

# Workforce Education Implementation Evaluation Student Survey

## What is this survey about?

By completing this survey, you have an opportunity to describe your experiences in a technician education course. This survey seeks to describe the different instructional programs and classroom activities in workforce training programs.

This survey asks for information from students involved in technician courses in information technology and advanced manufacturing.

The survey will take approximately **20 minutes** to complete.

Participation in this research project and completing this survey is voluntary. You may decline to participate at any time.

## How will the information be used?

Your answers will be *confidential*. The reports prepared for this study will summarize findings across the sample at an aggregate level and will not associate responses with a specific college or individual. We will not provide information that identifies you, other students, your instructor or your college to anyone outside the study team, except as required by law. The resulting aggregate and anonymous data will be incorporated into reports shared with industry and community college leaders who plan and operate workforce programs.

We appreciate your time and effort for filling out this survey.

## Section 1 – Introduction

### 1. Please enter your name:

### 2. Please identify the courses you are enrolled in from the list below (Check all that apply):

- Course A
- Course B
- Course C
- Course D



## Section 2 – Your Technical Course

Thinking about one of your current technical courses, specifically the [NAME OF COURSE HERE], please answer questions 3-14.

- 3. How difficult is/was this course compared to other technical courses you have taken at this college? (Check only one)**

Level of Difficulty	Check one
More difficult	
About the same level of difficulty	
Moderate level of difficulty	
Relatively easy course	

- 4. Please use the box below to explain your rating in question 3 on the difficulty of the course. What made the course more, less, or as difficult compared to other technical courses you've taken?**

- 5. To what extent did you find the following aspects of the course difficult or challenging (rate the difficulty of each aspect and note "NA" if that content was not taught or the activity was not part of the course):**

Aspects of Course		Difficulty Level				
		Not Difficult	Somewhat Difficult	Difficult	Very Difficult	NA
a	Math knowledge and skills expected					
b	Science knowledge and skills expected					
c	Prior experience with hardware/equipment or software					
d	Technical knowledge and skills required					
e	Amount of lecture-based learning required					
f	Amount of reading required					
g	Amount of group or team work required					
h	Amount of work outside of class required for homework, projects, or lab work					
i	Quizzes, midterm exams, or final exams					
j	Other (Specify) _____					

6. How often do you get a chance to practice the technical skills you are learning during class time and outside of class time?

During Class Time	Outside of Class Time
<input type="radio"/> Very often	<input type="radio"/> Very often
<input type="radio"/> Often	<input type="radio"/> Often
<input type="radio"/> Not too often	<input type="radio"/> Not too often
<input type="radio"/> Never	<input type="radio"/> Never

- 7a. Do you think the amount of time dedicated to practicing skills was adequate?

- Yes  
 No

If you answered NO to Question 7a, please continue with Question 7b, otherwise skip to Question 8.

- 7b. Please describe the particular skill(s) and why you think the time spent practicing the skill(s) was inadequate?

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8. Thinking about your technical course, please check if you had opportunities for feedback from instructors and other students on your work in the course. (Check all that apply)

Feedback Opportunities	Instructor	Other Students
Written		
Oral		
Online and/or email		

- 9a. Was the quality of the feedback you received on your work adequate?

- Yes  
 No

If you answered NO to Question 9a, please continue with Question 9b, otherwise skip to Question 10.

- 9b. Please describe why you think the quality of the feedback was inadequate?

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**10. Did you typically receive feedback in a timely manner after your work was submitted?**

- Yes  
 No

**11. Were you required to revise work in response to feedback from your instructor?**

- Yes  
 No

If yes, can you provide an example?

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**12. What aspects of the course do/did you feel are/were the most effective in helping you learn the concepts, skills, and technical procedures covered by the course? Give examples.**

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**13. What are/were the *least* effective aspects of the course? Give examples.**

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**14. What is your rating of how well this course prepares you for the technical skills needed for the workplace?**

Ratings	Describes this Course
High	
Medium	
Low	
Not sure	

<b>Section 3 – Tell Us about You</b>
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**15. Which category best describes your school attendance status?**

Categories	Describes Me
Current high school student	
Recent high school graduate	
Adult out of school, no college degree	
Adult with college degree	

**15a. Which category best describes your education goals?**

Categories	Describes Me
Student <i>seeking</i> a job certificate	
Student <i>seeking</i> college degree (associates or bachelors)	
Other (please describe) _____	

**15b. If you're seeking a job certificate, do you already hold a college degree (associates or bachelors)?**

- Yes  
 No

**15c. If you're seeking a *college degree*, how many total college credits have you completed?**

- 3-10  
 11-26  
 27-42  
 43-60  
 61-99  
 Over 100

**15d. If you're seeking a *job certificate*, how many total college credits have you completed?**

- 3-10  
 11-26  
 27-42  
 43-60  
 61-99  
 Over 100

**15e. If you're seeking a job certificate, do you expect to complete the credits and earn the certificate this year?**

- Yes
- No

**16. What is your age?**

- 18-24
- 25-31
- 32-40
- 41-47
- 48-55
- 56+

**17. Is English your first language?**

- Yes
- No

**18. Do/did you work while attending this course?**

Employment	Yes	No
Worked full-time while enrolled		
Worked part-time while enrolled		