



HIGHER EDUCATION CAREER QUESTIONNAIRE

The following questions are designed to investigate the kind of commitment to career made by academic individuals. They include questions about your personal background, career, family and self. Most questions can be answered with a check mark, a circle, or a brief phrase. Please answer all applicable questions.

I. BACKGROUND INFORMATION

1. Date of birth: 5/23/25 Place of birth: New Jersey
2. Your sex: _____ Female; _____ Male
3. Your present marital status: (Check and complete all that apply)
 - _____ Never Married
 - _____ Married _____ How long?
 - _____ Separated _____ How long?
 - _____ Divorced _____ How long?
 - Remarried 12 yrs. How long?
 - _____ Widowed _____ How long?
 - _____ Other _____ Number of Marriages
4. Your present living arrangement: (Check one)
 - _____ Living Alone
 - _____ Living in a Religious Community
 - Living with Marital Spouse (Partner)
 - _____ Living with Roommate
 - _____ Living Together in Long-term Relationship
 - _____ Other (Explain) _____
5. Number of Children: 2 (Number)

Age	Sex	Natural (Born to you) (please check)	Step or Adopted (check)	Living with You (check yes or no)
<u>15</u>	<u>M</u>	_____	<input checked="" type="checkbox"/>	Yes <input checked="" type="checkbox"/> No _____
<u>5</u>	<u>F</u>	<input checked="" type="checkbox"/>	_____	Yes <input checked="" type="checkbox"/> No _____
_____	_____	_____	_____	Yes _____ No _____
_____	_____	_____	_____	Yes _____ No _____
6. Religious Affiliation: (Check) _____ Catholic; _____ Protestant; Jewish; _____ Other; _____ None.
7. Race/Ethnic Status: (Check one) White; _____ Black; _____ Asian; _____ Native American; _____ Hispanic; _____ Other.
8. Your birth order (Indicate by number) 1 in a family of 3 children.
9. Your Educational Background:

Degree Awarded	Academic Institution	Major Field	Year
Bachelor's	<u>Columbia</u>	<u>Zoology</u>	<u>44</u>
Master's	_____	_____	_____
ABD (All but dissertation)	_____	_____	_____
Doctorate	<u>Yale</u>	<u>Microbiology</u>	<u>47</u>
10. Current Title: President + Professor
11. Is this a full-time job: ; part-time job: _____. If part-time, list other jobs currently held: _____

12. Parental Information:

Level of Education Each Parent Reached Parents' Occupation in Your Childhood
 (Check highest level reached) (Indicate number of years)

	<u>Father</u>	<u>Mother</u>		<u>Father</u>	<u>Mother</u>
a. Grade School	_____	_____	a. Professional (MD, PhD, LLD)	_____	_____
b. Some high school	_____	_____	b. Nurse, teacher, social worker	_____	_____
c. High school graduate	_____	_____	c. Other professional	_____	_____
d. Some college/technical school	_____	_____	d. Manager, administrator	_____	_____
e. College graduate	_____	_____	e. Proprietor, in business	_____	_____
f. Some graduate work	_____	_____	f. Clerical, sales, sec'y	_____	_____
g. Master's degree	_____	_____	g. Technician, crafts	_____	_____
h. Doctorate (MD, PhD, LLD, EdD)	_____	_____	h. Semi-skilled or unskilled	_____	_____
i. Post-Doctorate	_____	_____	i. Domestic work	_____	_____
			j. Homemaker	_____	_____
13. Father's Country of Birth <u>Israel</u>			k. Unemployed	_____	_____
Mother's Country of Birth <u>Israel</u>			l. Other (Specify)	_____	_____

14. Your Partner's (spouse or other) job: physician
 Highest degree obtained by Partner (spouse or other): M.D.

15. Do you consider your present marriage or relationship one in which both partners are involved in full-time jobs? Yes; No.

16. Type of Academic Institution at which you are employed (Check one in each row):
 a. University, _____ College (offers MA), _____ College (offers BA), _____ College (Jr.)
 b. _____ Public, Private Secular, _____ Private Religious, _____ Other
 c. Coed, _____ All males, _____ All females

17. How long have you held your present title (in years): 2

18. How long have you worked at your present institution including all jobs held there (in years): 2

19. How long have you worked at all educational institutions combined (in years): 33

20. Your annual salary from your position (Check range closest to your current annual salary):

_____ Less than \$15,000	_____ \$25,000 - \$30,000	_____ \$40,000 - \$45,000
_____ \$15,000 - \$20,000	_____ \$30,000 - \$35,000	_____ \$45,000 - \$50,000
_____ \$20,000 - \$25,000	_____ \$35,000 - \$40,000	<input checked="" type="checkbox"/> Over \$50,000

21. Type of schools you have attended (Indicate kind and size of schools you've attended by checking appropriate spaces):

<u>Kind of School</u>	<u>Public</u>	<u>Private Secular</u>	<u>Private Religious</u>
a. Elementary	_____	_____	_____
b. High School	_____	_____	_____
c. Undergraduate	_____	_____	_____
d. Graduate School	_____	_____	_____

<u>Size of School</u>	<u>Vary Large</u>	<u>Large</u>	<u>Medium</u>	<u>Small</u>
	<u>Over 10,000</u>	<u>10,000-5,000</u>	<u>5,000-2,000</u>	<u>Under 2,000</u>
a. High School	_____	_____	_____	_____
b. Undergraduate	_____	_____	_____	_____
c. Graduate School	_____	_____	_____	_____

Type of School	Coeducational	All-Male	All-Female
a. Elementary	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. High School	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
c. Undergraduate	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Graduate School	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. Family Mobility: Please circle the number corresponding to how geographically mobile your family actually was during your childhood and adolescence (how frequently they actually moved).

Did not move at all Moved a great deal
 1 2 3 4 5 6 7

23. Family's Response to your education: Using the following scale of "1" (not important) to "7" (Highly important), please indicate how important the following reasons were in your family's perception for you continuing your education.

Not important Highly important
 1 2 3 4 5 6 7

- a. So I could be a provider for myself. 6 (Choose a number from scale above)
- b. So I could be a provider for others. 6
- c. As a temporary activity until marriage. 1
- d. As a supplement to spouse's income. 1
- e. As a substitute income should my spouse become ill, die or divorce me. 1
- f. As an end in itself. 6
- g. Other (explain) _____

24. Has your educational experience been (check one): full-time; part-time; both.

25. Has your work experience been mostly (check one): full-time; part-time; both.

26. Leadership Positions held in any organizations. Please indicate the number of leadership positions held, in both professional and nonprofessional organizations, in high school and college, and at the local, state and national levels. (Use a number, not a check mark):

	High School	College	Local Level	State Level	National Level
a. President	<u>2</u>	<u>2</u>			
b. Vice-President	<u>1</u>				
c. Secretary	<u>1</u>				
d. Treasurer					
e. Committee Chair	<u>2</u>		<u>2</u>	<u>1</u>	<u>30</u>
f. Other					

II. CAREER BACKGROUND

1. Where would you place your current academic position in terms of administrative level? (Please check one):

- Chief Executive Level (e.g., Chancellor, President, Provost)
- Top Executive Level (e.g., All Vice-Presidents, All Deans, Ass't Provosts)
- Other Administrative Level (e.g., Directors, Coordinators, Registrars, Chairs of Divisions or Departments, and their Assistants and Associates, Counselors)
- Non-Administrative Level (e.g., Faculty)

2. Size of your current academic institution (check one): Over 20,000 students, 10,000-20,000, 5,000-10,000, Between 2,000-5,000, Under 2,000.

3. Career Mobility. Indicate how often you have moved in the same or different institution, in terms of the jobs you have held, by circling the appropriate number:

No Job Mobility High Job Mobility
 1 2 3 4 5 6 7

4. Employment Background. Start with your first job and account for all years to now:

<u>Dates (Year to Year)</u>	<u>Title of Position (Chronologically)</u>	<u>Full-time (check)</u>	<u>Part-time (check)</u>
1947-58	Professor	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1959-78	Dept Chair + "	<input checked="" type="checkbox"/>	<input type="checkbox"/>
1978 - ..	President	<input checked="" type="checkbox"/>	<input type="checkbox"/>

5. Importance of Career. Please indicate how important your career is to you by circling the appropriate number:

Not at all Important Highly Important

1 2 3 4 5 6 7

6. Career Aspirations:

- a. How long do you plan to remain in your current position? 10 years.
- b. What is your career goal in five years? same as now
- c. What is your career goal in twenty-five years? retire
- d. If legal requirements didn't mandate retirement, would you remain active professionally in an administrative position? Yes, No.
- e. Do you plan to retire? Yes, No.

7. Under what circumstances would you be likely to move? Please indicate the likelihood of your moving for each of the following reasons by using the scale below, and writing a number in the space before each statement:

Highly Unlikely Highly Likely

1 2 3 4 5 6 7

- 2 a. I would move if a more attractive job offer occurred.
- 7 b. I would move if I did not get a reappointment to my present job.
- 1 c. I would move for more money and better benefits.
- 1 d. I would move for greater intellectual challenge.
- NA e. I would move if I were reassigned by my present employer.
- 5 f. I would move for personal health and family's health.
- 2 g. I would move for personal reasons such as better opportunities for spouse, children, etc.
- 2 h. I would move for my partner's job opportunity.
- i. Other (specify) _____

8. Limitations on Mobility. Please indicate how important the following reasons are as limits on your job mobility by using the scale below, and writing a number in the space before each reason:

Very Unimportant Highly Important

1 2 3 4 5 6 7

- 1 a. The academic marketplace is too tight and restrictive.
- 1 b. My partner's job restricts me to this area.
- 1 c. My children's lives and schools restrict me to this area.
- 1 d. The cost of living elsewhere restricts me to this area.
- 1 e. My responsibilities to my family (parents, siblings, friends) restrict me.
- 1 f. Health reasons (self and/or partner) restrict me to this area.
- 1 g. I like this community and do not want to move.
- 7 h. Other (Explain) uniqueness of present position

III. FAMILY ORIENTATION

Questions in this section refer to your "family" which may be defined as one's parents, brothers, sisters, spouse/partner, children, relatives, and/or any other members of your home. However, you may consider additional persons to be a part of your own personal family. Please answer the following questions with reference to those persons you consider to be in your "family."

1. Members of your family: Please indicate with a number all of those people you consider a part of your family: 1 Spouse/Partner, 2 Children, Parents, Relatives, Friends, Colleagues, Other (explain)

2. Please indicate how important the family you described above is to you by circling the appropriate number:
Not at all important Highly Important

1 2 3 4 5 6 7

3. How has your family affected your career? Using the scale below, please indicate how your family has affected your career by writing the appropriate number in the space in front of each statement:

Not at all A great deal

1 2 3 4 5 6 7
4 a. My family has enhanced my career...
2 b. My family has hampered my career ...
3 c. Having a family has cost me ...
7 d. Having a family has benefitted me...

4. Family Responsibilities. Please indicate with a check whose primary responsibility it is, or was if children are grown, for each of the following: yours, your partner's, both equally, or another's.

Responsibility	Yours	Partner's	Equally	Another's
a. Interior cleaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b. Child care (actual or planning for)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Driving child to appointments	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Meal preparation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. Food shopping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. Dish-washing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. Laundry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. Exterior yard work	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Repairs to house or apartment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j. Repairs to automobile	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Buying furniture	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
l. Buying other household items	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
m. Buying clothing	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

5. Financial Responsibilities. Who actually controls the money for each of the following?

a. Paying bills by writing the checks	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Paying for housing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Paying fixed expenses (utilities)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Paying for food	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Paying for furniture	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Paying for clothes	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Paying for vacations	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Paying for savings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Paying for luxuries	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Paying for miscellaneous items	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. When someone who depends on you is ill, whose responsibility is it to take time from work to care for them or to make arrangements for their care?

 Yours, ✓ Partner's, Equally Both, Another's

7. Please indicate how satisfied you are with the current division of labor in your household by circling the appropriate number:

Not at all satisfied Highly satisfied
 1 2 3 4 5 6 7

8. How has your career affected your family? Using the scale below, please indicate how your career has affected your family by writing the appropriate number in the spaces in front of each statement:

Not at all A great deal
 1 2 3 4 5 6 7

- 1 a. Having a career has cost me.
- 7 b. Having a career has benefitted me.
- 5 c. My career has enhanced my family.
- 3 d. My career has hampered my family.

9. Effects of children in your life. Using the scale below, please indicate how having a child, if you do, or how not having a child, has affected your health and your career by writing the number in the space in front of each statement:

Strongly disagree Strongly agree
 1 2 3 4 5 6 7

- a. I've had no health problems because I've had no children.
- b. I have had health problems because I've had no children.
- 1 c. I have had health problems as a result of having had a child(ren).

10. I took off the following amount of time after my child's birth (circle one):

None ○ 3 mos. 6 mos. 1 yr. 1-3 yrs. 3-5 yrs. over 5 yrs.

11. Was your family size planned? ✓ Yes, No.

12. As a young adult, did you plan or expect to:	<u> Yes </u>	<u> No </u>	<u> Wasn't Sure </u>
Remain single?	<u> </u>	<u> ✓ </u>	<u> </u>
Marry but have no children?	<u> </u>	<u> </u>	<u> ✓ </u>
Marry and have children?	<u> </u>	<u> </u>	<u> ✓ </u>
Care for elderly parents?	<u> </u>	<u> ✓ </u>	<u> </u>

13. Regarding your present living arrangements, to what degree have your earlier plans (listed above in question twelve) been realized?

Not at all Completely
 1 2 3 4 5 6 7

14. If you received a job opportunity to move elsewhere, how likely is it that you would move?

Not at all likely Highly Likely
 1 2 3 4 5 6 7

15. How likely is it that your partner would move with you?

Not at all likely Highly Likely
 1 2 3 4 5 6 7

16. If your partner received a job opportunity to move elsewhere, how likely is it that your partner would move?

Not at all likely Highly Likely
 1 2 3 4 5 6 7

17. How likely is it that you would move with your partner?

Not at all likely Highly Likely
 1 2 3 4 5 6 7

IV. SELF ORIENTATION

1. Indicate how much traveling you've done in your life by circling the appropriate number:

No travel Extensive traveling
 1 2 3 4 5 6 7

2. Regarding interests and hobbies, indicate how many you actually pursue by circling the appropriate number:

I actually pursue none I actually pursue many
 1 2 3 4 5 6 7

3. Sometimes successful people feel like imposters, acting a part but fearing they will be discovered. Indicate to what extent, if any, you've experienced this feeling:

Never Often
 1 2 3 4 5 6 7

Is this imposter experience more likely to be felt at work? Yes No (Explain)

Is this imposter experience more likely to be felt at home? Yes No "

Is this imposter experience felt equally at work and home? Yes No "

4. Personal development may take many forms (taking classes, going to conferences, pursuing hobbies, learning new skills). How likely is it for you to pursue such personal development experiences?

Not at all likely Highly likely
 1 2 3 4 5 6 7

5. How extensive is your "support system" (friends, family, colleagues with whom you interact, share interests and socialize)? Circle the appropriate number:

No support system Extensive system
 1 2 3 4 5 6 7

6. Do you have your own personal checking or savings account? Yes No

7. How much conflict have you experienced among the demands of your job, family and self?

No conflict Extensive conflict
 1 2 3 4 5 6 7

What was the nature of the conflict? TIME.

8. Within the last year, have you experienced any kind of "life crisis" as you'd define it?

No crisis Extensive crisis
 1 2 3 4 5 6 7

What was the nature of the crisis?

9. Have you had a mentor or sponsor (someone who actively helped and guided you in your professional and personal development)? Yes, No. If yes, describe your mentor, including sex and age and how your mentor helped you:

Professor at college, male, about 10 years older.

Socratic teacher; taught skills; personal encouragement &

10. Have you had a role model (someone you looked up to, admired, tried to be like, who positive strongly influenced you, but who may or may not have known they were your role model)? criticism
 Yes No. If yes, describe your role model, including sex and age and how your role model affected you:

1. EINSTEIN, PASTEUR, Ehrlich, Koch culture heroes (= Arrowsmith)

2. see 9.

11. How satisfied are you about your life in general? Circle the appropriate number:

Not at all satisfied Highly satisfied
 1 2 3 4 5 6 7

Thank you for your cooperation.
 Sandra F. Mark, Research Coordinator