms, like a special desk or different equipment?

IF NO RESPONSES IN CATEGORY 7: Has YOUTH had any services or supports to help you live or get around at school, like help with transportation or special campus housing or dining arrangements?

NLTS

K6m. Has YOUTH gotten a diploma, certificate, or license from a 2-year or community college?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT: IF D4b1 NE1 (NOT GOING NOW) GO TO K7a.  
IF STILL GOING (D4b1=1), GO TO K6n.**

NLTS

K6n. Is [he/she] working toward [IF K6m=2, -1, OR -2: a] [IF K6m=1: another] diploma, certificate, or license from this school?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**VOCATIONAL TECHNICAL SCHOOL**

**CHECKPOINT:** IF PARENT SAID EARLIER TOOK CLASSES IN VOCATION TECHNICAL SCHOOL (D4a2=1) GO TO K7a. ELSE GO TO CHECKPOINT BEFORE K8a.

NLTS

K7a. Earlier you said that YOUTH had taken classes from a vocational or trade school. About how long after leaving high school was it before [he/she] started going to this kind of school?

NUMBER	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT:** IF EARLIER SAID IS NOT GOING NOW (D4b2=2) GO TO K7b. ELSE GO TO K7c.

K7b. You said that YOUTH was not going to this kind of school now. Why did [he/she] stop going? DO NOT READ CATEGORIES. CODE ALL THAT APPLY.

COMPLETED PROGRAM/ RECEIVED DEGREE/GRADUATED	1
CHANGED SCHOOLS, WENT TO A DIFFERENT SCHOOL	2
TRANSPORTATION PROBLEMS	3
DIDN'T GET SERVICES NEEDED	4
TOO EXPENSIVE/COULDN'T AFFORD IT	5
DIDN'T HAVE TIME; SCHEDULE CONFLICTS; CONFLICTED WITH OTHER DEMANDS (E.G., JOB)	6
POOR GRADES/NOT DOING WELL IN SCHOOL	7
DIDN'T LIKE SCHOOL	8
WANTED/NEEDED TO FIND A JOB	9
OFFERED A JOB/CHOSE TO WORK	10
WANTED TO ENTER MILITARY	11
DIDN'T GET INTO THE PROGRAM [HE/SHE] WANTED	12
ILLNESS/DISABILITY; TOO SICK TO GO	13
GOT MARRIED	14
GOT PREGNANT OR HAD A CHILD	15
MOVED	16
SCHOOL TOO DANGEROUS	17
WANTED TO TRAVEL	18
FRIENDS WEREN'T IN SCHOOL/WERE DROPPING OUT	19
COULDN'T GET ALONG WITH TEACHERS	20
COULDN'T GET ALONG WITH OTHER STUDENTS	21
COULDN'T GET CHILDCARE	22
PARENTS/FAMILY DIDN'T WANT YOUTH TO GO	23
OTHER (SPECIFY)	24
DON'T KNOW	-1
REFUSED	-2

NLTS

K7c. [IF D4b2 NE 1: Has YOUTH gone] [IF D4b2= 1: Is [he/she] going] there full time or part time? IF ASKED, BY FULL TIME, WE MEAN TAKING A FULL COURSE LOAD OF 12 CREDITS OR MORE AT A TIME, OR BEING IN CLASS AT LEAST 12 HOURS PER WEEK.

FULL TIME	1
PART TIME	2
BOTH, SOMETIMES ONE, SOMETIMES OTHER	3
DON'T KNOW	-1
REFUSED	-2

K7d. What kind of job is [he/she] training for at the vocational, business, or technical school? CODE ALL THAT APPLY.

AGRICULTURE, GROUNDSKEEPING, HORTICULTURE	01
ANIMAL CARE – E.G., VETERINARY HELPER	02
ARTS, DRAMA, DANCE, MUSIC, GRAPHIC DESIGN/ARTS, FASHION DESIGN	03
COMMUNICATIONS, JOURNALISM, TV/RADIO, ENTERTAINMENT INDUSTRY	04
BUSINESS	05
CHILD CARE, EARLY CHILDHOOD EDUCATION	06
CLERICAL – E.G., FILING, RECEPTIONIST, SECRETARY, TYPIST	07
COMPUTER SUPPORT – E.G., DATA ENTRY, PROGRAMMING, WEB PAGE DEVELOPMENT	08
EDUCATION, TEACHING, TUTORING	09
ENGINEERING (ELECTRICAL, MECHANICAL, CHEMICAL, MATERIALS)	10
FINANCIAL SERVICES	11
FOOD SERVICE , RESTAURANT MANAGEMENT	12
HEALTH CARE – PERSONAL CARE ATTENDANT, NURSE'S AIDE	13
MARKETING, ADVERTISING	14
MECHANICS (AUTO, MACHINERY REPAIR)	15
PERSONAL SERVICES (BEAUTICIAN, MANICURIST, MASSEUSE)	16
POLICE SCIENCE, CRIMINAL JUSTICE	17
RETAIL SALES	18
SKILLED CRAFTS (PLUMBING, ELECTRICAL WORK, CARPENTRY)	19
OTHER, SPECIFY _____	20
DON'T KNOW	-1
REFUSED	-2

K7e. [IF D4b2=1: Does] [IF D4b2 NE 1: did] [he/she] have a tutor or [IF D4b2 =1: does] [IF D4b2 NE 1: did] [he/she] ever go to a study center at school to get help with [his/her] school work?

	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT:** IF PARENT SAYS HAS A DISABILITY (B1a NE OO, OR SAMPLE FILE) ASK K7f. ELSE, GO TO K7h.

K7f. Did [he/she] tell the school that [he/she] has a disability ... READ CATEGORIES. CODE ONE RESPONSE.

GO TO K7g	Before you enrolled there	1
	After you enrolled, or	2
GO TO K7j	Has YOUTH not told them at all?	3
DON'T READ	DON'T KNOW	-1
GO TO K7g	REFUSED	-2

K7g. [IF D4b2 NE 1: Did [he/she] receive] [IF D4b2=1: Has YOUTH received] any services, accommodations, or other help from the school, like a tutor or more time to take tests, because [he/she] has any kind of learning problem, disability, or other special need?

GO TO K7i	YES	1
	NO	2
GO TO K7h	DON'T KNOW	-1
	REFUSED	-2

K7h. [IF D4b2 NE 1: Did you ask or apply] [IF D4b2=1: Has YOUTH asked or applied] for any services, accommodations, or other help from the school?

GO TO K7j	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

K7i. What services, accommodations, or other help has YOUTH received? IF HAS ATTENDED MORE THAN ONE 2-YEAR, JUNIOR, OR COMMUNITY COLLEGE, WE WANT TO KNOW ABOUT SERVICES FROM ANY OF THEM.

1	<b>Testing Accommodations</b>	
	More time in taking tests	01
	Having tests and other materials read to youth	02
	Different tests	03
	Different grading standards	04
	Different setting to take tests	05
	Instructions given in sign language or manual communication	06
2	<b>Accommodations in assignments</b>	
	Additional time to finish assignments	07
	Different assignments, like shorter assignments or different lab assignments in a science class	08
3	<b>Materials/technology adaptations</b>	
	Large print or Braille materials or large print computer	09
	Books on tape	10
	Use of computer or spell checker in class or during test taking	11
	Computer software designed for students with disabilities	12
	Computer hardware adapted for student's needs (e.g., alternative keyboard, switch interface)	13
	Special use of calculator (e.g., use for tests that other students don't have)	14
4	<b>Human aides</b>	
	A reader or interpreter	15
	Note taker in class	16
	A personal aide or instructional assistant to help you in class	17
	Tutor	18
	Support person to monitor academic progress and help with managing academic workload	19
5	<b>Out-of-classroom learning supports</b>	
	A behavior management program	20
	Help with learning strategies or study skills (e.g., writing center)	21
	Support group for students with disabilities	22
	Early registration	23
6	<b>Physical adaptations in classrooms</b>	
	Physical changes to the classroom, special desks	24
	Changes to equipment, like different lab equipment in a science class	25
7	<b>Independent living supports</b>	
	Transportation assistance (i.e., to get to classes)	26
	Housing assistance (e.g., modified living arrangements)	27
	Orientation and mobility services	28
	Social activities for students with disabilities	29
	Food service arrangements or accommodations	30
	Medical supports (e.g., ????)	31
8	<b>Therapies</b>	
	Psychological or mental health services or counseling	32
	Social work services	33
	Occupational therapy or life skills training	34
9	<b>Service coordination or case management</b>	35
10	<b>Childcare</b>	36
11	<b>Other. Specify:</b> _____	37
	DON'T KNOW	-1
	REFUSED	-2

NOTE: THE FOLLOWING PROBES ARE IMPLEMENTED SO AS NOT TO DUPLICATE PROBES FOR YOUTH WITH MORE THAN ONE TYPE OF DISABILITY.

**CHECKPOINT:**

IF NO RESPONSES IN CATEGORY 5: Have there been any supports for you outside of class, like a support group for students with disabilities?

IF NO RESPONSES IN CATEGORY 4: Has there been any person assigned to help you with your work, like a person who helps you with study skills, a tutor, or someone who takes notes for you in class?

**CHECKPOINT: IF DISABILITY FROM SAMPLE FILE IS LD OR MR OR SPEECH OR MULTIPLE, PROBE:**

IF NO RESPONSES IN CATEGORY 1: Has YOUTH had any accommodations in how you take tests, like more time to take tests, or a different setting to take tests?

IF NO RESPONSES IN CATEGORY 2: Has YOUTH had any accommodations in how you handle class assignments, like having more time to finish assignments or getting different assignments?

IF NO RESPONSES IN CATEGORY 3: Has YOUTH been allowed to use any different kinds of technology in class because of a disability, like using a calculator in math class when other students don't get to use one?

**CHECKPOINT: IF DISABILITY IS ORTHOPEDIC, OHI, MULTIPLE, VISUAL, OR DEAF/BLIND, PROBE:**

IF NO RESPONSES IN CATEGORY 4: Has there been any person assigned to help you, like a person who helps you get between classes, a tutor, or someone who takes notes for you in class?

IIF NO RESPONSES IN CATEGORY 6: Have there been any adaptations to your classrooms, like you having a special desk or different equipment because of a disability?

IF NO RESPONSES IN CATEGORY 7: Has YOUTH had any services or supports to help you live or get around at school, like help with transportation or special campus housing or dining arrangements?

**CHECKPOINT: IF DISABILITY IS HEARING IMPAIRED, PROBE:**

IF NO RESPONSES IN CATEGORY 4. Has there been any person assigned to help you, like a sign language interpreter?

**CHECKPOINT: IF DISABILITY IS OHI PROBE:**

IF NO RESPONSES IN CATEGORY 7: Do you have any special medical support services at school because of your health problem or disability, like ????

IF NO RESPONSES IN CATEGORY 6: Have there been any adaptations to your classrooms, like a special desk or different equipment?

IF NO RESPONSES IN CATEGORY 7: Has YOUTH had any services or supports to help you live or get around at school, like help with transportation or special campus housing or dining arrangements?

NLTS

K7j. Has YOUTH gotten a diploma, certificate, or license from a vocational, business, or technical school?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

K7k. How long was the program that [he/she] took that led to this diploma, certificate or license?

NUMBER	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT: IF D4b2 NE 1 (NOT GOING NOW) GO TO K8a.  
IF STILL GOING (D4b2=1), GO TO K7l.**

NLTS

K7l. Are you working toward [IF K7j NE 1: a] [IF K7j=1: another] diploma, certificate, or license from this work?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**4-YEAR COLLEGE**

**CHECKPOINT:** IF PARENT SAID EARLIER TOOK CLASSES IN 4 YEAR COLLEGE (D4a3=1) GO TO K9A. ELSE GO TO CHECKPOINT BEFORE L1a.

NLTS

K8a. Earlier you said that YOUTH had taken classes from a 4-year college.

About how long after leaving high school was it before [he/she] started going to a 4-year college or university?

_____ NUMBER	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT:** IF EARLIER SAID IS NOT GOING TO A 4-YEAR COLLEGE NOW (D4b3=2), GO TO K8b. ELSE GO TO K8c.

K8b. You said that YOUTH was not going to college now. Why did [he/she] stop going? DO NOT READ CATEGORIES. CODE ALL THAT APPLY.

COMPLETED PROGRAM/ RECEIVED DEGREE/GRADUATED	1
CHANGED SCHOOLS, WENT TO A DIFFERENT SCHOOL	2
TRANSPORTATION PROBLEMS	3
DIDN'T GET SERVICES NEEDED	4
TOO EXPENSIVE/COULDN'T AFFORD IT	5
DIDN'T HAVE TIME; SCHEDULE CONFLICTS; CONFLICTED WITH OTHER DEMANDS (E.G., JOB)	6
POOR GRADES/NOT DOING WELL IN SCHOOL	7
DIDN'T LIKE SCHOOL	8
WANTED/NEEDED TO FIND A JOB	9
OFFERED A JOB/CHOSE TO WORK	10
WANTED TO ENTER MILITARY	11
DIDN'T GET INTO THE PROGRAM [HE/SHE] WANTED	12
ILLNESS/DISABILITY; TOO SICK TO GO	13
GOT MARRIED	14
GOT PREGNANT OR HAD A CHILD	15
MOVED	16
SCHOOL TOO DANGEROUS	17
WANTED TO TRAVEL	18
FRIENDS WEREN'T IN SCHOOL/WERE DROPPING OUT	19
COULDN'T GET ALONG WITH TEACHERS	20
COULDN'T GET ALONG WITH OTHER STUDENTS	21
COULDN'T GET CHILDCARE	22
PARENTS/FAMILY DIDN'T WANT YOUTH TO GO	23
OTHER (SPECIFY)	24
DON'T KNOW	-1
REFUSED	-2

K8c. [IF D4b3 NE 2: Has YOUTH been enrolled] [IF D4b3=2: was [he/she] enrolled] steadily during the school year, or [IF D4b3 NE 2: has YOUTH been enrolled] [IF D4b3=2: was [he/she] enrolled] off and on, taking classes some semesters or quarters but not others?

STEADILY	1
OFF AND ON	2
DON'T KNOW	-1
REFUSED	-2

NLTS

K8d. [IF D4b3 NE 1: Has YOUTH gone] [IF D4b3=1: Is YOUTH going] there full time or part time? IF ASKED, BY FULL TIME, WE MEAN TAKING A FULL COURSE LOAD OF 12 CREDITS OR MORE AT A TIME OR BEING IN CLASS AT LEAST 12 HOURS PER WEEK.

FULL TIME	1
PART TIME	2
BOTH, SOMETIMES ONE, SOMETIMES OTHER	3
DON'T KNOW	-1
REFUSED	-2

K8e. [IF D4b3 NE 1: What was] [IF D4b3=1: What is] [his/her] major or primary course of study in a 4-year college or university? CODE ALL THAT APPLY. FIX CATEGORIES.

AGRICULTURE, HORTICULTURE, VITICULTURE, FORESTRY	01
ARTS, DRAMA, DANCE, MUSIC, GRAPHIC DESIGN/ARTS, FASHION DESIGN	02
COMMUNICATIONS, JOURNALISM, TV/RADIO, ENTERTAINMENT INDUSTRY	03
BUSINESS, MARKETING, MANAGEMENT	04
COMPUTER SCIENCE, PROGRAMMING, ARTIFICIAL INTELLIGENCE, INFORMATION TECHNOLOGIES	05
EDUCATION, TEACHING, CHILD DEVELOPMENT, EARLY CHILDHOOD EDUCATION, HOME ECONOMICS	06
ENGLISH, LITERATURE, LIBRARY SCIENCE	07
HISTORY, POLITICAL SCIENCE, ECONOMICS, SOCIOLOGY, PSYCHOLOGY, HUMANITIES, PUBLIC POLICY, PHILOSOPHY, RELIGION, URBAN STUDIES, WOMEN'S STUDIES, AMERICAN STUDIES, ETHNIC STUDIES, INTERNATIONAL RELATIONS, SOCIAL SCIENCES	08
LIBERAL ARTS, GENERAL STUDIES	09
MATHEMATICS, STATISTICS	10
PRE-MED, NURSING, PUBLIC HEALTH, PHYSICAL THERAPY, RECREATION THERAPY, PREVET	11
SCIENCE, BIOLOGY, EARTH SCIENCE, GEOLOGY, PHYSICS, CHEMISTRY, ENVIRONMENTAL SCIENCE	12
POLICE SCIENCE, CRIMINAL JUSTICE	13
ENGINEERING, ELECTRICAL, MECHANICAL, CHEMICAL	14
FOREIGN LANGUAGE	15
UNDECLARED, UNDECIDED	16
OTHER, SPECIFY _____	17
DON'T KNOW	-1
REFUSED	-2

K8f. [IF D4b3=1: Does] [IF D4b3 NE 1: Did] YOUTH have a tutor or [IF D4b3=1: do] [IF D4b3 NE 1: did] [he/she] ever go to a study center or writing center at school to get help with your school work?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF PARENT ASSERTS A DISABILITY (SAMPLE FILE OR B1a NE OO) ASK K8g. ELSE, GO TO K8i.

K8g. Did [he/she] tell the school that [he/she] has a disability ... READ CATEGORIES. CODE ONE RESPONSE.

GO TO K8h	Before you enrolled there	1
	After you enrolled, or	2
GO TO K8K	Has YOUTH not told them at all?	3
DON'T READ	DON'T KNOW	-1
GO TO K8h	REFUSED	-2

K8h. [IF D4b3 NE 1, Did YOUTH receive] [IF D4b3=1, H as YOUTH received] any services, accommodations, or other help from the school, like a tutor or more time to take tests, because [he/she] has any kind of learning problem, disability, or other special need?

GO TO K8j	YES	1
GO TO K8i	NO	2
	DON'T KNOW	-1
	REFUSED	-2

K8i. [IF D4b3 NE 1: Did [he/she] ask or apply] [IF D4b3=1: Has YOUTH asked or applied] for any services, accommodations, or other help from the school?

GO TO K8k	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

K8j. What services, accommodations, or other help has YOUTH received? IF HAS ATTENDED MORE THAN ONE 2-YEAR, JUNIOR, OR COMMUNITY COLLEGE, WE WANT TO KNOW ABOUT SERVICES FROM ANY OF THEM.

1	<b>Testing Accommodations</b>	
	More time in taking tests	01
	Having tests and other materials read to youth	02
	Different tests	03
	Different grading standards	04
	Different setting to take tests	05
	Instructions given in sign language or manual communication	06
2	<b>Accommodations in assignments</b>	
	Additional time to finish assignments	07
	Different assignments, like shorter assignments or different lab assignments in a science class	08
3	<b>Materials/technology adaptations</b>	
	Large print or Braille materials or large print computer	09
	Books on tape	10
	Use of computer or spell checker in class or during test taking	11
	Computer software designed for students with disabilities	12
	Computer hardware adapted for student's needs (e.g., alternative keyboard, switch interface)	13
	Special use of calculator (e.g., use for tests that other students don't have)	14
4	<b>Human aides</b>	
	A reader or interpreter	15
	Note taker in class	16
	A personal aide or instructional assistant to help you in class	17
	Tutor	18
	Support person to monitor academic progress and help with managing academic workload	19
5	<b>Out-of-classroom learning supports</b>	
	A behavior management program	20
	Help with learning strategies or study skills (e.g., writing center)	21
	Support group for students with disabilities	22
	Early registration	23
6	<b>Physical adaptations in classrooms</b>	
	Physical changes to the classroom, special desks	24
	Changes to equipment, like different lab equipment in a science class	25
7	<b>Independent living supports</b>	
	Transportation assistance (i.e., to get to classes)	26
	Housing assistance (e.g., modified living arrangements)	27
	Orientation and mobility services	28
	Social activities for students with disabilities	29
	Food service arrangements or accommodations	30
	Medical supports (e.g., ????)	31
8	<b>Therapies</b>	
	Psychological or mental health services or counseling	32
	Social work services	33
	Occupational therapy or life skills training	34
9	<b>Service coordination or case management</b>	35
10	<b>Childcare</b>	36
11	<b>Other. Specify: _____</b>	37
	DON'T KNOW	-1
	REFUSED	-2

NOTE: THE FOLLOWING PROBES ARE IMPLEMENTED SO AS NOT TO DUPLICATE PROBES FOR YOUTH WITH MORE THAN ONE TYPE OF DISABILITY.

**CHECKPOINT:**

IF NO RESPONSES IN CATEGORY 5: Have there been any supports for you outside of class, like a support group for students with disabilities?

IF NO RESPONSES IN CATEGORY 4: Has there been any person assigned to help you with your work, like a person who helps you with study skills, a tutor, or someone who takes notes for you in class?

**CHECKPOINT: IF DISABILITY FROM SAMPLE FILE IS LD OR MR OR SPEECH OR MULTIPLE, PROBE:**

IF NO RESPONSES IN CATEGORY 1: Has YOUTH had any accommodations in how you take tests, like more time to take tests, or a different setting to take tests?

IF NO RESPONSES IN CATEGORY 2: Has YOUTH had any accommodations in how you handle class assignments, like having more time to finish assignments or getting different assignments?

IF NO RESPONSES IN CATEGORY 3: Has YOUTH been allowed to use any different kinds of technology in class because of a disability, like using a calculator in math class when other students don't get to use one?

**CHECKPOINT: IF DISABILITY IS ORTHOPEDIC, OHI, MULTIPLE, VISUAL, OR DEAF/BLIND, PROBE:**

IF NO RESPONSES IN CATEGORY 4: Has there been any person assigned to help you, like a person who helps you get between classes, a tutor, or someone who takes notes for you in class?

IIF NO RESPONSES IN CATEGORY 6: Have there been any adaptations to your classrooms, like you having a special desk or different equipment because of a disability?

IF NO RESPONSES IN CATEGORY 7: Has YOUTH had any services or supports to help you live or get around at school, like help with transportation or special campus housing or dining arrangements?

**CHECKPOINT: IF DISABILITY IS HEARING IMPAIRED, PROBE:**

IF NO RESPONSES IN CATEGORY 4. Has there been any person assigned to help you, like a sign language interpreter?

**CHECKPOINT: IF DISABILITY IS OHI PROBE:**

IF NO RESPONSES IN CATEGORY 7. Do you have any special medical support services at school because of your health problem or disability, like ????

IF NO RESPONSES IN CATEGORY 6: Have there been any adaptations to your classrooms, like a special desk or different equipment?

IF NO RESPONSES IN CATEGORY 7: Has YOUTH had any services or supports to help you live or get around at school, like help with transportation or special campus housing or dining arrangements?

K8j1. [IF K8h=1 ADD: Besides what the school had available] [IF D4b3 NE 1: Had:] [IF D4b3=1 Has] YOUTH gotten any services or help on [his/her] own?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

K8k. Has YOUTH gotten a diploma, certificate, or license from a 4-year college or university?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT: IF D4b3 NE1 (NOT GOING NOW) GO TO CHECKPOINT BEFORE L1. IF STILL GOING (D4b3=1), GO TO K81.**

NLTS

K8l. Is [he/she] working toward [IF K8k NE 1: a] [IF K8k=1: another] diploma, certificate, or license from this work?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**L. EMPLOYMENT OUTCOMES.**

**SECTION OUTLINE:**

- L1- IN SCHOOL - SCHOOL SPONSORED
- L2- IN SCHOOL - ANY JOB IN PAST 2 YEARS
- L3- IN SCHOOL - JOB NOW
- L4- IN SCHOOL - MOST RECENT JOB IF NONE NOW
- L5- IN SCHOOL - YOUTH FIRED
- L6- OUT OF SCHOOL - ANY JOB IN PAST 2 YEARS
- L7- OUT OF SCHOOL - ALL CURRENT JOBS
- L8- OUT OF SCHOOL - ONE CURRENT JOB
- L9- OUT OF SCHOOL - LOOKING FOR WORK BEFORE CURRENT JOB
- L10-OUT OF SCHOOL - PREVIOUS JOB FOR THOSE WORKING NOW
- L11-OUT OF SCHOOL - MOST RECENT JOB IF NO JOB
- L12-OUT OF SCHOOL - LOOKED FOR WORK BEFORE PREVIOUS JOB
- L13-OUT OF SCHOOL - LOOKED FOR JOB NOW
- L14-OUT OF SCHOOL - FIRED IN PAST 2 YEARS

**CHECKPOINT 1:** IF YOUTH IS IN SECONDARY SCHOOL IN PAST SCHOOL YEAR (D1a OR D2a = 1), GO TO CHECKPOINT 2 BEFORE L1, ELSE GO TO L12a.

**CHECKPOINT 2:** IF YOUTH HAS NEVER BEEN IN SCHOOL (D6a=5), GO TO L2a.  
 IF D2b=1, 2, 5, 6, 7, OR 8 (JUVENILE FACILITY, HOSPITAL, HOME SCHOOL, HOMEBOUND INSTRUCTION), GO TO CHECKPOINT BEFORE L2a.  
 IF YOUTH IS IN SCHOOL (D1a=1) AND YOUTH IS IN 9TH GRADE OR ABOVE (D1o=9-13), ASK L1a. IF YOUTH IS IN LESS THAN 9TH GRADE, GO TO L2a.  
 IF YOUTH IS IN AN UNGRADED CLASS AND IS 14 YEARS OLD OR OLDER, ASK L1a. ELSE ASK L1a.

**IN SCHOOL – SCHOOL SPONSORED**

Now, I would like to ask a few questions about [YOUTH’S] work experience.

L1a. During the past 12 months, did [YOUTH] participate in any school sponsored work activities, like a work study job, an internship or a school-based business?

	YES	1
GO TO CHECKPOINT BEFORE L2a	NO	2
	DON'T KNOW	-1
	REFUSED	-2

L1b. Did [he/she] get school credit for this?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

L1c. Did [YOUTH] get paid for this work? CODE ONE.

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

## NLTS

- L1d. What kind of work has [he/she] done on [his/her] school sponsored job? (IF TYPE OF WORK IS UNCLEAR, PROBE: Can you tell me a little about the place (NAME) did this work? DO NOT READ CATEGORIES. CODE ONE. IF MORE THAN ONE SCHOOL RELATED JOB CODE MOST RECENT JOB, IF MORE THAN ONE CURRENT SCHOOL RELATED JOB, CODE JOB WHERE CHILD SPENDS THE MOST TIME.

ASSEMBLY WORK, SORTING, STUFFING	1
ANIMAL CARE – E.G., DOG WALKING, VETERINARY HELPER	2
CAMP COUNSELOR	3
CASHIER – AT GROCERY, FAST FOOD PLACE, ETC.	4
CHILD CARE, INCLUDING BABYSITTING, MOTHER'S HELPER	5
CLEANING – E.G., JANITOR, MAID	6
CLERICAL – E.G., FILING, RECEPTIONIST, SECRETARY, TYPIST (INCLUDES: WORKING IN SCHOOL OFFICE)	7
COMPUTER SUPPORT – E.G., DATA ENTRY, PROGRAMMING, WEB PAGE DEVELOPMENT	8
DELIVERY – E.G., OF FOOD, PRESCRIPTIONS, NEWSPAPERS	9
FARM LABORER – ANIMALS AND FIELDS	10
FINANCIAL SERVICES- BANKTELLER	11
FOOD SERVICE – BUSBOY, WAITER, BAKER, COOK	12
GARDENING AND GROUNDS MAINTENANCE – LAWN MOWING, GROUNDSKEEPING, HORTICULTURE	13
GAS STATION ATTENDANT	14
HEALTH CARE – PERSONAL CARE ATTENDANT, NURSE'S AIDE	15
MARKETING ADVERTISING	16
MECHANIC (AUTO REPAIR)	17
RETAIL SALES	18
SKILLED LABOR APPRENTICE – PLUMBER, CARPENTER, ELECTRICIAN	19
SORTING, STUFFING	21
SPORTS RELATED – CADDY, UMPIRE, REFEREE, COACH, LIFEGUARD, TEACHING A SPORT	22
STOCK CLERKS – GROCERY STORE, DRUG STORE	23
USHER – MOVIE THEATER	24
OTHER, SPECIFY _____	25
DON'T KNOW	-1
REFUSED	-2

**IN-SCHOOL YOUTH, ANY JOB OTHER THAN SCHOOL SPONSORED WORK ACTIVITY**

**CHECKPOINT:** IF YOUTH HAS A SCHOOL SPONSORED JOB (L1a=1), SAY: My next questions are about paid work other than school sponsored work activities, such as work study jobs, internships and school based business. ELSE BEGIN AT L2a.

NLTS

L2a. At any time during the past 2 Years, did YOUTH do any work for pay, other than work around the house [IF L1a=1: or a school sponsored job]? That could include being a babysitter or working for a neighbor. CODE ONE.

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

L2b. Did [he/she] do this work only during the summer, during the school year, or both? IF ASKED, SCHOOL YEAR IS FROM SEPTEMBER TO MAY. CODE ONE RESPONSE.

GO TO L2c	ONLY DURING THE SUMMER	1
GO TO L2d	ONLY DURING THE SCHOOL YEAR	2
GO TO L2b	BOTH	3
GO TO L3a	DON'T KNOW	-1
	REFUSED	-2

L2c. About how many hours a week has [he/she] usually worked during the summer? IF MORE THAN ONE JOB, COMBINE ALL JOBS. IF ASKED AND IF INTERVIEWING DURING THE SUMMER, IF YOUTH IS WORKING THIS SUMMER AND WORKED LAST SUMMER, CODE THIS SUMMER. IF WORKED LESS THAN 1 HOUR PER WEEK, CODE AS 1 HOUR. ENTER NUMBER AND/OR CODE.

IF L2c=1 GO TO L3a IF L2c=3 GO TO L2d	_____	HOURS PER WEEK	1
	NUMBER OF	HOURS PER MONTH	2
		DON'T KNOW	-1
		REFUSED	-2

L2d. About how many hours a week has [he/she] usually worked during the school year? IF MORE THAN ONE JOB, COMBINE ALL JOBS. IF CHILD IS NO LONGER IN SCHOOL, IF ASKED, WE MEAN DURING SEPTEMBER TO MAY. IF YOUTH WORKED DIFFERENT HOURS IN 2 SCHOOL YEARS CODE MOST RECENT SCHOOL YEAR. IF WORKED LESS THAN 1 HOUR PER WEEK CODE 1 HOUR. ENTER NUMBER AND/OR CODE.

_____	HOURS PER WEEK	1
NUMBER OF	HOURS PER MONTH	2
	DON'T KNOW	-1
	REFUSED	-2

**IN-SCHOOL YOUTH, HAS CURRENT JOB OTHER THAN SCHOOL SPONSORED JOB**

NLTS

L3a. Does YOUTH have a paid job now, other than work around the house [IF L1a=1: or a school-sponsored job]?

GO TO L3b	YES	1
GO TO L4a	NO	2
	DON'T KNOW	-1
	REFUSED	-2

L3b. How many different paid jobs does [he/she] have now?

_____	
NUMBER OF JOBS	
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT: IF L3b IS LESS THAN OR EQUAL TO 1 GO TO L3e. ELSE, GO TO L3c.**

L3c. Thinking about all the jobs [he/she] has now, [IF L1a=1: not counting [his/her] work study job] about how many hours a week does [he/she] usually work?

GO TO CHECKPOINT	_____	
	NUMBER OF HOURS A WEEK	
GO TO L3d	DON'T KNOW	-1
	REFUSED	-2

L3d. Taking all [his/her] jobs together, [IF L1a=1: not counting [his/her] work study job] do you usually work full time or part time? IF ASKED, FULL TIME IS 35 HOURS OR MORE PER WEEK.

FULL TIME	1
PART TIME	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF L3b>1, SAY: Please think of the job where YOUTH spends the most time.

L3e. What kind work does YOUTH do at this job? DO NOT READ CATEGORIES. IF MORE THAN ONE JOB, CODE JOB WHERE YOUTH SPENDS THE MOST TIME. RECORD ONLY ONE CODE. IF TYPE OF WORK IS UNCLEAR, PROBE: Can you tell me a little about the place you have done this work? What kinds of things have you done there?

ASSEMBLY WORK, SORTING, STUFFING	1
ANIMAL CARE – E.G., DOG WALKING, VETERINARY HELPER	2
CAMP COUNSELOR	3
CASHIER – AT GROCERY, FAST FOOD PLACE, ETC.	4
CHILD CARE, INCLUDING BABYSITTING, MOTHER'S HELPER	5
CLEANING – E.G., JANITOR, MAID	6
CLERICAL – E.G., FILING, RECEPTIONIST, SECRETARY, TYPIST (INCLUDES: WORKING IN SCHOOL OFFICE)	7
COMPUTER SUPPORT – E.G., DATA ENTRY, PROGRAMMING, WEB PAGE DEVELOPMENT	8
DELIVERY – E.G., OF FOOD, PRESCRIPTIONS, NEWSPAPERS	9
HEALTH CARE – PERSONAL CARE ATTENDANT, NURSE'S AIDE	10
FARM LABORER – ANIMALS AND FIELDS	11
FINANCIAL SERVICES- BANKTELLER	
FOOD SERVICE – BUSBOY, WAITER, BAKER, COOK	12
GARDENING AND GROUNDS MAINTENANCE – LAWN MOWING, GROUNDSKEEPING, HORTICULTURE	13
GAS STATION ATTENDANT	14
MARKETING ADVERTISING	15
MECHANIC (AUTO REPAIR)	16
RETAIL SALES	17
SKILLED LABOR APPRENTICE – PLUMBER, CARPENTER, ELCTRICIAN	18
SORTING, STUFFING	19
SPORTS RELATED – CADDY, UMPIRE, REFEREE, COACH, LIFEGUARD, TEACHING A SPORT	20
STOCK CLERKS – GROCERY STORE, DRUG STORE	21
USHER – MOVIE THEATER	22
OTHER, SPECIFY _____	23
DON'T KNOW	-1
REFUSED	-2

L3f. About how much is [he/she] paid for this job? PROBE: Is that per hour? IF ASKED, WE WANT PAY BEFORE TAXES OR DEDUCTIONS. ENTER NUMBER AND/OR CODE ONE.

\$ _____ PAY PER:	HOUR	1
	WEEK	2
	MONTH	3
	YEAR	4
	MINIMUM WAGE	0
	DON'T KNOW	-1
	REFUSED	-2

L3g. How does [he/she] usually get to this job? CODE ONE RESPONSE. IF MENTIONS MORE THAN ONE, PROBE FOR MOST COMMON MODE OF TRANSPORTATION TO WORK.

GO TO L5	WALKS OR RIDES A BIKE	1
	DRIVES [HIM/HER]SELF	2
	GETS RIDE FROM FAMILY MEMBER	3
	GETS RIDE FROM FRIEND/COWORKER	4
	CARPOOLS	5
	TAKES PUBLIC TRANSPORTATION, E.G., BUS, TRAIN, SUBWAY, TAXI	6
	SERVICE AGENCY PROVIDES TRANSPORTATION	7
	USES DIAL-A-VAN SERVICE	8
	OTHER. SPECIFY: _____	9
	DON'T KNOW	-1
	REFUSED	-2

**MOST RECENT JOB OF IN-SCHOOL YOUTH NOT WORKING NOW (L2a=1 AND L3a NE 1)**

**CHECKPOINT:** IF L2a=1 AND L3 NE 1 GOT TO L4a. ELSE GO TO L5.

L4a. Please think of the last job YOUTH had—the one [he/she] had most recently [IF L1a=1, other than [his/her] school sponsored job]. What kind work did [he/she] do at this job? DO NOT READ CATEGORIES. RECORD ONLY ONE CODE. IF TYPE OF WORK IS UNCLEAR, PROBE: Can you tell me a little about the place [he/she] has done this work? What kinds of things has [he/she] done there? IF YOUTH HAD MORE THAN ONE JOB AT THE SAME TIME OF [HIS/HER] MOST RECENT JOB, SAY: Please tell me about the job where [he/she] spent the most time.

ASSEMBLY WORK, SORTING, STUFFING	1
ANIMAL CARE – E.G., DOG WALKING, VETERINARY HELPER	2
CAMP COUNSELOR	3
CASHIER – AT GROCERY, FAST FOOD PLACE, ETC.	4
CHILD CARE, INCLUDING BABYSITTING, MOTHER’S HELPER	5
CLEANING – E.G., JANITOR, MAID	6
CLERICAL – E.G., FILING, RECEPTIONIST, SECRETARY, TYPIST (INCLUDES: WORKING IN SCHOOL OFFICE)	7
COMPUTER SUPPORT – E.G., DATA ENTRY, PROGRAMMING, WEB PAGE DEVELOPMENT	8
DELIVERY – E.G., OF FOOD, PRESCRIPTIONS, NEWSPAPERS	9
FARM LABORER – ANIMALS AND FIELDS	10
FINANCIAL SERVICES- BANKTELLER	11
FOOD SERVICE – BUSBOY, WAITER, BAKER, COOK	12
GARDENING AND GROUNDS MAINTENANCE – LAWN MOWING, GROUNDSKEEPING, HORTICULTURE	13
GAS STATION ATTENDANT	14
HEALTH CARE – PERSONAL CARE ATTENDANT, NURSE’S AIDE	15
MARKETING ADVERTISING	16
MECHANIC (AUTO REPAIR)	17
RETAIL SALES	18
SKILLED LABOR APPRENTICE – PLUMBER, CARPENTER, ELECTRICIAN	19
SORTING, STUFFING	21
SPORTS RELATED – CADDY, UMPIRE, REFEREE, COACH, LIFEGUARD, TEACHING A SPORT	22
STOCK CLERKS – GROCERY STORE, DRUG STORE	23
USHER – MOVIE THEATER	24
OTHER, SPECIFY _____	25
DON’T KNOW	-1
REFUSED	-2

NLTS

L4b. About how much was YOUTH paid for that job? PROBE: Is that per hour? IF ASKED, WE WANT PAY BEFORE TAXES OR DEDUCTIONS. ENTER NUMBER AND/OR CODE ONE.

\$ _____ PAY PER:	HOUR	1
	WEEK	2
	MONTH	3
	YEAR	4
	MINIMUM WAGE	0
	DON'T KNOW	-1
	REFUSED	-2

L4c. How did [he/she] usually get to that job? CODE ONE RESPONSE. IF MENTIONS MORE THAN ONE, PROBE FOR MOST COMMON MODE OF TRANSPORTATION TO WORK.

WALKED OR RODE A BIKE	1
DROVE [HIM/HER]SELF	2
GOT RIDE FROM FAMILY MEMBER	3
GOT RIDE FROM FRIEND/COWORKER	4
CARPOOLED	5
TOOK PUBLIC TRANSPORTATION, E.G., BUS, TRAIN, SUBWAY, TAXI	6
SERVICE AGENCY PROVIDED TRANSPORTATION	7
USED DIAL-A-VAN SERVICE	8
OTHER. SPECIFY: _____	9
DON'T KNOW	-1
REFUSED	-2

L4d. About how many hours did [he/she] work per week when [he/she] had that job, including any other jobs [he/she] might have had at the same time?

_____	
NUMBER OF HOURS A WEEK	
DON'T KNOW	-1
REFUSED	-2

L5. Has YOUTH been fired from a job at any time in the past 2 years?

GO TO SECTION M	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

ALL SHOULD GO TO SECTION M – HOUSEHOLD

**THIS SECTION FOR THOSE WHO ARE NOT IN HIGH SCHOOL NOW**

**OUT OF SCHOOL WORK STATUS—2 YEARS**

**CHECKPOINT:** ASK THIS SECTION IF D1a OR D2a NE 1 (OUT OF SCHOOL) OR OUT OF SCHOOL IN PRIOR WAVE.

L6a. At any time in the past 2 years did [he/she] do any work for pay, other than work around the house? CODE ONE.

	YES	1
GO TO SECTION M	NO	2
	DON'T KNOW	-1
	REFUSED	-2

L6b. How many paid jobs has [he/she] had altogether in the past 2 years?

_____	
NUMBER	
DON'T KNOW	-1
REFUSED	-2

L6c. What is the longest time [he/she] worked at a particular job in the past 2 years?

_____	
NUMBER	
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF STILL IN HIGH SCHOOL IN PRIOR WAVE BUT NOT NOW (D1a or D2a NE 1), GO TO L6d. ELSE GO TO L7a

NLTS

L6d. How many paid jobs has YOUTH had since leaving high school?

_____	
NUMBER	
DON'T KNOW	-1
REFUSED	-2

NLTS

L6e. What is the longest amount of time [he/she] has worked at a particular job since leaving high school?

_____	
NUMBER	
DON'T KNOW	-1
REFUSED	-2

**ALL CURRENT JOBS**

NLTS

L7a. Does YOUTH have a paid job **now**, other than work around the house?

	YES	1
GO TO L11a	NO	2
	DON'T KNOW	-1
	REFUSED	-2

NLTS

L7b. How many different paid jobs does [he/she] have now?

_____	
NUMBER	
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT: IF L7b=1 [HAS ONE JOB] GO TO L8a.**

NLTS

L7c. Thinking about all the jobs [he/she] has, about how many hours a week does [he/she] usually work?

GO TO L8a	_____	
	HOURS	
GO TO L7d	DON'T KNOW	-1
	REFUSED	-2

NLTS

L7d. Taking all [his/her] jobs together, does [he/she] usually work full time or part time?  
IF ASKED, FULL TIME IS 35 HOURS OR MORE PER WEEK.

FULL TIME	1
PART TIME	2
DON'T KNOW	-1
REFUSED	-2

**OUT OF SCHOOL YOUTH, ONE CURRENT JOB**

NLTS

L8a. [IF L7b > 1, SAY: My next questions are about the job where YOUTH spends the most time.] What kind of work does [he/she] do in this job? DO NOT READ CATEGORIES. IF TYPE OF WORK IS UNCLEAR, PROBE: Can you tell me a little about the place [he/she] does this work? What kinds of things does [he/she] do there?

RECORD VERBATIM ANSWER: \_\_\_\_\_

OR:

DON'T KNOW	-1
REFUSED	-2

NLTS

L8b. About how many hours a week does [he/she] usually work at this job? IF RESPONDENT SAYS HOURS VARY, ASK FOR HOURS IN A TYPICAL WEEK. IF RESPONDENT CAN'T ANSWER IN GENERAL, ASK FOR HOURS IN THE MOST RECENT WEEK [HE/SHE] WORKED AT THIS JOB.

GO TO CHECKPOINT BEFORE L8d.	_____	
	HOURS	
GO TO L8e.	DON'T KNOW	-1
	REFUSED	-2

NLTS

L8c. Does YOUTH usually work full time or part time? IF ASKED, FULL TIME IS 35 HOURS OR MORE PER WEEK.

	FULL TIME	1
	PART TIME	2
GO TO L8e	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT:** IF L8b < 35 OR L8c NE 1, GO TO L8d. ELSE, GO TO L8e.

NLTS

L8d. Is YOUTH working part time because [he/she] wants to, or would [he/she] rather work full time?

WANT TO WORK PART TIME	1
RATHER WORK FULL TIME	2
DON'T KNOW	-1
REFUSED	-2

L8e. About how long has YOUTH had this job?

NUMBER OF	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

L8f. About how much is [he/she] paid at this job? PROBE IF IN DOUBT: Is that per hour? IF ASKED, WE WANT PAY BEFORE TAXES OR DEDUCTIONS. ENTER NUMBER AND/OR CODE ONE.

\$ _____ PAY PER:	HOUR	1
	WEEK	2
	MONTH	3
	YEAR	4
	MINIMUM WAGE	0
	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF YOUTH HAS BEEN AT THE JOB FOR 6 MONTHS OR LESS (L8e=6 MONTHS OR LESS) GO TO L8i. ELSE GO TO L8g.

L8g. Is [he/she] paid more now than when [he/she] started this job?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

L8h. Has [he/she] been promoted or taken on more responsibilities sine [he/she] started this job?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

L8i. As part of this job, does YOUTH get ... READ LIST. CODE ONE CATEGORY PER ITEM.

		YES	NO	DK	REF
a.	Paid vacation or sick leave,	1	2	-1	-2
b.	Health insurance, and/or	1	2	-1	-2
c.	Retirement benefits, like a 401K?	1	2	-1	-2

**CHECKPOINT:** IF PARENT ASSERTS YOUTH DOES NOT HAVE A DISABILITY (SAMPLE FILE OR B1c=2), GO TO L8o. IF YOUTH'S DISABILITY ON SAMPLE FILE IS ONLY LD AND/OR SPEECH IMPAIRED, GO TO L8k. ELSE GO TO L8j.

L8j. At [his/her] job, do most of the other workers have disabilities?

GO TO L8l	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

L8k. Did [he/she] tell [his/her] employer that [he/she] has a disability... READ CATEGORIES. CODE ONE RESPONSE.

GO TO L8l	Before [he/she] got [his/her] job	1
	After [he/she] started the job, or	2
GO TO L8o	Has [he/she] not told them at all?	3
DON'T READ	DON'T KNOW	-1
GO TO L8l	REFUSED	-2

L8l. Has [he/she] received any accommodations or other help from [his/her] employer because [he/she] have any kind of learning problem, disability, or other special need?

GO TO L8n	YES	1
	NO	2
GO TO L8m	DON'T KNOW	-1
	REFUSED	-2

L8m. Has [he/she] asked or applied for any services, accommodations, or other help from [his/her] employer?

GO TO K21	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

L8n. What accommodations or other help has [he/she] received? IF HAS ATTENDED MORE THAN ONE 2-YEAR, JUNIOR, OR COMMUNITY COLLEGE, WE WANT TO KNOW ABOUT SERVICES FROM ANY OF THEM.

	<b>NONE</b>	<b>0</b>
<b>1</b>	<b>Materials/technology adaptations</b>	
	Large print or Braille materials or large print computer	1
	Written materials on tape	2
	Computer hardware adapted for student's needs (e.g., alternative keyboard, switch interface, speech recognition software, computer peripherals)	3
	Headsets to allow hands free phone use or to magnify sound	4
	Different equipment (other than computer) or changes to equipment used on the job	5
	TTY or TTD available	6
	Altered work station	7
<b>2</b>	<b>Human aides</b>	
	A reader or interpreter	8
	Job coach—helps monitor progress, offers advice to improve performance	9
	A personal aide or assistant to help on the job	10
<b>3</b>	<b>Accommodations in assignment or supervision</b>	
	More training, training tailored to individual needs	11
	More or different supervision or mentoring	12
	Different expectations for productivity or performance	13
	Instructions are modified in form or in the way they are communicated (e.g., pictorial instructions, verbal instructions instead of/in addition to written)	14
<b>4</b>	<b>Scheduling accommodations</b>	
	Flexible times for arriving at and leaving work	15
	Slower pace for getting the job done	16
	More breaks, longer breaks	17
	More paid sick leave or paid time off for medical needs, therapy appointments, etc.	18
<b>5</b>	<b>Physical adaptations</b>	
	Rearranged equipment or furniture to improve accessibility	19
	Made changes to the building (e.g., widened doors, made restrooms accessible)	20
<b>6</b>	<b>Other supports</b>	
	Transportation assistance (e.g., to get between buildings at the work site)	21
	Parking accommodations	22
	Emergency plan accounts for disabled worker (e.g., evacuation plan)	23
	Other. Specify: _____	24
	DON'T KNOW	-1
	REFUSED	-2

NOTE: THE FOLLOWING PROBES ARE IMPLEMENTED SO AS NOT TO DUPLICATE PROBES FOR YOUTH WITH MORE THAN ONE TYPE OF DISABILITY.

**CHECKPOINT:**

IF NO RESPONSES IN CATEGORY 3: Have there been any accommodations in the training or supervision [he/she] receives or in [his/her] work assignments?

IF NO RESPONSES IN CATEGORY 4: Have there been any accommodations in [his/her] work schedule, like getting to arrive or leave work at flexible times, or getting more time to get [his/her] work done?

**CHECKPOINT: IF DISABILITY IS ORTHOPEDIC, OHI, MULTIPLE, VISUAL, OR DEAF/BLIND, PROBE:**

IF NO RESPONSES IN CATEGORY 2: Has there been any person assigned to help [him/her], like a person who helps [him/her] get around his work site or reads materials to him?

IF NO RESPONSES IN CATEGORY 1: Have there been any adaptations to the equipment [he/she] uses, like giving [him/her] a special workstation or different computers or other equipment, because of [his/her] disability?

IF NO RESPONSES IN CATEGORY 5: Have there been any adaptations to [his/her] workplace, like rearranging furniture to changing doorways or restrooms because of [his/her] disability?

IF NO RESPONSES IN CATEGORY 6: Has [he/she] had any services or supports to help [him/her] get around at work, like help with transportation or parking?

**CHECKPOINT: IF DISABILITY IS HEARING IMPAIRED, PROBE:**

IF NO RESPONSES IN CATEGORY 2. Has there been any person assigned to help [him/her], like a sign language interpreter?

L8o. How does [he/she] usually get to work? IF RESPONSE IS PROPER NAME, E.G., "WITH JIM" OR "ON BART", PROBE: Who is that? OR What is that? CODE ONE RESPONSE.

WALKS OR RIDES A BIKE	1
DRIVES [HIM/HER]SELF	2
GETS RIDE FROM FAMILY MEMBER	3
GETS RIDE FROM FRIEND/COWORKER	4
CARPOOLS	5
TAKES PUBLIC TRANSPORTATION, E.G., BUS, TRAIN, SUBWAY, TAXI	6
SERVICE AGENCY PROVIDES TRANSPORTATION	7
USES DIAL-A-VAN SERVICE	8
OTHER. SPECIFY: _____	9
DON'T KNOW	-1
REFUSED	-2

**OUT OF SCHOOL YOUTH LOOKING FOR A JOB BEFORE CURRENT JOB**

L9a. About how long did [he/she] look for a job before [he/she] found this one?

NUMBER OF	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DIDN'T REALLY LOOK FOR THE JOB	5
	DON'T KNOW	-1
	REFUSED	-2

NLTS

L9b. Did YOUTH find this job [him/her]self, or did [he/she] have help—like from a temporary agency or someone [he/she] knows?

GO TO CHECKPOINT BEFORE L10a	FOUND [HIM/HER]SELF	1
GO TO L9c	HAD HELP	2
GO TO CHECKPOINT BEFORE L10a	DON'T KNOW	-1
	REFUSED	-2

NLTS

L9c. Who helped [him/her]? Was it.... READ CATEGORIES. CODE ALL THAT APPLY.

GO TO L9d	Someone in an employment agency or other program,	1
GO TO CHECKPOINT BEFORE L10a	A teacher or someone at school,	2
	A family member,	3
	A friend or someone else you know?	4
DON'T READ GO TO CHECKPOINT BEFORE L10a	DON'T KNOW	-1
	REFUSED	-2

NLTS

L9d. Has someone from the agency or program stayed in touch with [him/her] to check on how [he/she] is doing on the job?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**PREVIOUS JOB FOR THOSE WORKING NOW**

**CHECKPOINT:** IF L6b=1 (ONLY ONE JOB IN PREVIOUS 2 YEARS) GO TO SECTION M. ELSE GO TO L10a.

NLTS

L10a. Did YOUTH have a paid job **before** the one [he/she] has now, other than work around the house [IF L1=1, or a school based job]? IF THE YOUTH HAD MORE THAN ONE PAID JOB AT THE SAME TIME BEFORE THE CURRENT JOB, WE WANT THE JOB AT WHICH [HE/SHE] SPENT THE MOST TIME.

GO TO SECTION M	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

L10b. In the job [he/she] had before, did [he/she] usually work more hours a week than the job [he/she] has now, about the same number of hours a week as now, o fewer hours a week than the job [he/she] has now? (IF STILL HAS THE JOB THAT STARTED BEFORE CURRENT JOB THAT WAS REPORTED IN L8, GO BACK TO L10a, CODE 2 AND GO TO SECTION M.)

MORE HOURS THAN NOW	1
SAME HOURS AS NOW	2
FEWER HOURS THAN NOW	3
DON'T KNOW	-1
REFUSED	-2

NLTS

L10c. When [he/she] left that job was [his/her] pay ...READ CATEGORIES. CODE ONE RESPONSE.

	More,	1
	Less, or	2
	About the same as [he/she] gets paid now?	3
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

NLTS

L10d. As part of that job, does [he/she] ge t... READ LIST. CODE ONE CATEGORY PER ITEM.

	YES	NO	DK	REF
a. Paid vacation or sick leave,	1	2	-1	-2
b. Health insurance, and/or	1	2	-1	-2
c. Retirement benefits, like 401k?	1	2	-1	-2

**CHECKPOINT:** IF PARENT ASSERTS YOUTH DOES NOT HAVE A DISABILITY (SAMPLE FILE OR B1c=2), GO TO L10f. IF YOUTH'S DISABILITY ON SAMPLE FILE IS ONLY LD AND/OR SPEECH IMPAIRED, GO TO L10f. ELSE TO L10e.

L10e. At [his/her] job, do most of the other workers have disabilities?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

L10f. When [he/she] left that job ... READ CATEGORIES. CODE ONE RESPONSE

GO TO L10g	Did [he/she] quit,	1
GO TO SECTION M	Was [he/she] fired,	2
GO TO L14a	Was [he/she] laid off, or	3
	Was it a temporary job that ended?	4
DON'T READ	DON'T KNOW	-1
GO TO L14a	REFUSED	-2

NLTS

L10g. What was the main reason YOUTH quit? CODE ONE CODE.

FOUND A BETTER JOB	1
WANTED TO LOOK FOR A BETTER JOB	2
WANTED TO START OWN BUSINESS/WORK FOR SELF	3
DIDN'T LIKE THE HOURS OR KIND OF WORK OR WORKING CONDITIONS	4
WAGES TOO LOW	5
DIDN'T GET ALONG WITH COWORKERS OR BOSS	6
WENT BACK TO SCHOOL	7
JOB INTERFERED WITH SCHOOL	8
ILLNESS OR DISABILITY INTERFERED WITH JOB	9
EMPLOYER WOULDN'T PROVIDE ACCOMMODATIONS NEEDED TO SUCCEED AT THE JOB.	10
PARENTS DIDN'T WANT YOUTH TO WORK	11
FAMILY REASONS (E.G., PREGNANCY, HAD TO CARE FOR FAMILY MEMBER)	12
MOVED	13
TRANSPORTATION PROBLEMS, TOO HARD TO GET TO THE JOB	14
CAN MAKE MORE MONEY ON DISABILITY	15
DON'T KNOW	-1
REFUSED	-2

<b>CHECKPOINT:</b> GO TO L14a.
--------------------------------

**MOST RECENT JOB, IF NO JOB NOW**

NLTS

L11a. Please think about the last job YOUTH had. What kind of work did [he/she] do in that job? DO NOT READ CATEGORIES. IF TYPE OF WORK IS UNCLEAR, PROBE: Can you tell me a little about the place [he/she] did this work? What kinds of things did [he/she] do there?

RECORD VERBATIM ANSWER: \_\_\_\_\_

OR:

DON'T KNOW	-1
REFUSED	-2

NLTS

L11b. About how many hours a week did [he/she] usually work at that job? IF RESPONDENT SAYS HOURS VARIED OR CHANGED OVER THE TIME [HE/SHE] HAD THE JOB, ASK FOR HOUR WORKED IN A TYPICAL WEEK AT THE TIME [HE/SHE] LEFT THE JOB.

GO TO CHECKPOINT	HOURS	
GO TO L33b	DON'T KNOW	-1
	REFUSED	-2

NLTS

L11c. Did [he/she] usually work full time or part time? IF ASKED, FULL TIME IS 35 HOURS OR MORE PER WEEK.

FULL TIME	1
PART TIME	2
DON'T KNOW	-1
REFUSED	-2

<b>CHECKPOINT:</b> IF L11b < 35 OR L11c NE 1, GO TO L11d. ELSE, GO TO L11e.
---

NLTS

L11d. Did YOUTH work part time because [he/she] wanted to, or would [he/she] rather have worked full time?

WANT TO WORK PART TIME	1
RATHER WORK FULL TIME	2
DON'T KNOW	-1
REFUSED	-2

L11e. About how long did [he/she] have that job?

NUMBER OF	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

NLTS

L11f. When YOUTH left that job, about how much was [he/she] paid? PROBE IF NEEDED: Is that per hour? IF ASKED, WE WANT PAY BEFORE TAXES OR DEDUCTIONS. ENTER NUMBER AND/OR CODE ONE.

\$ _____ PAY PER:	HOUR	1
	WEEK	2
	MONTH	3
	YEAR	4
	MINIMUM WAGE	0
	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF YOUTH HAS BEEN AT THE JOB FOR 6 MONTHS OR LESS (L11e=6 MONTHS OR LESS) GO TO L11i. ELSE GO TO L11g.

L11g. Was [he/she] paid more when [he/she] left that job than when [he/she] started it?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

L11h. Was [he/she] promoted or did [he/she] take on more responsibility since [he/she] started the job.

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

L11i. As part of that job, did [he/she] get ... READ LIST. CODE ONE CATEGORY PER ITEM.

	YES	NO	REF	DK
a. Paid vacation or sick leave,	1	2	-1	-2
b. Health insurance, and/or	1	2	-1	-2
c. Retirement benefits, like a 401K?	1	2	-1	-2

**CHECKPOINT:** IF PARENT ASSERTS YOUTH DOES NOT HAVE A DISABILITY (SAMPLE FILE OR B1c=2), GO TO L11o. IF YOUTH'S DISABILITY ON SAMPLE FILE IS ONLY LD AND/OR SPEECH IMPAIRED, GO TO L11k, ELSE TO L11j.

L11j. At [his/her] job, do most of the other workers have disabilities?

GO TO L11i	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

L11k. At that job did YOUTH tell [his/her] employer that [he/she] a disability... READ CATEGORIES. CODE ONE RESPONSE.

GO TO L11i	Before [he/she] got [his/her] job	1
	After [he/she] started the job, or	2
GO TO L11o	Has [he/she] not told them at all?	3
DON'T READ	DON'T KNOW	-1
GO TO L11i	REFUSED	-2

L11l. Has youth received any services, accommodations, or other help from [his/her] employer because [he/she] has any kind of learning problem, disability, or other special need?

GO TO L11n	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

L11m. Has YOUTH asked or applied for any services, accommodations, or other help from [his/her] employer because [he/she] has any kind of learning problem, disability, or other special need?

GO TO L11o	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

L11n. What accommodations, or other help has [he/she] received? IF HAS ATTENDED MORE THAN ONE 2-YEAR, JUNIOR, OR COMMUNITY COLLEGE, WE WANT TO KNOW ABOUT SERVICES FROM ANY OF THEM.

	<b>None</b>	<b>0</b>
<b>1</b>	<b>Materials/technology adaptations</b>	
	Large print or Braille materials or large print computer	1
	Written materials on tape	2
	Computer hardware adapted for student's needs (e.g., alternative keyboard, switch interface, speech recognition software, computer peripherals)	3
	Headsets to allow handsfree phone use or to magnify sound	4
	Different equipment (other than computer) or changes to equipment used on the job	5
	TTY or TTD available	6
	Altered work station	7
<b>2</b>	<b>Human aides</b>	
	A reader or interpreter	8
	Job coach—helps monitor progress, offers advice to improve performance	9
	A personal aide or assistant to help on the job	10
<b>3</b>	<b>Accommodations in assignment or supervision</b>	
	More training, training tailored to individual needs	11
	More or different supervision or mentoring	12
	Different expectations for productivity or performance	13
	Instructions are modified in form or in the way they are communicated (e.g., pictorial instructions, verbal instructions instead of/in addition to written)	14
<b>4</b>	<b>Scheduling accommodations</b>	
	Flexible times for arriving at and leaving work	15
	Slower pace for getting the job done	16
	More breaks, longer breaks	17
	More paid sick leave or paid time off for medical needs, therapy appointments, etc.	18
<b>5</b>	<b>Physical adaptations</b>	
	Rearranged equipment or furniture to improve accessibility	19
	Made changes to the building (e.g., widened doors, made restrooms accessible)	20
<b>6</b>	<b>Other supports</b>	
	Transportation assistance (e.g., to get between buildings at the work site)	21
	Parking accommodations	22
	Emergency plan accounts for disabled worker (e.g., evacuation plan)	23
	Other. Specify: _____	24
	DON'T KNOW	-1
	REFUSED	-2

NOTE: THE FOLLOWING PROBES ARE IMPLEMENTED SO AS NOT TO DUPLICATE PROBES FOR YOUTH WITH MORE THAN ONE TYPE OF DISABILITY.

**CHECKPOINT:**

IF NO RESPONSES IN CATEGORY 3: Have there been any accommodations in the training or supervision [he/she] receives or in [his/her] work assignments?

IF NO RESPONSES IN CATEGORY 4: Have there been any accommodations in [his/her] work schedule, like getting to arrive or leave work at flexible times, or getting more time to get [his/her] work done?

**CHECKPOINT: IF DISABILITY IS ORTHOPEDIC, OHI, MULTIPLE, VISUAL, OR DEAF/BLIND, PROBE:**

IF NO RESPONSES IN CATEGORY 2: Has there been any person assigned to help [him/her], like a person who helps [him/her] get around his work site or reads materials to [him/her]?

IF NO RESPONSES IN CATEGORY 1: Have there been any adaptations to the equipment [he/she] uses, like giving [him/her] a special workstation or different computers or other equipment, because of [his/her] disability?

IF NO RESPONSES IN CATEGORY 5: Have there been any adaptations to [his/her] workplace, like rearranging furniture to changing doorways or restrooms because of [his/her] disability?

IF NO RESPONSES IN CATEGORY 6: Has [he/she] had any services or supports to help [him/her] get around at work, like help with transportation or parking?

**CHECKPOINT: IF DISABILITY IS HEARING IMPAIRED, PROBE:**

IF NO RESPONSES IN CATEGORY 2. Has there been any person assigned to help [him/her], like a sign language interpreter?

NLTS

L11o. How did [he/she] usually get to work then? IF RESPONSE IS PROPER NAME, E.G., "WITH JIM" OR "ON BART", PROBE: Who was that? OR What was that? CODE ONE RESPONSE.

WALKED OR RODE A BIKE	1
DROVE [HIM/HER]SELF	2
GOT RIDE FROM FAMILY MEMBER	3
GOT RIDE FROM FRIEND/COWORKER	4
CARPOOLED	5
TOOK PUBLIC TRANSPORTATION, E.G., BUS, TRAIN, SUBWAY, TAXI	6
SERVICE AGENCY PROVIDED TRANSPORTATION	7
USED DIAL-A-VAN SERVICE	8
OTHER. SPECIFY: _____	9
DON'T KNOW	-1
REFUSED	-2

**LOOKED FOR WORK BEFORE MOST RECENT JOB**

NLTS

L12a. Did YOUTH find that job [him/her]self, or did [he/she] have help, like from a temporary agency or someone [he/she] knows?

GO TO L12d	FOUND [HIM/HER]SELF	1
GO TO L12b	HAD HELP	2
GO TO L12d	DON'T KNOW	-1
	REFUSED	-2

NLTS

L12b. Who helped [him/her]? Was it .... READ CATEGORIES. CODE ALL THAT APPLY.

GO TO L12c	Someone in an employment agency or other program,	1
GO TO L12d	A teacher or someone at school,	2
	A family member,	3
	A friend or someone else [he/she] knows?	4
DON'T READ	DON'T KNOW	-1
GO TO L12d	REFUSED	-2

NLTS

L12c. Did someone from the agency or program stay in touch with [him/her] to check on how [he/she] is doing on the job?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

L12d. When YOUTH left that job...READ CATEGORIES. CODE ONE RESPONSE.

GO TO L12e	Did [he/she] quit,	1
GO TO L13a	Was [he/she] fired,	2
	Was [he/she] laid off, or	3
	Was it a temporary job that ended?	4
DON'T READ	DON'T KNOW	-1
GO TO L13a	REFUSED	-2

NLTS

L12e. What was the main reason [he/she] quit? CODE ONE CODE.

FOUND A BETTER JOB	1
WANTED TO LOOK FOR A BETTER JOB	2
WANTED TO START OWN BUSINESS/WORK FOR SELF	3
DIDN'T LIKE THE HOURS OR KIND OF WORK OR WORKING CONDITIONS	4
WAGES TOO LOW	5
DIDN'T GET ALONG WITH COWORKERS OR BOSS	6
WENT BACK TO SCHOOL	7
JOB INTERFERED WITH SCHOOL	8
ILLNESS OR DISABILITY INTERFERED WITH JOB	9
EMPLOYER WOULDN'T PROVIDE ACCOMMODATIONS NEEDED TO SUCCEED AT THE JOB.	10
PARENTS DIDN'T WANT YOUTH TO WORK	11
FAMILY REASONS (E.G., PREGNANCY, HAD TO CARE FOR FAMILY MEMBER)	12
MOVED	13
TRANSPORTATION PROBLEMS, TOO HARD TO GET TO THE JOB	14
CAN MAKE MORE MONEY ON DISABILITY	15
DON'T KNOW	-1
REFUSED	-2

**NOT WORKING NOW—LOOKING FOR WORK**

NLTS

L13a. Is YOUTH looking for a paid job now?

GO TO L13b	YES	1
GO TO L13d	NO	2
GO TO L13c	DON'T KNOW/DON'T REMEMBER	-1
	REFUSED	-2

NLTS

L13b. About how long has [he/she] been looking for work?

NUMBER OF _____	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

NLTS

L13c. What has [he/she] done in the past month to find a job?

GO TO CHECKPOINT BEFORE L14	NOTHING IN THE PAST MONTH	0
	CHECKED WITH A STATE OR PRIVATE EMPLOYMENT AGENCY	1
	CHECKED WITH A MILITARY RECRUITER	2
	CHECKED WITH AN EMPLOYER DIRECTOR	3
	CHECKED WITH FAMILY MEMBER	4
	CHECKED WITH FRIENDS OR ACQUAINTANCES	5
	PLACE OR ANSWERED ADS	6
	LOOKED IN THE NEWSPAPER	7
	CHECKED ON THE WEB OR COMPUTER JOB LISTINGS	8
	USED A SCHOOL EMPLOYMENT AGENCY	9
	APPLIED FOR JOBS	10
	OTHER. SPECIFY: _____	11
	DON'T KNOW	-1
REFUSED	-2	

NLTS

L13d. Why has [he/she] decided not to look for work? CODE ALL THAT APPLY

YOUTH DIDN'T WANT TO LOOK/IT WAS TOO HARD TO LOOK	1
YOUTH IS HOMEMAKER, RAISING A FAMILY/WORKING IN THE HOME	2
GOING TO SCHOOL/IN A TRAINING PROGRAM	3
DOESN'T WANT TO WORK/DOESN'T NEED THE MONEY	4
DOESN'T KNOW HOW TO FIND A JOB	5
AVAILABLE JOBS AREN'T WORTH HAVING/DON'T INTEREST YOU	6
TRIED TO GET A JOB AND COUNDLN'T/NO ONE WILL HIRE YOUTH	7
AREN'T ANY JOBS AVAILABLE	8
PARENTS DON'T WANT YOUTH TO WORK	9
JOBS TOO HARD TO GET TO/TRANSPORATION PROBLEMS	10
WOULD LOSE SSI/DISABILITY/UNEMPLOYMENT OR OTHER BENEFITS	11
HAS A JOB THAT HASN'T STARTED YET/IS WAITING TO HEAR ABOUT A JOB/PROGRAM FOR WHICH [HE/SHE] HAS APPLIED	12
OTHER. SPECIFY: _____	13
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF L12d =2(FIRED AT JOB) GO TO SECTION M. ELSE GO TO L14.

**WORKED AT ALL IN PAST 2 YEARS, NO FIRED FROM JOBS DESCRIBED**

L14. Has YOUTH been fired from any job any time in the past 2 years?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**M. HOUSEHOLD CHARACTERISTICS**

**CHECKPOINT:** IF YOUTH LIVES AT HOME (A6a=1, 2, 3, OR 4) AND STILL IN HIGH SCHOOL (D1a or D2a = 1) GO TO M2. IF YOUTH IS YOUNGER THAN 16 GO TO M4. ELSE GO TO M1.

My next questions are about youth household.

M1. Does youth have a partner or spouse living with [him/her] now?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

M2. Is YOUTH ... READ CATEGORIES. CODE ALL THAT APPLY.

DO NOT READ	Engaged;	1
	Single, never married,	2
	Married, or	3
	In a marriage-like relationship?	4
	DIVORCED OR SEPARATED	5
	WIDOWED	6
	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT:** IF M1=1 Ask M3. ELSE ASK M4.

M3. Does [his/her] spouse or partner now have a paid job?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

M4. Has YOUTH [IF FEMALE: had] [IF MALE: fathered] any children in the last 2 years?

GO TO M2	Yes	1
	No	2
	DON'T KNOW	-1
	REFUSED	-2

M5. How many children has [he/she] [IF FEMALE: had] [IF MALE: fathered] in the last 2 years?

1	1
2	2
3 or more	3
DON'T KNOW	-1
REFUSED	-2

M6. [IF M5=1: Does this child] [IF M5 > 1: Do any of these children] have a disability, developmental delay, or other special need?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF YOUTH DOES NOT LIVE WITH PARENTS/ GUARDIANS [A6a NE 1, 2, 3 or 4] AND YOUTH HAS A CHILD (M4=1) OR SAMPLE FILE, GO TO M7a. ELSE GO TO CHECKPOINT BEFORE M7c.

NEILS, NSAF

M7a. My next questions are about government benefits may have received. Does [he/she] receive money from TANF (Temporary Assistance to Needy Families) or the state welfare program anytime in the past 2 years?

GO TO M7b	YES	1
	NO	2
GO TO M7c	DON'T KNOW	-1
	REFUSED	-2

NEILS, ECLSK similar

M7b. Does [he/she] now receive money from TANF (Temporary Assistance to Needy Families) or the state welfare program?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF A6a= 5.6. or 9 (YOUTH LIVES ALONE, WITH SPOUSE, OR IN MILITARY) GO TO M7c ELSE GO TO CHECKPOINT BEFORE M8a.

NEILS, NSAF

M7c. Does [he/she] receive Food Stamps anytime in the past 2 years?

GO TO M7d	YES	1
GO TO CHECKPOINT BEFORE M8a	NO	2
	DON'T KNOW	-1
	REFUSED	-2

NEILS, similar NSAF

M7d. Does [he/she] receive Food Stamps now?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT 1:** IF YOUTH IS 18 OR OLDER AND A6a = 5,6, or 9 (LIVES ALONE, SPOUSE, MILITARY) GO TO CHECKPOINT 2. ELSE GO TO SECTION N.

**CHECKPOINT 2:** IF YOUTH HAS INSURANCE AS PART OF JOB (L8ib=1 OR L10db=1 OR L11ib=1), GO TO M8d. ELSE GO TO M8a.

NEILS, NSAF

M8a. Is YOUTH now covered by any kind of health insurance?

GO TO M8b	YES	1
GO TO M9a	NO	2
	DON'T KNOW	-1
	REFUSED	-2

NEILS, NSAF

M8b. Is this private health insurance that [he/she] or a family member buys or gets as a benefit at a job?

GO TO M8d	YES	1
GO TO M8c	NO	2
	DON'T KNOW	-1
	REFUSED	-2

M8c. Is [he/she] covered by government health insurance, such as \_\_\_\_\_. (FILL IN STATE NAMES FOR MEDICAID AND OTHER LOW-INCOME INSURANCE PROGRAMS)?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NEILS, NSAF

M8d. Is any of [his/her] health insurance with an HMO (Health Maintenance Organization)? IF ASKED, AT AN HMO YOU MUST GENERALLY RECEIVE CARE FROM HMO DOCTORS; OTHERWISE THE EXPENSE IS NOT COVERED UNLESS YOU WERE REFERRED BY THE HMO.

GO TO M8f	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

NEILS, NSAF

M8e. Is any of [his/her] health insurance coverage managed care?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

M8f. Does [his/her] health insurance cover ... READ CATEGORIES. CODE ONE RESPONSE FOR EACH.

		YES	NO	DON'T KNOW	REFUSED
a.	Dental care?	1	2	-1	-2
b.	Vision care?	1	2	-1	-2
c.	Prescription medicines	1	2	-1	-2

**CHECKPOINT:** IF YOUTH IS MARRIED (M2 = 3) AND LIVES WITH SPOUSE (A6a=6) GO TO M9b. ELSE, GO TO M9a

NEILS, NHIS similar

M9a. Studies like these often group people according to income. Please tell me which group best describes YOUTH's total income in the last tax year, including salaries or other earnings, money from public assistance, retirement, and so on, for all household members, before taxes. Was [his/her] income in the past year ...

GO TO M9c	\$25,000 or less, or	1
GO TO M9d	More than \$25,000?	2
DON'T READ, GO TO M10	DON'T KNOW	-1
	REFUSED	-2

M9b. In studies like these, households are sometimes grouped according to income. Please tell me which group best describes the total income of YOUTH and [his/her] spouse in the last tax year, including salaries or other earnings, money from public assistance, retirement, and so on, for all household members, before taxes. Was their household income in the past year ...

GO TO M9c	\$25,000 or less, or	1
GO TO M9d	More than \$25,000?	2
DON'T READ, GO TO M10	DON'T KNOW	-1
	REFUSED	-2

M9c. Was it... READ CATEGORIES. CODE ONE CATEGORY.

GO TO M10		\$5,000 or less,	1
		\$5,001 to \$10,000,	3
		\$10,001 to \$15,000,	3
		\$15,001 to \$20,000, or	4
		\$20,001 to \$25,000?	5
	DON'T READ	DON'T KNOW	-1
	REFUSED	-2	

M9d. Was it ... READ CATEGORIES. CODE ONE CATEGORY.

GO TO M9e	\$50,000 or less, or	1
GO TO M9f	More than \$50,000?	2
DON'T READ, GO TO M10	DON'T KNOW	-1
	REFUSED	-2

M9e. Was it... READ CATEGORIES. CODE ONE CATEGORY.

GO TO M10		\$25,001 to \$30,000,	1
		\$30,001 to \$35,000,	2
		\$35,001 to \$40,000,	3
		\$40,001 to \$45,000, or	4
		\$45,001 to \$50,000?	5
	DON'T READ	DON'T KNOW	-1
		REFUSED	-2

M9f Was it ... READ CATEGORIES. CODE ONE CATEGORY.

	\$50,001 to \$55,000,	1
	\$55,001 to \$60,000,	2
	\$60,001 to \$65,000,	3
	\$65,001 to \$70,000,	4
	\$70,001 to \$75,000, or	5
	Over \$75,000?	6
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

VR

M10. My next question is about household transportation. How difficult is it for YOUTH to get where where [he/she] needs to go? Would you say it is ... READ CATEGORIES. CODE ONE.

	Very difficult,	1
	Somewhat difficult,	2
	Somewhat easy, or	3
	Very easy?	4
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

M11. Has there been any time during the last 12 months that YOUTH didn't have phone service at home for more than a few days?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

## N. CLOSING AND TRACING QUESTIONS

CHECKPOINT: IF PARENT ALREADY ANSWERED TRACING ITEMS (I6a THROUGH I13) GO TO END. ELSE GO TO N1.

N1. We'll be eager to talk with you again in two years to see how you and [YOUTH] are doing then. We want to make sure we don't lose track of you. Do you have an e-mail address?

GO TO N2a	YES	1
GO TO CHECKPOINT BEFORE N2b	NO	2
	DON'T KNOW	-1
	REFUSED	-2

N2a. What is your e-mail address? ENTER E-MAIL ADDRESS OR CODE.

\_\_\_\_\_ EMAIL ADDRESS

DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF ADDRESS IS IN FILE, GO TO N2b. IF NO ADDRESS IN FILE, GO TO N2c.

N2b. I have your mailing address as [READ ADDRESS FROM FILE]. Is that correct?

GO TO N3	YES	1
GO TO N2c	NO	2
	DON'T KNOW	-1
	REFUSED	-2

N2c. IF NO ADDRESS IN FILE OR IF ADDRESS IS NOT CORRECT: What is your street address?

Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DON'T KNOW	-1
REFUSED	-2

N3. Could you please tell me the name of someone who is likely to know where you are if you move? RECORD NAME OR INDICATE REFUSAL: What is their address? RECORD ADDRESS. What is their phone number? RECORD PHONE NUMBER. What is their e-mail address? RECORD E-MAIL ADDRESS.

GO TO END	REFUSED	-2
-----------	---------	----

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DON'T KNOW	-1
------------	----

Phone: \_\_\_\_\_

DON'T KNOW	-1
NOT APPLICABLE, NO PHONE	0

E-MAIL: \_\_\_\_\_

DON'T KNOW	-1
NOT APPLICABLE, NO E-MAIL	0

N4. What is this person's relationship to [YOUTH]?

MOTHER	1
ADOPTIVE MOTHER	2
STEPMOTHER	3
FOSTER MOTHER	4
LEGAL GUARDIAN	5
SISTER/STEPSISTER	6
AUNT	7
GRANDMOTHER	8
FATHER	9
ADOPTIVE FATHER	10
STEPFATHER	11
FOSTER FATHER	12
LEGAL GUARDIAN	13
BROTHER/STEPBROTHER	14
UNCLE	15
GRANDFATHER	16
COUSIN	17
FAMILY FRIEND/NEIGHBOR	18
OTHER (SPECIFY) _____	19

**CHECKPOINT:** IF RESPONDENT IS FOSTER PARENT (S11a OR S12a = 5) , ASK N5a. ELSE GO TO N5c.

N5a. Is there someone else who would know where [YOUTH] has moved if [he/she] is no longer in your foster care? PROBE FOR SOCIAL WORKER ASSIGNED TO CHILD.

	YES	1
GO TO N5c	NO	2
GO TO N5c	DON'T KNOW	-1
GO TO N5c	REFUSED	-2

N5b. What is their name and address? RECORD NAME AND ADDRESS. What is their phone number? RECORD PHONE NUMBER. What is their e-mail address? RECORD E-MAIL ADDRESS.

GO TO END	REFUSED	-2
-----------	---------	----

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DON'T KNOW	-1
------------	----

Phone: \_\_\_\_\_

DON'T KNOW	-1
NOT APPLICABLE, NO PHONE	0

E-MAIL: \_\_\_\_\_

DON'T KNOW	-1
NOT APPLICABLE, NO E-MAIL	0

GO TO END

N5c. Is there someone else who also would know where you are if you move?

	YES	1
GO TO END	NO	2
GO TO END	DON'T KNOW	-1
GO TO END	REFUSED	-2

N6. What is their name and address? RECORD NAME AND ADDRESS. What is their phone number? RECORD PHONE NUMBER. What is their email address? RECORD E-MAIL ADDRESS.

GO TO END	REFUSED	-2
-----------	---------	----

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

DON'T KNOW	-1
------------	----

Phone: \_\_\_\_\_

DON'T KNOW	-1
NOT APPLICABLE, NO PHONE	0

E-MAIL: \_\_\_\_\_

DON'T KNOW	-1
NOT APPLICABLE, NO E-MAIL	0

N7. What is this person's relationship to [YOUTH]? CODE ONE.

MOTHER	1
ADOPTIVE MOTHER	2
STEPMOTHER	3
FOSTER MOTHER	4
LEGAL GUARDIAN	5
SISTER/STEP SISTER	6
AUNT	7
GRANDMOTHER	8
FATHER	9
ADOPTIVE FATHER	10
STEPFATHER	11
FOSTER FATHER	12
LEGAL GUARDIAN	13
BROTHER/STEP BROTHER	14
UNCLE	15
GRANDFATHER	16
COUSIN	17
FAMILY FRIEND/NEIGHBOR	18
OTHER (SPECIFY)	19
_____	

END: Thank you very much for taking time to answer these questions and help us with this important study .

END OF SECTION FOR PRINTER PURPOSES