Secondary Graduate Placement Survey Form

(2014 Graduates)

Enter data in gray areas. Click in the first gray box to begin. Click, tab, or press arrow keys to move through form.

A. DEMOGRAPHIC INFORMATION:

CTDS #: _____ - _____ - _____ Program CIP: _____

Program: _____

School: _____ SAIS ID: _____

Student Name: _____ ☐ Male ☐ Female

Address: _____

City: _____ ☐ Handicapped ☐ LEP ☐ Economic Disadv

State: _____ Zip Code: _____ ☐ Single Parent ☐ Migrant ☐ NO

How was student contacted for this survey?

☐ In Person ☐ Mail ☐ E-Mail ☐ Facebook ☐ Phone Phone Number (optional): ( )

☐ Other (please specify):

B. FORM COMPLETED BY:

☐ Graduate ☐ Family Member ☐ Other (please specify: teacher, aide, etc.): _____

Are you returning from a religious mission? ☐ YES ☐ NO

If yes, what year did you graduate from high school? ☐ 2012 ☐ 2013 ☐ 2014

C. PLACEMENT INFORMATION: (please check all that apply)

**Note: Student must be placed between October 1 – December 31 of the graduation year.*

Are you enrolled in POSTSECONDARY EDUCATION or ADVANCED TRAINING? ☐ YES ☐ NO

School Name: _____

Does either of these relate to the skills learned in the program listed above? ☐ YES ☐ NO

Are you in the MILITARY? ☐ YES ☐ NO

What branch of the military? _____

Does your job directly relate to the skills learned in the program listed above? ☐ YES ☐ NO

Are you WORKING? ☐ YES ☐ NO

Does your job directly relate to the skills learned in the program above? ☐ YES ☐ NO

If you are working, please provide the following:

Employer/Business Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number (optional): ( ) _____ FAX (optional): ( ) _____

Supervisor/Contact Person:

D. CREDENTIAL, CERTIFICATE, LICENSE INFORMATION ***(*optional)****: (may enter more than one)*

Did you apply for a 3rd party credential, certificate, and/or license? ☐ YES ☐ NO

Did you receive a 3rd party credential, certificate, and/or license? ☐ YES ☐ NO

Credential, certificate, licenses titles: _____

Does the credential, certificate, or license relate to skills learned in the program listed above? ☐YES ☐NO

Provide credential, certificate, or license # (if applicable):