

### OER Degree Initiative: Student Survey

The purpose of this survey is to learn about your OER course experiences, including: your motivations for enrolling in OER courses, the financial impacts of OER courses, and your impressions of the quality and access of OER courses and materials. OER courses use open educational resources, or freely available teaching and learning materials that users can download, edit and share in place of more costly non-OER instructional materials, such as textbooks. Wherever you see the term OER in this survey, you can place your mouse over the word for a reminder of its meaning.

**DIRECTIONS: PLEASE ONLY TAKE THIS SURVEY ONCE.** From this point forward, you may move back and forth within the survey to review or edit your answers by using the "Back" and "Next" buttons at the bottom of the page. Do not use the "Back" button on your web browser or your answers may be lost.

Please remember to click "Submit" on the final page of the survey to save and submit your answers. Once you hit "Submit," you will not be able to return to the survey. It is important that you answer all questions shown. Please give us your best judgments and estimates based on your experiences when asked. We appreciate your time and thoughtfulness.

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In what course at NAME OF COLLEGE were you asked to take this survey? *(Select one.)*

- OPTION 1
  - OPTION 2
  - OPTION 3
-

## Technology Use

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Which of the following technologies or devices do you have access to when you are **off** campus? (*Select all that apply.*)

- Desktop or laptop computer
  - Tablet
  - Internet
  - Smart phone
  - None of these
- 

To what extent does your access to technology and/or the internet impact your ability to complete assigned coursework? (*Select one.*)

- No impact
  - Some impact
  - Large impact
- 

How would you describe your level of comfort using technology for a course (e.g. for online homework or online course website and syllabus)? (*Select one.*)

- Not at all comfortable
  - Somewhat uncomfortable
  - Neutral
  - Somewhat comfortable
  - Very comfortable
-

## Textbook Use

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How many courses are you taking this semester? (*Select one.*)

- 1
  - 2
  - 3
  - 4
  - 5
  - 6
  - 7 or more
- 

How much money *per course* do you typically spend on textbooks or materials? (*Select one.*)

- \$0-\$50
  - \$51-\$100
  - \$101-\$150
  - \$151-\$200
  - Over \$200
- 

Where do you purchase most of your textbooks?

- College bookstore (in store or online)
  - A website not affiliated with the college
  - I do not usually purchase textbooks
  - Other, please specify: \_\_\_\_\_
- 

What type of textbooks do you usually purchase?

- New, printed textbooks
  - Used, printed textbooks
  - Rental, printed textbooks
  - Online or digital textbooks
-

### Textbook Use

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Have there been times that you did not purchase or rent the **required** textbook or materials for a course? *(Select one.)*

- Yes
  - No
- 

Thinking specifically about the last time you did not purchase or rent the required textbooks or materials for a course, what were the reasons you did not purchase or rent them? *(Select all that apply.)*

- I could not afford the textbook or materials
  - I borrowed someone else's textbook or materials
  - I used the library's textbook or materials
  - The textbook was online and free
  - The instructor did not assign reading from the textbook
  - I don't typically do textbook reading assignments
  - I don't typically use the course materials
  - Other
  - Please describe other reason: \_\_\_\_\_
-

### Textbook Use

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How often do you typically do the assigned readings in a course? *(Select one.)*

- Never
  - Sometimes
  - About half the time
  - Most of the time
  - Always
- 

Have you ever withdrawn from a course because you could not afford the required textbook or materials? *(Select one.)*

- Yes
  - No
  - Not sure
- 

**Including this course**, how many college courses have you taken or are you taking that used only online and free course texts or materials? *(Select one.)*

- 1
- 2
- 3
- 4
- 5
- 6
- 7 or more
- Not sure

**Describe your OER Course Experience**

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DIRECTIONS: For this section, we only want to know about your experiences in NAME OF SELECTED OER COURSE. Please respond to questions based only on your experiences in NAME OF SELECTED OER COURSE.

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Were you aware that NAME OF SELECTED OER COURSE was OER when you registered for it? *(Select one.)*

- Yes
  - No
  - Not sure
- 

How did you learn that NAME OF SELECTED OER COURSE was OER? *(Select all that apply.)*

- It was indicated in the course name or next to the course name when I registered.
  - It was indicated in the course syllabus.
  - A friend told me.
  - A college instructor/advisor told me.
  - I saw an advertisement on my college's website.
  - I found out **after** I had registered.
  - I did not know that this course was OER until taking this survey.
  - Other (please specify): \_\_\_\_\_
-

**Describe your OER Course Experience**

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To what extent did the following factors influence your choice to enroll in NAME OF SELECTED OER COURSE? *(Select one per row.)*

	No influence	Some influence	Strong influence
Required for my major	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Fits with my schedule	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Personal interest	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Instructor reputation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Recommended by a friend/classmate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Encouraged by advisor or other faculty member at my institution	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Cost savings	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Course format (e.g. online vs. face-to-face)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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Please rate your experience in NAME OF SELECTED OER COURSE as compared to the other typical, non-OER courses you are taking this semester. *(Select one per row.)*

	Much lower	Slightly lower	About the same	Slightly higher	Much higher
Quality of teaching compared to typical class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of instructional materials compared to typical class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Level of student engagement / participation in course compared to typical class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Overall quality of learning experience compared to typical class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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**Describe your OER Course Experience**

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How often do you experience the following problems accessing online course materials for NAME OF SELECTED OER COURSE? *(Select one per row.)*

	Never	Sometimes	About half the time	Most of the time	Always
Lack of access to devices (e.g., computer)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of access to the Internet	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Problems logging into or accessing online materials	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Problems using online materials (e.g. difficulty of reading texts onscreen)	<input type="radio"/>	<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"/>	<input type="radio"/>

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What percent of the NAME OF SELECTED OER COURSE course materials do you print out? *(Select one.)*

- 0% - 25%
  - 26% - 50%
  - 51% - 75%
  - 76% or more
- 

Have you purchased printed copies of course materials for NAME OF SELECTED OER COURSE (e.g. course packets)? *(Select one.)*

- Yes, I was REQUIRED to purchase printed copies
  - Yes, I CHOSE to purchase printed copies
  - No
-



**Describe your OER Course Experience**

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Did you have to pay additional fees (e.g. access, support, or technology fees) to enroll in NAME OF SELECTED OER COURSE? *(Select one.)*

- Yes
  - No
- 

What challenges (if any) have you encountered using the course materials for NAME OF SELECTED OER COURSE? *(Select all that apply.)*

- Materials are not relevant to the course content
  - Difficulty using course materials
  - Difficulty accessing course materials
  - Course materials are not engaging
  - Difficulty learning from course materials
  - None
  - Other (please specify): \_\_\_\_\_
- 

Are you aware of other OER courses offered through your college? *(Select one.)*

- Yes
  - No
-

**Financial Motivation and Impact of OER Courses**

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How much of an impact will OER courses have on your ability to afford college? (*Select one.*)

- Significant impact
  - Moderate impact
  - Little impact
  - No impact
  - I don't know
- 

How have you, or do you plan to, use the savings from not having to purchase course materials? (*Select all that apply.*)

- Work fewer hours on or off campus
  - Take additional courses
  - Purchase materials or supplies for other courses
  - Cover college tuition and/or fees
  - Cover personal expenses (e.g. going out to eat, paying bills, etc.)
  - Other: \_\_\_\_\_
-

**Academic Status**

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How do you pay for college tuition and fees? *(Select all that apply.)*

- Pell grant
  - Merit scholarship
  - Student loans
  - Family
  - Self-funded
  - Other grants/scholarships \_\_\_\_\_
- 

How many credits are you taking **this** semester or term?

▼ 1 ... 12 or more

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Are you an early college or dual enrollment student (e.g. are you currently enrolled in high school and taking one or more college courses)?

- Yes
  - No
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Have you ever had to stop taking courses for a semester or more because you could no longer afford them? *(Select one.)*

- Yes
  - No
-

**Academic Status**

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In total, how many college semesters or terms have you **completed** so far, **including** any terms completed at other colleges? (*Select one.*)

- 0
  - 1
  - 2
  - 3
  - 4
  - 5 or more
- 

What have most of your **final** term or semester grades been up to now at **this** college? (*Select one.*)

- A
  - B
  - C
  - D or lower
  - I have not received any final term grades yet
-

### Future Plans

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On a scale from 0 to 10 (0 being not at all likely, and 10 being very likely), how likely are you to enroll in a(n) OER course in the future?

- 0 - not at all likely
  - 1
  - 2
  - 3
  - 4
  - 5
  - 6
  - 7
  - 8
  - 9
  - 10 - very likely
- 

On a scale from 0 to 10 (0 being not at all likely, and 10 being very likely), how likely are you to recommend taking a(n) OER course to a friend?

- 0 - not at all likely
  - 1
  - 2
  - 3
  - 4
  - 5
  - 6
  - 7
  - 8
  - 9
  - 10 - very likely
-

### Background and Characteristics

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What is your year of birth (e.g. 1995)?

▼ 2007 ... 1917

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What is your gender identity? *(Select one.)*

- Male
  - Female
  - Prefer to self-describe: \_\_\_\_\_
  - Prefer not to respond
- 

What is your race or ethnicity? *(Select all that apply.)*

- American Indian or Alaska Native
  - Asian
  - Black or African American
  - Hispanic or Latino
  - Native Hawaiian or Other Pacific Islander
  - White
  - Other \_\_\_\_\_
  - Prefer not to respond
- 

How many hours **per week** are you currently working? *(Select one.)*

- 1-10
- 11-20
- 21-30
- 30 or more hours
- I am not currently employed

**Background and Characteristics**

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Are you a member of the U.S. Armed Forces, Reserves, or National Guard? *(Select one.)*

- Yes
  - No
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Thank you for completing the survey.