



HEAR US OUT

**Students Talk About
What They Need to Go to College**

STUDENT SURVEY

Please take a few minutes to complete the following survey about college. It is NOT a test, and there are no right or wrong answers. We just want to get a sense of your ideas, the obstacles you face, the help you're getting, and what you have done so far in relation to your plans after high school. It is FINE if you have not done anything yet.

Your participation is voluntary. If you do not wish to participate or, if at any time you wish to stop participating, you may do so without any penalty. The results of this study will be shared with others and may be presented at conferences and in publications. But no names will be collected. Your responses will be private.

If you have any questions, please contact one of the student researchers listed at the end of the survey. If after you participate you feel the need to discuss it with someone on a confidential basis, please contact [Name] at the [Organization, phone number, and email address]

Thanks so much!

1. What grade are you in?

- 9th
- 10th
- 11th
- 12th

2. Which statement best describes your plans for college?

- I'm not sure about college yet.
- I don't want to go to college, but plan to go anyway.
- I don't want to go to college and have made no plans to do so.
- I want to go to college and plan to attend right after graduation.
- I want to go to college and plan to attend eventually, but not right after graduation.
- I want to go to college, but I am unable to go (please explain in the space below):

Other (please specify) _____

3. If you are interested in going to college, to what extent have the following people or things influenced your desire to go to college? (If you're not interested in college, you can skip this question and go to the next.)

	A Lot	Somewhat	Not Much
a. My family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. My teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Friends/Other students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. My community (e.g., my church)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Adults outside of school (e.g., mentors, coaches, tutors)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The media (e.g. internet, books, TV)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. When was the first time someone seriously spoke to you about attending college? (please fill in the grade you were in, K - 12) _____

5. Please tell us how much you agree or disagree with each statement.

	Strongly Agree	Agree	Disagree	Strongly Disagree	Don't Know
a. My teachers think I am "college material."	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. My school has high expectations for all students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I am encouraged to take advanced level classes.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I know which classes to take in order to be prepared for college.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. I believe my school is preparing me well for college.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I feel my school gives me the freedom to take classes in areas that interest me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. I feel the rules and regulations at my school create a positive and safe climate for learning.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. I feel that negative stereotypes about my race/ethnicity influence my ability to learn.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. I feel that athletics are valued as much or more than academics at my school.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. I feel that most students at my school strive to do their best.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. How often have you seriously talked about going to college with each of the following individuals?

	Many Times	Once or Twice	Never
a. Parent or Guardian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Brother or Sister	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Other relative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Friends or Other Students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Family friend	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. High school counselor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Mentor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. High school teacher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Athletic coach	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. College representative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Religious leader	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Please Specify:			

OPTIONS AFTER HIGH SCHOOL

7. Have you ever researched colleges on the web? Yes No
8. Have you ever made a list of colleges that interest you? Yes No
9. Have you ever looked into what an application essay for college involves? Yes No
10. Have you ever written an application essay for college? Yes No
11. Have you ever looked into which standardized tests are required to apply for college (e.g. SAT, ACT, SAT II)? Yes No
12. Have you ever taken a standardized test required to apply for college (e.g. SAT, ACT, SAT II)? Yes No
13. How much do you feel you know about the costs of college and getting financial aid?
 A lot Some A little Nothing
14. Have you ever visited a college campus? Yes No
- a. If yes, how many campuses have you visited?**
 1 2 -3 4+
- b. If yes, who has gone with you? (mark all that apply)**
 Family member Friend/Other students On your own
 Teacher Spiritual leader
 Other _____

SUPPORTS & OBSTACLES

15. List the three biggest concerns you have, or obstacles in your way, regarding attending college:

- a. _____
- b. _____
- c. _____

16. If you were to have a problem moving forward with your college plans, whom would you turn to for help? (check all that apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Parent/Guardian | <input type="checkbox"/> Brother/Sister | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Friends/Other Students | <input type="checkbox"/> Family friend | <input type="checkbox"/> High School Counselor |
| <input type="checkbox"/> Mentor | <input type="checkbox"/> High School Teacher | <input type="checkbox"/> Athletic Coach |
| <input type="checkbox"/> College Representative | <input type="checkbox"/> Spiritual leader | <input type="checkbox"/> College advisor |
| <input type="checkbox"/> Other (Please Specify) _____ | | |

17. How much do you feel you know about after school and summer programs that can give you additional skills (e.g., extra academics, leadership, new interests) for college?

- A lot Some A little None

18. Which, if any, of the following afterschool and summer activities have you participated in? (mark all that apply)

- Extracurricular activities at school (sports teams, clubs, etc.)
- Paid work
- Volunteer work
- Internship
- Afterschool enrichment program
- Upward Bound
- Talent Search
- Summer enrichment program
- Other (please specify):

19. If there have been barriers or obstacles to your participating in activities like those listed above (for example, you have to work so you don't have time for after school programs, or programs are not offered near your school), please describe them here:

--- THIS SECTION IS FOR **SENIORS** ONLY. EVERYONE ELSE PLEASE SKIP TO QUESTION 24. THANKS! ---

20. Have you ever completed a college application? Yes No
a. If yes, how many colleges have you applied to? 1 2 -5 6+

21. Who helped you with the application process? (mark all that apply):

- | | | |
|---|---|--|
| <input type="checkbox"/> Parent/Guardian | <input type="checkbox"/> Brother/Sister | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Friends/Other Students | <input type="checkbox"/> Family friend | <input type="checkbox"/> High School Counselor |
| <input type="checkbox"/> Mentor | <input type="checkbox"/> High School Teacher | <input type="checkbox"/> Athletic Coach |
| <input type="checkbox"/> College Representative | <input type="checkbox"/> I mostly did it on my own | <input type="checkbox"/> College advisor |
| <input type="checkbox"/> Spiritual leader | <input type="checkbox"/> Other (Please Specify) _____ | |

22. If you've applied for financial aid, who helped you complete the FAFSA/Scholarship forms? (mark all that apply):

- | | | |
|---|---|--|
| <input type="checkbox"/> Parent/Guardian | <input type="checkbox"/> Brother/Sister | <input type="checkbox"/> Other relative |
| <input type="checkbox"/> Friends/Other Students | <input type="checkbox"/> Family friend | <input type="checkbox"/> High School Counselor |
| <input type="checkbox"/> Mentor | <input type="checkbox"/> High School Teacher | <input type="checkbox"/> Athletic Coach |
| <input type="checkbox"/> College Representative | <input type="checkbox"/> I mostly did it on my own | <input type="checkbox"/> College advisor |
| <input type="checkbox"/> Spiritual leader | <input type="checkbox"/> Other (Please Specify) _____ | |

23. Have you gotten accepted into college? Yes No Not yet

---THIS SECTION IS FOR **EVERYONE!** ---

Please tell us about yourself.

24. Gender: Female Male

25. Will you be the first person in your family to go to a two- or four-year college?
 Yes No

26. What high school do you attend? _____

27. What is the race/ethnicity that best describes you?

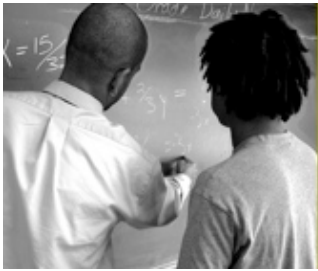
- African American (Black or African Caribbean)
- White
- Latino/Latina or Hispanic
- Asian
- South Asian or Pacific Islander
- Middle Eastern
- Indigenous, Native American or Alaskan American
- Other (please specify, for example Somali, Oromo, Eritrean) _____

28. Were you born in: the USA Other (please specify) _____

29. What is your Citizenship Status?

- U.S. Citizen Permanent Resident Undocumented Don't know/decline to state

30. Are you eligible for free or reduced lunch? Yes No Don't know



HEAR US OUT

Students Talk About What They Need to Go to College

SCHOOL RESOURCE SURVEY (to be completed by school counselor)

Please take a few minutes to complete this short survey. The results will be used by a team of student researchers to create a report for detailing the barriers and supports for students to attend 2 year and 4 year colleges.

Name of school: _____

Name of person completing this survey: _____

Title: _____

Email Address: _____
(please include your email if you would like to receive the results of this survey)

1. How many school counselors does your school have? _____

2. How many of them provide college counseling? _____

3. What percentage of their time, roughly, are they able to devote to one-on-one college counseling with students (define time as hours per week)? _____

If necessary, please explain:

4. Are there other adults in the school who provide individual college counseling to students?

Yes ___ No ___

If yes, please explain:

5. Are there any outside groups or special programs at your school that also provide college counseling to students?

Yes ___ No ___

If yes, please explain:

6. What is the current student enrollment in?

9th grade _____

10th grade _____

11th grade _____

12th grade _____

7. How many students are in an average-size classroom? _____

8. How many computers are available for students to use? _____

9. Does your school offer honors/advanced placement courses in addition to regular classes?

Yes ____ No ____

What percentage of students participates in these classes? _____

10. How many AP classes does your school offer in each of these subjects?

English ____ Math ____ Biology ____ Chemistry ____ Physics ____

History ____ Foreign Language ____

11. Are there any special programs and/or events at your school that reach out to students and families in relation to preparing for college (including help with the application process)?

Yes ____ No ____

If yes, please explain:

12. What do you see as the biggest barriers facing students at your school, when it comes to college access?

13. What percent of students apply to a:

_____ Two year college

_____ Four year college

14. What percent of students get accepted into a:

_____ Two year college

_____ Four year college

15. What additional supports would benefit your students most?

Thank You!

Please return to: