About This File:

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You may also e-mail for help at Ilona.Berkovits@ed.gov or Jeffrey.Owings@ed.gov.

Thank you.

NATIONAL EDUCATION LONGITUDINAL STUDY OF 1988

SECOND FOLLOW-UP

NOT CURRENTLY IN SCHOOL QUESTIONNAIRE

Prepared for the U.S. Department of Education National Center for Education Statistics

By the National Opinion Research Center (NORC)

A Social Science Research Center
at the University of Chicago

USES OF THE DATA

The data from the survey will be used by educators and by federal and state policy makers to address the important issues facing the nation's schools: educational standards, curriculum tracking, dropping out of school, the education of the disadvantaged, the needs of language minority students, incentives for attracting students to the study of science and mathematics, and the features of effective schools.

CONFIDENTIALITY

As a matter of policy, the National Center for Education Statistics is required to protect the privacy of individuals who participate in surveys. We want to let you know that:

- Section 406 of the General Education Provisions Act (20-USC 1221e-1) and Public Law 100-297 allow us to ask you the questions in this questionnaire.
- We are asking you these questions in order to gather information about what happens to students
 when they decide to leave school and make decisions about what they are going to do after
 leaving.
- You may skip any questions you do not wish to answer; however, we hope you answer as many questions as you can.
- Your responses will be combined with those of other respondents, and the answers you give will never be identified as yours.

The public reporting burden for this collection of information is estimated to average three hours (180 minutes), including one hour for the questionnaire, one and one-half hours for the Cognitive Test, and up to one-half hour for distributing materials, and giving instructions. Send comments regarding this burden estimate, or any other aspect of this collection of information, to: U.S. Department of Education, Information Management and Compliance Division, Washington, D.C. 20202-4561 and to the Office of Management and Budget, Paperwork Reduction Project, Washington, D.C. 20503.

The purpose of this survey is to collect information that will allow educators and policy makers to better understand the experiences individuals have in school as well as in the workplace.

This questionnaire is not a test. We hope you will answer each question truthfully, because we need your answer. You may skip any question you do not wish to answer.

PLEASE READ EACH QUESTION CAREFULLY.

It is important that you follow the directions for responding to each kind of question. These are:

A. CIRCLE ONE

What is the color of your eyes?

(CIRCLE ONE)

 Brown
 1

 Blue
 2

 Green
 3

 Another color
 4

If the color of your eyes is green, you would circle the number 3 as shown.

B. CIRCLE ONE ON EACH LINE

Do you plan to do any of the following next week?

(CIRCLE ONE ON EACH LINE)

Yes No Sure

- b. Go to a baseball game . . . 1 . . 2 . . (3)
- c. Stop by a friend's house 1)... 2 ... 3

If you do not plan to rent a videotape, are not sure about going to a baseball game next week, and plan to stop by a friend's house, you would circle one item on each line as shown.

C.	(QUESTION WITH A SKIP)
a.	Do you ever eat chocolate?
	(CIRCLE ONE CATEGORY)
	Yes
	No
b.	Do you always brush your teeth after eating chocolate?
	(CIRCLE ONE CATEGORY)
	Yes 1
	No 2
c.	Last week, did you do any of the following?

(CIRCLE ONE ON EACH LINE)

 Yes
 No

 Saw a play
 1
 2

 Went to a movie
 1
 2

 Attended a sporting event
 1
 2

I. ADDRESS INFORMATION

Last	First	:	Middle
ADDRESS:			
Numb	er	Street	
Apartment Number			
City	State		ZIP Code
TELEPHONE:	()		I do not have a telephone
	Area Code T	elephone Number	a telephone
/HEN WE SAY PAR ARENT/GUARDIAN IME.	ENT(S), MOTHE	R, OR FATHER, A	
ARENT/GUARDIAN	ENT(S), MOTHE OR STEP-PARE	R, OR FATHER, AN	NSWER FOR THE YOU LIVE MOST OF
ARENT/GUARDIAN IME.	ENT(S), MOTHE OR STEP-PARE	R, OR FATHER, AN	NSWER FOR THE YOU LIVE MOST OF
ARENT/GUARDIAN IME, Is your mother's add	ENT(S), MOTHE OR STEP-PARE dress and telephon	R, OR FATHER, AND MITH WHOM Note included the same and th	NSWER FOR THE YOU LIVE MOST OF

NAME:		
Last	First	Middle
ADDRESS:		
Nui	mber	Street
Apartment Number		
City	State	ZIP Code
TELEPHONE:	()	She does not have
	ner's work phone number?	
What is your moth TELEPHONE: She does not work	Area Code Telephone N	umber
TELEPHONE: She does not work	Area Code Telephone N	umber
TELEPHONE: She does not work I don't know the ph	Area Code Telephone N	
TELEPHONE: She does not work I don't know the ph	Area Code Telephone N	
TELEPHONE: She does not work I don't know the ph Is your father's ad	Area Code Telephone N	
TELEPHONE: She does not work I don't know the ph Is your father's ad Yes	Area Code Telephone N	he same as yours? P TO QUESTION 3C ON PAGE 3

NAME:							
Last	First	Middle					
Last	THSt	Middle					
ADDRESS:	mber	Charach					
Nui	noer	Street					
Apartment Number							
City	State	ZIP Code					
TELEPHONE:	Area Code Telepho	He does not have a telephone					
What is your father's work phone number?							
TELEPHONE:	Area Code Telephone	e Number					
He does not work							
I don't know the ph	one number 2						
Please write in the name, address, and telephone number of a relative or close friend does not live with you and who will always know how to contact you.							
does not live with							
does not live with y	you and who will always kno	w how to contact you.					
NAME: Last ADDRESS:	you and who will always kno	w how to contact you.					
NAME: Last ADDRESS:	you and who will always know	Middle					
NAME: Last ADDRESS: Nur	you and who will always know	Middle					

4B.	What is your relationship to this person?
	(CIRCLE ONE)
	A close friend
5A.	What is your marital status? (CIRCLE ONE)
	Single, never married
5B.	When did you marry your current spouse? (WRITE IN BELOW)
5C.	Is the address and telephone number of your spouse or ex-wife/husband the same as yours?
	(CIRCLE ONE)
	Yes 1 -> SKIP TO QUESTION 5E ON PAGE 6 No 2 -> GO TO QUESTION 5D ON PAGE 5

NAME:			
Last	First		Middle
ADDRESS:Nun	nber	Street	
Apartment Number	<u> </u>		
City	State		ZIP Code
TELEPHONE:	() Area Code	Telephone Number	He/She does not have a telephone 1

Please fill in the name, address, and telephone number of your ex-wife/husband or current

5D.

spouse.

II. YOUR EDUCATIONAL EXPERIENCES AND ACTIVITIES

5E.	What	is	today's	date?	(WRITE	IN	BELOW)
-----	------	----	---------	-------	--------	----	--------

111	_
Month	Day

QUESTION 5F, LIKE ALL ITEMS IN THIS QUESTIONNAIRE, IS VOLUNTARY. WE HOPE YOU WILL ANSWER EVERY QUESTION, BUT YOU MAY SKIP ANY QUESTION YOU DO NOT WISH TO ANSWER.

5F.	What is your social security number?	(WRITE IN NUMBER	BELOW)
-----	--------------------------------------	------------------	--------

		 		_		
The same of the same of	THE REAL PROPERTY.				 	

WHEN ANSWERING THE FOLLOWING QUESTIONS, PLEASE REMEMBER THAT "SCHOOL" REFERS TO A SCHOOL GRANTING OR LEADING TO A HIGH SCHOOL DIPLOMA.

IT DOES NOT REFER TO A SCHOOL OR PROGRAM LEADING TO A GED OR HIGH SCHOOL EQUIVALENCY DEGREE OR TO VOCATIONAL, TECHNICAL, BUSINESS, OR TRADE SCHOOL CERTIFICATION.

When did you last attend school (a school granting or leading to a high school diploma)?
 (CIRCLE ONE MONTH AND YEAR BELOW)

	Month		Year
January 01	May 05	September 09	1987 or before 01
February 02	June 06	October 10	198802
March 03	July 07	November 11	1989 03
April 04	August 08	December 12	199004
			199105
			199206

7.	What grade were you in then?								
0	CIRCLE ONE								
	8th grade								
	9th grade								
	10th grade								
	11th grade								
	12th grade								
	No grade system used								
8.	Did you pass that grade?								
Ü	CIRCLE ONE								
	Yes								

No 2

9A.

Here are some reasons other people have given for leaving school. Which of these would you say applied to you?

		Yes	No
a.	I got a job	1	2
b.	I didn't like school	1	2
c.	I couldn't get along with my teachers	1	2
d.	I couldn't get along with other students	1	2
e.	I wanted to have a family	1	2
f.	(FOR FEMALES ONLY) I was pregnant	1	2
g.	I became the father/mother of a baby	1	2
h.	I had to support my family	1	2
i.	I was suspended from school	1	2
j.	I did not feel safe at school	1	2
k.	I wanted to travel	1	2
1.	My friends had dropped out of school	1	2
m.	I had to care for a member of my family	1	2
n.	I was expelled from school	1	2
0.	I felt I didn't belong at school	1	2
p.	I couldn't keep up with my schoolwork	1	2
q.	I was getting poor grades/failing school	1	2
r.	I got married or planned to get married	1	2
S.	I changed schools and didn't like my new school	1	2
t.	I couldn't work and go to school at the same time	1	2
u.	I had a drug or alcohol problem	1	2
v.	Other (DESCRIBE BELOW)	1	2

			· · · · · · · · · · · · · · · · · · ·
Before you <i>last</i> left so other than illness?	chool, did you ever lea	ve school for more than	a month for a reason
		(CIRCLE ONE)	
Yes		1> GO TO Q	UESTION 10B
No		2> SKIP TO	QUESTION 14A ON PAG
	irst time you left scho NTH AND YEAR BEL	ol for <u>more than a mon</u> OW)	<u>th</u> ?
	Month		Year
January 01	May 05	September 09	1987 or before
February 02	June 06	October 10	1988
March 03	July 07	November 11	1989
April 04	August 08	December 12	1990
			1991
			1992
When did you retur	n to school? (CIRCL	E ONE MONTH AND	YEAR BELOW)
	Month		Year
January 01	May 05	September 09	1987 or before
February 02	June 06	October 10	1988
March 03	July 07	November 11	1989
April 04	August 08	December 12	1990
			1991
			1992

12A.	Did you leave school	a second time for mo	re than a month for a	reason other than illness?
			(CIRCLE ONE)	
	Yes		1> GO TO	QUESTION 12B
	No		2> SKIP T	O QUESTION 14A
12B.	When did you leave?	(CIRCLE ONE MO	NTH AND YEAR BELO	OW)
		Month		Year
	January 01	May 05	September 09	1987 or before 01
	February 02	June 06	October 10	1988 02
	March 03	July 07	November 11	1989 03
	April 04	August 08	December 12	1990 04
				1991 05
				1992
13A.	Did you return to se	hool again?	(CIRCLE OF	NE)
	Yes		1	> GO TO QUESTION 13B
	No		2	> SKIP TO QUESTION 14A
13B,	When did you return	? (CIRCLE ONE M	ONTH AND YEAR BEI	LOW)
		Mon	th	Year
	January 01	May 05	September 09	1987 or before 01
	February 02	June 06	October 10	1988 02
	March 03	July 07	November 11	1989 03
	April 04	August 08	December 12	1990 04
				1991 05
				1992 06
14A.	Did you attend school	during the 1990-91	school year? (CIRCLE ONE)	
	Yes		1> GO T	O QUESTION 14B ON PAGE 11
	No		2> SKIP	TO OUESTION 15 ON PAGE 11

ool du

18. How much do you agree with the following statements about the school you left?

		Strongly agree	Agree	Disagree	Strongly disagree
a	There was real school spirit	1	2	3	4
b.	Students made friends with students of other racial and ethnic groups	1	2	3	4
c.	The teaching was good	i	2	3	4
d.	Teachers were interested in students	1	2	3	4
e.	Disruptions by other students got in the way of my learning	1	2	3	4
f.	I didn't feel safe at this school	1	2	3	4
g.	Fights often occurred between different racial or ethnic groups	1	2	3	4
h.	There were many gangs in school	1	2	3	4

19. How many times did the following things happen to you during the last semester or term you completed in school?

		Never	1-2 times	3-6 times	7-9 times	10-15 times	Over 15 times
a.	I was late for school	00	01	02	. 03	04	. 05
ь.	I cut or skipped classes	00	01	02	. 03	04	. 05
c.	I missed a day of school	00	01	02	. 03	04	. 05
d.	I got in trouble for not following school rules	00,	01	02	. 03	04	. 05
e.	I was put on an in- school suspension	00	01	02	. 03	04	. 05
f.	I was suspended or put on probation from school	00	01	02	. 03	04	. 05
g.	I was transferred to another school for disciplinary reasons	00	01	02	. 03	04	. 05
h.	I was arrested	00	01	02	. 03	04	. 05
i.	I spent time in a juvenile home/detention center	00	01	02	. 03	04	. 05

20. In the last high school you attended, which of the following best describes the type of program you were in?

(CIRCLE ONE) b. General high school program 01 College prep, academic, or specialized d. Vocational, technical, or business and career Marketing or Distributive education 06 Technical occupations 10 e. Other specialized high school program (such as Fine Arts) 12 h. Alternative, Stay-in-School, or Dropout

21. Did anyone from your school do any of the following the last time you stopped going to school?

		Yes		No
a.	Offered to send me to another school	. 1	• • • • • • •	. 2
b.	Offered to put me in a special program	. 1		. 2
c.	Offered special tutoring	. 1		. 2
d.	Offered to help me make up work I missed	. 1,		. 2
e.	Offered to help me with personal problems	. 1		. 2
f.	Told me I could come back if I kept a certain grade point average	. 1		. 2
g.	Told me I could come back if I didn't miss school so often	. 1		. 2
h.	Told me I could come back if I followed school discipline rules	. 1		. 2
i.	Tried to talk me into staying	. 1		. 2
j.	Told me I couldn't come back	.1		. 2
k.	Expelled or suspended me	. 1		. 2
1	Called or visited my home	. 1		. 2

214	your purems or guaratants to any of the following the last time you stopped going to
	(CIRCLE ONE ON EACH LINE)
	Yes No
a.	Offered to send me to another school
ъ.	Offered to put me in a special program
c.	Offered to arrange for special tutoring 1 2
d.	Offered to help me make up work I missed 2
e.	Offered to help me with personal problems 1 2
f.	Tried to talk me into staying in school
g.	Told me it was "OK" to leave
h.	Told me they were upset 1 2
i.	Punished me for leaving school
j.	Told me it was my decision to make
k.	Called my principal/teacher 1 2
1.	Called a school counselor
m.	Offered to arrange for outside counseling for me (with a psychologist or social worker)
	e leaving school, have you enrolled in an educational institution, such as a vocational ade school, or a college?
	(CIRCLE YES OR NO ON EACH LINE)
	Yes No
a.	Technical, vocational, or trade school 1 2
b.	Two-year junior/community college: technical, vocational, or trade program
c.	Two-year junior/community college:

22.

academic program 2

Four-year college or university 2

GED program 1 2

24. In the past 2 years, did any of the following things happen to you?

		Yes		No
a.	I looked into an alternative school	. 1		. 2
b.	I saw a counselor/social worker	. 1		. 2
c.	I went to a youth center or outreach program	1	,	. 2
d.	I went to family counseling	. 1	,	. 2
e.	I did work for my religious group	1		. 2
f.	I was in a drug rehabilitation program	. 1	••••	. 2
g.	I was in an alcohol rehabilitation program	. 1		. 2
h.	I failed a competency test required for high school graduation	. 1		. 2
i.	I was held back a grade in school	. 1		. 2
j.	I failed a course in school	. 1	,	. 2

The next few questions have to do with <u>alternative programs</u> in schools. Students in alternative programs take courses or receive special services that are different from the courses and services that most students get.

A GED program is an alternative program ONLY IF it involves services or courses that are not available to most students.

An alternative program can be part of a regular high school or it can exist by itself. Examples of alternative programs are: a school-within-a-school, a program for teenage parents, a dropout prevention program, a street academy, or a high school re-entry program.

25.	Have you ever partic	ipated in an alternati	ve program? (CIRCLI	E ONE)	
	Yes		1	> GO TO QUESTION 26A	
	No	•	2	> SKIP TO QUESTION 31 OF	N PAGE 20
26A.	When did you enter to	the most recent altern THE MONTH AND	native program in which y YEAR BELOW)	you have participated?	
		Month		Year	
	January 01	May 05	September 09	1987 or before 01	
	February 02	June 06	October 10	1988 02	
	March 03	July 07	November 11	1989 03	
	April 04	August 08	December 12	1990 04	
				1991 05	
				1992 06	
26B.	Are you still enrolled	in this program?	(CIRCLE	CONE)	
	Yes		1	> SKIP TO QUESTION 27 O	N PAGE 1
	No, I left before	completing the progr	ram 2	> GO TO QUESTION 26C O	N PAGE 19

3 -> GO TO QUESTION 26C ON PAGE 19

No, I completed the program .

26C.	When did you leave or complete the most recent alternative program
	(CIRCLE ONE MONTH AND YEAR BELOW)

		Month		Year
	January 01	May 05	September 09	1987 or before 01
]	February 02	June 06	October 10	1988 02
. 1	March 03	July 07	November 11	1989 03
	April 04	August 08	December 12	1990 04
				1991 05
				1992 06
1	Which of the follow	ring people referred you	to this alternative pro	ogram?
			(CIRCLE ON	E ON EACH LINE)
			Yes	No
а	. Your parent(s)	1	2
- b	Your brother	s)/sister(s)	1	2
c	. A teacher	• • • • • • • • • • • • • • • • • • • •	1	2
d	I. A school princ	cipal	1	2
е	. A school coun	selor	1	2
f.	. A friend		1	2
g	. A relative	· · · · · · · · · · · · · · · · · · ·	1	2
h	. Your minister,	priest, or rabbi	1	2
i.	A social worke	er	1	2
j.	An adult friend	d or acquaintance outsid	de of school 1	2
k	. Yourself		1	2
V	Vhy did you enter t	his alternative program	? (WRITE IN BELOW	n)

		Yes	No	Program does/did not offer
	a.	Special instructional programs 1	2	' 3
	b.	Tutoring by teachers	2	3
	c.	Tutoring by other students	2	3
	d.	Incentives or rewards for attendance or classroom performance	2	3
	e.	Individual or group counseling 1	2	3
	f.	Career counseling 1	2	3
	g.	Job placement assistance 1	2	3
	h.	Health care or health care referrals	2	3
	i.	Childcare or nurseries for your children	2	3
30.	Altog	ether, in how many alternative programs have you par	ticipated?	
			(CIRCLE ONE)	
		1		
*		2	2	
		3 - 4	3	
		5 or more	4	
31.	Do yo	ou plan to get a GED, high school diploma, or its equiv	valent? RCLE ONE)	
		I have a GED or other equivalent	1> GO TO QUE	STION 32 ON PAGE 21
		Yes	2> SKIP TO QU	ESTION 33A ON PAGE 21
		No	3 -> SKIP TO QU	ESTION 35 ON PAGE 22

Have you received or did you receive any of the following services from this program?

(CIRCLE ONE ON EACH LINE)

29.

32.	When did you receive your GED, or equivalent?
	(WRITE IN BELOW)

33A.	Are you currently taking a class to prepare	for the GED examination?
------	---	--------------------------

33B. Do you plan to do either of the following?

(CIRCLE ONE)

(CIRCLE ONE)

34. About when do you expect to receive a high school diploma, or to take the examination for the GED or other high school equivalency exam? (WRITE IN DATE OR CIRCLE "1" BELOW)



Don't know 1

35. How often do you spend time on the following activities?

	Never/ rarely	Less than once a week	Once or twice a week	Every day or almost every day
a.	Using personal computers, not including playing video/computer games 1	2	3	4
b.	Working on hobbies, arts, or crafts on your own 1	2	3	4
c.	Participating in religious activities	2	3	4
d.	Participating in youth groups or recreational programs 1	2	3	4
e.	Doing volunteer or community service	2	3	4
f.	Driving or riding around (alone or with friends) 1	2	3	4
g.	Talking or doing things with your friends	2	3	4
h.	Talking or doing things with your mother or father 1	2	3	4
i.	Talking or doing things with other adults 1	2	3	4
j.	Taking classes (music, art, language, dance) 1	2	3	4
k.	Taking sports lessons 1	2	3	4
1.	Participating in sports 1		3	4

36. How important is each of the following to you in your life?

			Somewhat important	Very important
a.	Being successful in my line of work	. 1	2	3
b.	Finding the right person to marry and having a happy family life	. 1	2	3
c.	Having lots of money	. 1	2	3
d.	Having strong friendships	. 1	2	3
e.	Being able to find steady work	1,	2	3
f.	Helping other people in my community	. 1	2	3
g.	Being able to give my children better opportunities than I've had	. 1	2	3
h.	Living close to parents and relatives	. 1	2	3
i.	Getting away from this community	. 1	2	3
j.	Working to correct social and economic inequalities	. 1	2	3
k.	Having children	. 1	2	3
l.	Having leisure time to enjoy my own interests	. 1	2	3
m.	Getting away from my parents	. 1	2	3
n.	Becoming an expert in my field of work	. 1	2	3
0.	Getting a good education	. 1	2	3

37. How far in school do you think your father and your mother want you to go? (BE SURE TO ANSWER BOTH A AND B BELOW FOR PARENTS WITH WHOM YOU LIVE OR WITH WHOM YOU HAVE REGULAR CONTACT).

(IN EACH COLUMN, CIRCLE THE ONE HIGHEST NUMBER THAT APPLIES)

A. Fathe (or male gu		B. Mother (or female guardian)
Does not apply00		00
Less than high school graduation 01		01
High school graduation only or GED or its equivalent only		02
VOCATIONAL, TRADE, OR BUSINESS SCHOOL	AFTER HIGH SCHO	OOL
Less than two years of school 03		03
Two years or more of school 04		04
A degree from a vocational, trade, or business school		05
COLLEGE PROGRAM		
Less than two years of college 06		06
Two or more years of college (including two-year degree)		07
Finish college (four- or five-year degree) 08		08
GRADUATE OR PROFESSIONAL SCHOOL		
Master's degree or equivalent 09		09
Ph.D., M.D., or other professional degree		10
Don't know		11

38. As things stand now, how far in school do you think you will get?

(CIRCLE THE ONE HIGHEST NUMBER THAT APPLIES)

		Less than high school graduation
		High school graduation only
	voc	ATIONAL, TRADE, OR BUSINESS SCHOOL AFTER HIGH SCHOOL
		Less than two years of school
		Two years or more of school
		A degree from a vocational, trade, or business school
	COL	LEGE PROGRAM
		Less than two years of college
		Two or more years of college (including two-year degree)
		Finish college (four- or five-year degree)
	GRA	DUATE OR PROFESSIONAL SCHOOL
		Master's degree or equivalent
		Ph.D., M.D., or other professional degree
		Don't know
39.	Have	e any of the following people talked to you about continuing your education?
		(CIRCLE ONE ON EACH LINE)
	a.	Your parent(s)
	b.	Your brother(s)/sister(s) 2
	c.	A teacher 2
	d.	A school principal
	e.	A school counselor 2
	f.	A friend 2
	g.	A relative 2
	h.	Your minister, priest, or rabbi
	i.	A social worker
	j.	An adult friend or acquaintance outside of school
		0.5

Which of the categories below comes closest to describing the job or occupation that you expect or plan to have when you are 30 years old? Even if you are not sure, circle your best guess.

(CIRCLE ONLY ONE)

1

FARMER, FARM MANAGER
FULL-TIME HOMEMAKER
LABORER such as construction worker, car washer, garbage collector, farm worker
MANAGER such as sales manager, office manager, school administrator, retail buyer, restaurant manager, government administrator
MILITARY such as career officer or enlisted person in the Armed Forces
OFFICE WORKER such as data entry clerk, bank teller, bookkeeper, secretary, word processor, mail carrier, ticket agent
OPERATOR of machines or tools, such as meat cutter, assembler, welder, taxicab/bus/truck driver
OWNER of a small business or restaurant, contractor 08
PROFESSIONAL such as accountant, registered nurse, engineer, banker, librarian, writer, social worker, actor, athlete, artist, politician, but not including school teacher
PROFESSIONAL such as minister, dentist, doctor, lawyer, scientist, college teacher
PROTECTIVE SERVICE such as police officer, firefighter, detective, sheriff, security guard
SALES such as sales representative, advertising or insurance agent, real estate broker
SCHOOL TEACHER such as elementary, junior high, or high school, but not college
SERVICE WORKER such as hair stylist, practical nurse, child care worker, waiter, domestic, janitor
TECHNICAL such as computer programmer, medical or dental technician, draftsperson
TRADESPERSON such as baker, auto mechanic, housepainter, plumber, phone/cable installer, carpenter 16
NOT PLANNING TO WORK
WILL BE IN SCHOOL 18
OTHER 19

years from now? (CIRCLE ONE) No, I will need additional job training/apprenticeship 1 No, I will need additional work No, I will need to go to a two-No, I will need to go to a vocational or trade school 4 Yes, I have enough skills 5 40C. How much education do you think you need to get the job you expect to have when you are 30 years old? (CIRCLE ONLY ONE) High school diploma or GED or its equivalent ... 02 Less than two years of vocational, trade, or business school 03 Two years or more of vocational, trade, or business school 04 A degree from a vocational, trade, 2 year college degree 07 Graduate degree (Master's or Ph.D.) 09 Professional degree (J.D. or M.D.) 10

40B. Do you feel that you have enough skills right now for the job or career that you see yourself holding 5

IV. MONEY AND WORK

43 ON PAGE 29

In this section we ask you about the kinds of jobs you have had, the hours you worked and your income from these jobs, and the tie between your training and education and your work. Your answers will help us interpret the results of this survey.

41.	Wheth	er or not you already have a job, were you looking for a job last week?
		(CIRCLE ONE)
		Yes
		No 2> SKIP TO QUESTION
42.	Hav	e you done any of the following in the last week to find a job?
		(CIRCLE ONE ON EACH LINE
		Yes No
	a.	Checked with state employment agency
	b.	Checked with private employment agency
	c.	Checked with military recruiter
	d.	Checked directly with employer 1 2
	e.	Checked with friends or relatives
	f.	Placed or answered ads in newspaper
	g.	Looked in the newspaper classified ads
	h.	Checked with school employment service 2
	i.	Checked with a community college or university employment service
	j.	Other 1 2

NOW SKIP TO QUESTION 44A ON PAGE 29

43.	Why weren't you looking for a j	ob last week? (If	more than one reason,	, circle the main reason.)
			(CIRCLE	ONE)
	I already have a job		01	
	I'd like to go back to so	hool, full-time .	02	}
	I have to take care of n	ny children/family	y 03	}
	I have applied for jobs	but was not hired	04	F :
	The jobs I think I could	get I don't want	05	;
	I don't need the money		06	
	I don't like to work		07	· :
	No jobs are available		08	
	I lack the necessary skil	ls to get a job	09	
	Other (SPECIFY BELO)W)	10	
		,		
44A.	How many jobs have you held si	ince you last left	high school?	
		(CI)	RCLE ONE)	
	None		00> SKIP TO QU	ESTION 48A ON PAGE 40
	One		01> GO TO QUE	STION 44B
	Two		02> GO TO QUES	STION 44B
	Three		03> GO TO QUES	STION 44B
	Four		04> GO TO QUES	STION 44B
	Five or more		05> GO TO QUES	STION 44B
44B.	Please mark a box for each mor military) since you left high sch		you worked at all (full-	or part-time or were in the
	<u>1990</u>	1991		<u>1992</u>
	☐ June ☐ July ☐ August ☐ September ☐ October ☐ November ☐ December	☐ January ☐ February ☐ March ☐ April ☐ May ☐ June	☐ July ☐ August ☐ September ☐ October ☐ November ☐ December	☐ January ☐ February ☐ March ☐ April ☐ May

NEXT WE WOULD LIKE TO ASK YOU ABOUT TWO JOBS YOU HAVE HAD:

- YOUR CURRENT JOB OR, IF YOU ARE NOT PRESENTLY EMPLOYED, YOUR MOST RECENT JOB, AND
- YOUR <u>FIRST</u> JOB AFTER LEAVING HIGH SCHOOL.

FIRST COMPLETE QUESTION 45, PARTS A THROUGH P, FOR YOUR CURRENT OR MOST RECENT JOB, AND THEN COMPLETE ALL OF QUESTION 46 FOR YOUR FIRST JOB AFTER LEAVING HIGH SCHOOL.

IF YOU HAVE HAD ONLY ONE JOB SINCE LEAVING SCHOOL, YOU WILL COMPLETE ONLY QUESTION 45 FOR THAT ONE JOB.

IF YOU ARE OR HAVE BEEN IN THE MILITARY, CONSIDER YOUR ENTIRE MILITARY EXPERIENCE AS ONE JOB.

45. CURRENT OR, IF NOT CURRENTLY EMPLOYED, MOST RECENT JOB

IF YOU HAVE (OR MOST RECENTLY HAD) TWO JOBS AT THE SAME TIME, ANSWER
THE QUESTIONS BELOW FOR THE JOB YOU HAVE HAD THE LONGEST.

45A. Which of the categories below comes closest to describing your current or, if presently unemployed, most recent job? Even if you are not sure, circle your best guess.

(CIRCLE ONE)

FARMER, FARM MANAGER
FULL-TIME HOMEMAKER 02
LABORER such as construction worker, car washer, garbage collector, farm worker
MANAGER such as sales manager, office manager, school administrator, retail buyer, restaurant manager, government administrator
MILITARY such as career officer or enlisted person in the Armed Forces
OFFICE WORKER such as data entry clerk, bank teller, bookkeeper, secretary, word processor, mail carrier, ticket agent
OPERATOR of machines or tools, such as meat cutter, assembler, welder, taxicab/bus/truck driver
OWNER of a small business or restaurant, contractor
PROFESSIONAL such as accountant, registered nurse, engineer, banker, librarian, writer, social worker, actor, athlete, artist, politician, but not including school teacher
PROFESSIONAL such as minister, dentist, doctor, lawyer, scientist, college teacher
PROTECTIVE SERVICE such as police officer, firefighter, detective, sheriff, security guard
SALES such as sales person, sales representative, advertising or insurance agent, real estate broker
SCHOOL TEACHER such as elementary, junior high, or high school, but not college
SERVICE WORKER such as hair stylist, child care worker, waiter, domestic, janitor, practical nurse
TECHNICAL such as computer programmer, medical or dental technician, draftsperson
TRADESPERSON such as baker, auto mechanic, housepainter, plumber, phone/cable installer, carpenter 16
OTHER (WRITE IN BELOW)

· D.	what kind of job or occupation do you have: (wkite in below)
C.	What kind of business or industry is this job in? (WRITE IN BELOW)
D.	What are your main activities or duties on this job? (WRITE IN BELOW)
SE.	When did you start working at this job? (WRITE IN BELOW)
	_ 19 MONTH YEAR
₹.	Do you still have this job?
	(CIRCLE ONE)
	Yes 1> SKIP TO 45J ON PAGE 33
	No 2> GO TO 45G
	When did you leave this job? (WRITE IN BELOW)
	_ 19 YEAR
	Why did you leave this job?
	(CIRCLE THE ONE MOST IMPORTANT REASON)
	Job ended (temporary or seasonal job, laid off, or fired)
	School-related reasons (graduated, school started, school year ended)
	Quit because job, hours, or pay, etc., unsatisfactory
	Moved elsewhere
	Health-related reasons (illness, injury, pregnancy)

	(CIRCLE ONE)
	Yes 1> How many weeks were or have you been looking? WEEKS
	No 2
45J.	How much do/did you earn per hour when you first started this job?
	(CIRCLE ONE)
	Less than \$4.25
	\$4.25 - 6.00
	\$6.01 - 8.00
	\$8.01 - 10.00
	\$10.01 - 12.00
	\$12.01 - 14.00
	\$14.01 - 16.00
	\$16.01 or more
45K.	How much do you earn per hour currently, or did you earn just before you left this job?
	(CIRCLE ONE)
	Less than \$4.25 01
	\$4.25 - 6.00
	\$6.01 - 8.00
	\$8.01 - 10.00
	\$10.01 - 12.00
	\$12.01 - 14.00
	\$14.01 - 16.00
	\$16.01 or more

Were you without a job AND looking for work right after you left this job?

45I.

45L.	About how many hours a week did or do you usually work in this job? (WRITE IN BELOW)				
	Hours Per Week:				
45M.	How did you find this job?				
	(CIRCLE THE ONE MOST IMPORTANT CATEGORY)				
	School employment or placement service				
	Public employment service				
	Private employment agency				
	Newspaper advertisement				
	Checked with employer directly				
	Through a relative				
	Through a friend 07				
	Civil Service application				
	Union registration				
	Other (WRITE IN BELOW)				
45N.	In this job are/were you (CIRCLE ONE)				
	An employee of a COMPANY or BUSINESS? 01				
	An employee of a NON-PROFIT organization or institution? 02				
	A GOVERNMENT employee (federal, state, local)? 03				
	Self-employed?				
	Working FOR PAY in your family's business or farm? 05				
	Working WITHOUT PAY in your family's business or farm? 06				
	Working WITHOUT PAY in a VOLUNTEER JOB? 07				

10%	did you learn to do this job?		
	(CIRCL	E ON	E ON EACH LIN
		Yes	No
	In one or more classes in high school	. 1	2
	In a vocational, trade, business, or other career training school	. 1	2
	In an apprenticeship or government training program	. 1	2
l.	In a junior/community college, or 4-year college or university	. 1	2
	In the Armed Forces	. 1	2
	A co-worker trained me	. 1	2
	I learned by myself	. 1	2
-	In a union-sponsored training program	. 1	2
	In an employer-sponsored training program	. 1	2
	I learned at a previous job	. 1	2
	Other (DESCRIBE BELOW)	. 1	2
ave	you held any other jobs since you left school?		
	(CIRCLE ONE)		

No 2 --> SKIP TO QUESTION 47 ON PAGE 40

450.

45P.

46. FIRST JOB AFTER LEAVING HIGH SCHOOL.

IF YOU HAD TWO JOBS AT THE SAME TIME, ANSWER THE QUESTIONS BELOW FOR THE JOB YOU HAD THE LONGEST.

46A. Which of the categories below comes closest to describing your first job after high school? Even if you are not sure, circle your best guess.

(CIRCLE ONE)

FARMER, FARM MANAGER
FULL-TIME HOMEMAKER
LABORER such as construction worker, car washer, garbage collector, farm worker
MANAGER such as sales manager, office manager, school administrator, retail buyer, restaurant manager, government administrator
MILITARY such as career officer or enlisted person in the Armed Forces
OFFICE WORKER such as data entry clerk, bank teller, bookkeeper, secretary, word processor, mail carrier, ticket agent
OPERATOR of machines or tools, such as meat cutter, assembler, welder, taxicab/bus/truck driver 07
OWNER of a small business or restaurant, contractor 08
PROFESSIONAL such as accountant, registered nurse, engineer, banker, librarian, writer, social worker, actor, athlete, artist, politician, but not including school teacher
PROFESSIONAL such as minister, dentist, doctor, lawyer, scientist, college teacher
PROTECTIVE SERVICE such as police officer, firefighter, detective, sheriff, security guard
SALES such as sales representative, advertising or insurance agent, real estate broker
SCHOOL TEACHER such as elementary, junior high, or high school, but not college
SERVICE WORKER such as hair stylist, practical nurse, child care worker, waiter, domestic, janitor
TECHNICAL such as computer programmer, medical or dental technician, draftsperson
TRADESPERSON such as baker, auto mechanic, housepainter, plumber, phone/cable installer, carpenter 16
OTHER (WRITE IN BELOW)

46B.	When did you start working at this job? (WRITE IN BELOW)
	_ 19 YEAR
46C.	When did you leave this job?
	19 YEAR
46D.	Why did you leave this job?
	(CIRCLE THE ONE MOST IMPORTANT REASON)
	Job ended (temporary job, laid off, or fired)
	Found a better job or was promoted
	Health-related reasons (illness, injury, pregnancy) 06
	Other (WRITE IN BELOW)
46E.	Were you without a job AND looking for work right after you left this job?
	(CIRCLE ONE)
	Yes How many weeks were you looking? WEEKS
	No 2
46F.	How much did you earn per hour when you first started this job?
	(CIRCLE ONE)
	Less than \$4.25
	\$4.25 - 6.00
	\$6.01 - 8.00
	\$8.01 - 10.00
	\$10.01 - 12.00
	\$12.01 - 14.00
	\$14.01 - 16.00
	\$16.01 or more

	(CIRCLE ONE)
	Less than \$4.25
	\$4.25 - 6.00
	\$6.01 - 8.00
	\$8.01 - 10.00
	\$10.01 - 12.00
	\$12.01 - 14.00
	\$14.01 - 16.00
	\$16.01 or more
46H.	About how many hours a week did you usually work in this job? (WRITE IN BELOW)
	Hours Per Week:
461.	How did you find this job?
	(CIRCLE THE ONE MOST IMPORTANT CATEGORY)
	School employment or placement service
	Public employment service 02
	Private employment agency
	Newspaper advertisement
	Checked with employer directly
	Through a relative 06
	Through a friend 07
	Civil Service application
	Union registration 09
	Other (WRITE IN BELOW) 10

How much did you earn just before you left this job?

46G.

46J. In this job are/were you... (CIRCLE ONE) An employee of a COMPANY or BUSINESS? 01 An employee of a NON-PROFIT organization or institution? . . 02 A GOVERNMENT employee (federal, state, local)? 03 Working FOR PAY in your family's business or farm? 05 Working WITHOUT PAY in your family's business or farm? .. 06 Working WITHOUT PAY in a VOLUNTEER JOB? 07 46K. How did you learn to do this job? (CIRCLE ONE ON EACH LINE) Yes No In a vocational, trade, business, or other b. In an apprenticeship or government c. training program 1 2 In a junior/community college, or 4-year d. e. f. g. In a union-sponsored training program 1 2 h.

In an employer-sponsored training program 1 2

i.

j.

k.

47.	How much of the money you earn at your current job is spent on each of the categories listed below?
	(If you are currently unemployed, answer for the last job you had.)

(CIRCLE ONE ON EACH LINE)

	(CIRCLE ONE ON EACH LINE)						
	No	ne of it	Some of it	Most of it			
a.	To buy clothes or other things	. 1	2	3			
b.	To go out	. 1	2	3			
c.	To pay for gas and other car expenses	. 1	2	3			
d.	To pay for rent	. 1	2	3			
e.	To purchase food	. 1	2	3			
f.	To pay for my future education	. 1	2	3			
g.	To buy alcoholic beverages	. 1	2	3			
h.	To buy illegal drugs	. 1	2	3			
Have you participated in a state- or union-sponsored apprenticeship? (CIRCLE ONE) No							
When did you complete the apprenticeship? (If you did not complete the apprenticeship, circle "1" below.)							
,	_ 19 MONTH	YEAR					
	I did not complete the apprenticeship .		1				

48A.

48B.

49A.	Have you participated in a government (federal, state, or local) job training program?
	(CIRCLE ONE)
	No 1> SKIP TO QUESTION 50A
	Yes, I am currently participating in such a program
	Yes, I participated in such a program in the past 3> GO TO QUESTION 49B
49B.	When did you complete the program? (If you did not complete the program, circle "1" below.)
	_ 19 MONTH YEAR
	I did not complete the program
50A.	Have you taken any courses by mail or television?
	(CIRCLE ONE)
	Yes
	No
50B.	When did you first start taking courses by mail or television?
	MONTH YEAR
51A.	Since leaving high school, have you served (or are you serving) in the regular Armed Forces, the Reserves, the National Guard, or the ROTC? (CIRCLE ONE)
	Yes
	No

	(CIRCLE ONE)
	No, and I don't plan to enlist
	No, but I plan to try to enlist soon 2> SKIP TO QUESTION 57 ON PAGE 4
	Yes, I have tried to enlist and was not accepted 3> SKIP TO QUESTION 57 ON PAGE 4
	Yes, and I am waiting for an answer
	Yes, and I have been accepted
52A.	In which branch of the Armed Forces did you serve (are you serving)?
	(CIRCLE ONE)
	Regular Armed Forces (Army, Navy, Air Force, Marines)
	Coast Guard
	National Guard or Reserves
	ROTC4
52B.	When did you begin active duty? (WRITE IN BELOW)
	_ 19 MONTH YEAR
53A.	Have you received (or are you receiving) four or more weeks of specialized schooling while in the Armed Forces?
	(CIRCLE ONE)
	Yes
	No 2> SKIP TO QUESTION 54 ON PAGE 43
ЗВ.	What is the name of the specialized schooling program in which you spent/will spend the longest period of time? (PLEASE PRINT AND DO NOT ABBREVIATE)
	NAME OF PROGRAM:

Since leaving high school, have you tried to enlist in any branch of the Armed Forces?

51B.

		(CIRCLE ONE ON EACH LIN	VE)
		Yes N	0
	a.	Prepared you for the high school equivalency test?	2
	b.	Prepared you for equivalency tests that can be taken for college credit?	2
	c.	Were college-sponsored courses which gave college credits?	2
55A.	Are	you currently on active duty?	
		(CIRCLE ONE)	
		Yes	
		No 2> GO TO QUESTION 55B	
55B.	Wh	nen did you leave? (WRITE IN BELOW)	
		_ 19 MONTH YEAR	
56.	Wh	nat is/was your main reason for joining the Armed Forces?	
		(CIRCLE ONE)	
		a. To serve my country1	
		b. I needed a job	
		c. To receive training for future jobs	
		d. To receive money for further education	
		e. Other reason5	

Have you taken any courses while in the Armed Forces that...

54.

V. YOUR OPINIONS ABOUT YOURSELF AND YOUR ATTITUDES

57. How do you feel about each of the following statements?

		Strongly agree	Agree	Disagree	Strongly disagree
a.	I feel good about myself	1	2	3	4
b.	I don't have enough control over the direction my life is taking	1	2	3	4
c.	In my life, good luck is more important than hard work for success	1	2	3	4
d.	I feel I am a person of worth, the equal of other people	1	2	3	4
e.	I am able to do things as well as most other people	1	2	3	4
f.	Every time I try to get ahead, something or somebody stops me	i	2	3	4
g.	My plans hardly ever work out, so planning only makes me unhappy.	1	2	3	4
h.	On the whole, I am satisfied with myself	1	2	3	4
i.	I feel useless at times	1	2	3	4
j.	At times, I think I am no good at all	1	2	3	4
k.	When I make plans, I am almost certain I can make them work	1	2	3	4
1.	I feel I do not have much to be proud of	1	2	3	4
m.	Chance and luck are very important for what happens in my life	1	2	3	4

		Very low	Low	About fifty-fifty	High	Very high
a.	You will graduate from high school?	. 1	. 2	3	. 4	. 5
b.						
c.	You will have a job that pays well?	. 1	. 2	3	. 4	. 5
d.						
e.	You will have a job that you enjoy doing?	. 1	. 2	3	. 4	. 5
f.	You will have a happy family life?	. 1	. 2	3	. 4	. 5
g.	You will stay in good health most of the time?	. 1	. 2	3	. 4	. 5
h.	You will be able to live wherever you want in the country?	. 1	. 2		. 4	. 5
i.	You will be respected in your community?	. 1	. 2		. 4	. 5
j.	You will have good friends you can count on?	. 1	. 2		. 4	. 5
k.	Life will turn out better for you than it has for your parents?	. 1	. 2		. 4	. 5
1.	Your children will have a better life than you had?	. 1	. 2	3	4	. 5

THE FOLLOWING QUESTIONS ARE IMPORTANT IN ORDER TO UNDERSTAND HOW YOUR RELATIONSHIPS RELATE TO YOUR LIFE. LIKE ALL ITEMS IN THIS QUESTIONNAIRE, THEY ARE VOLUNTARY. WE HOPE YOU WILL ANSWER EVERY QUESTION, BUT YOU MAY SKIP ANY QUESTION YOU DO NOT WISH TO ANSWER.

59.	How	many of your friends		(CIRCLE C	ONE ON EACH LIN	E)
			None of them	A few of them	Some Most of of them them	All of them
	a. Drop with	oped out of school out graduating?	1,	. 2	3 4	5
	b. Have	no plans to go to college?	1	. 2	3 4	5
	c. Plan time	to have a regular full- job after high school?	1	. 2	3 4	5
	d. Plan colle	to attend a two-year commu ge or technical school?	nity 1	. 2	3 4	5
	e. Plan	to attend a four-year ge or university?	,			
60.	Among	your close friends, how impo	ortant is it to			
				(CIRCLE (ONE ON EACH LIN	E)
			Not a	at all rtant	Somewhat important	Very important
	a.	Attend classes regularly? .		1		3
	b.	Study?		1	2	3
	c.	Play sports?		1	2	3
	d.	Get good grades?		1	2	3
	e.	Be popular/well-liked by ot	hers?	1		3
	f.	Finish high school?		1	2	3
	g.	Have a steady boyfriend/ girlfriend?		1	2	3
	h.	Continue their education past high school?		1	2	3
	i.	Participate in religious activities?		1	2	3
	j.	Do community work or volunteering?		1	2	3

60. (Cont.) Among your close friends, how important is it to . . .

				Not at all important	Somewhat Important	
	k.	Have a regular job?		1	2 .	3
	1.	Get together with friend				
	m.	Go to parties?		1	2 .	3
	n.	Have sexual relations?		1	2 .	3
	0.	Use drugs?		1	2 .	3
	p.	Drink alcoholic beverag	es?	1	2 .	3
	q.	Make money?		1	2 .	3
61.	A. Hov	many of your friends be	long to a ga	ing?		
					(CIRCLE	ONE)
		None of them			1	ξ.,
		Some of them			2	2
		Most of them			3	}
61	B. Do	you belong to a gang?			(CIRCLE	ONE)
		Yes			1	ļ:
		No			2	:
62.	At w	hat age do you expect to.	••	(CIRCLE ON	ON EACH LINE	Σ)
			Don't	Have		
			expect	already		
			to do this	done Und this 18		30 or 22-25 26-29 older
a.	Get mar	ried?	01	. 02 03	04	. 05 06 07
b.	Have you	ur first child?	01	. 02 03	04	. 05 06 07
c.		r first regular (not summer) job?	01	. 02 03	04	. 05 06 07
d.	Live in y		01	. 02 03	04	. 05 06 07
e.	Finish yo		01	. 02 03	04	. 05 06 07

QUESTIONS 63-69, LIKE ALL ITEMS IN THIS QUESTIONNAIRE, ARE VOLUNTARY. WE HOPE YOU WILL ANSWER EVERY QUESTION, BUT YOU MAY SKIP ANY QUESTION YOU DO NOT WISH TO ANSWER. THE FOLLOWING QUESTIONS ARE IMPORTANT IN ORDER TO UNDERSTAND HOW YOUR RELATIONSHIPS RELATE TO YOUR OTHER EXPERIENCES.

63.	Did your current spouse leave high school before graduating?
	(CIRCLE ONE)
	I am not currently married
	No, he/she is currently attending high school 2
	No, he/she graduated from high school
	No, he/she graduated from high school and is attending college or vocational/technical school 4
	Yes, he/she left high school before graduating 5
64.	In your opinion, how important is it to be married before having sexual intercourse?
	(CIRCLE ONE)
	Not important at all
	Somewhat important 2
	Very important
65.	Would you consider having a child if you weren't married?
	(CIRCLE ONE)
	No 1
	Maybe 2
	Yes
	Don't know
66.	Do you have any children of your own? (CIRCLE ONE)
	No, I don't
	No, but I am expecting one 2> SKIP TO QUESTION 69 ON PAGE 49
	Yes, I do

		Moungest child	_ 19 lonth	Year	
		Oldest child M		 Year	
68.	How	v often do the following people help care for yo	ur youngest chi	ild?	
			(CIRCLE ON	NE ON EACH LINE)	
		Never		Some of the time	Most of the time
	a.	You 0		. 1	2
	b.	The child's other parent/step-parent 0		. 1	2
	c.	The child's grandparent 0		. 1	2
	d.	Another relative (sister, uncle, aunt, cousin) 0		. 1	2
	e.	A friend 0		. 1	2
	f.	A neighbor 0		. 1	2
	g.	A day care center or preschool 0		. 1	2
	h.	A babysitter at your home or at the babysitter's home 0		. 1	2
69.	Whi	ch of the following best describes your relation	ship with the f	ather/mother of your	youngest child?
		**	(0	CIRCLE ONE)	
		We are married and living together		01	
		We are married and not living together		02	
		We are divorced/legally separated			
		We are living together but not married		04	
		We are dating		05	
		He/she is no longer living		06	
		We see each other occasionally		07	
		We don't see each other any more		08	

67.

What are their birthdates? (WRITE IN BELOW)

QUESTIONS 70-75, LIKE ALL ITEMS IN THIS QUESTIONNAIRE, ARE VOLUNTARY. WE HOPE YOU WILL ANSWER EVERY QUESTION, BUT YOU MAY SKIP ANY QUESTION YOU DO NOT WISH TO ANSWER.

70. How many cigarettes do you usually smoke in a day?

(CIRCLE ONE)
I don't smoke at all
Less than 1 cigarette per day 01
1 to 5 cigarettes a day 02
About 1/2 pack a day
More than 1/2 pack but
less than 2 packs a day 04
Two packs a day or more

IN THE QUESTIONS THAT FOLLOW, "ALCOHOLIC BEVERAGES" INCLUDES BEER, WINE, WINE COOLERS, AND LIQUOR.

71. On how many occasions (if any) have you had alcoholic beverages to drink?

(CIRCLE ONE ON EACH LINE)

		0 Occasions	1-2 Occasions	3-19 Occasions	20+ Occasions
a.	In your lifetime	0	1	2 ,	3
b.	During the last 12 months	0	1	2	3
c.	During the last 30 days	0	1	2	3

72. Think back over the LAST TWO WEEKS. How many times have you had five or more drinks in a row? (A "drink" is a glass of wine, a bottle of beer, a shot glass of liquor, or a mixed drink).

(CIRCLE ONE)

None
Once 02
Twice 03
Three to five times
Six to nine times
Ten or more times

			(C	IRCLE ONE ON E	ACH LINE)	
		Occ	0 casions	1-2 Occasions	3-19 Occasions	20+ Occasions
	a.	In your lifetime	0	1"	2	3
	b.	During the last 12 months	0	1	2	3
	c.	During the last 30 days	0	1	2	3
74.	On	how many occasions (if any) have	you taken c	ocaine in any form	(including crack)	?
			(CIRCLE ONE ON	EACH LINE)	
		Occ	0 asions	1-2 Occasions	3-19 Occasions	20+ Occasions
	a.	In your lifetime	0	1	2	3
	b.	During the last 12 months	0	1	2	3
	c.	During the last 30 days	0	1	2 ,	3
75.	In t	he last semester or term you comp influence of the following on scho	leted in scho ol grounds?	ool, on how many oc		ere you under
			0 asions	1-2 Occasions	3-19 Occasions	20+ Occasions
	a.	Alcohol.	0	1	2	3
	b.	Marijuana or hashish	0	1	2	3
	c.	Cocaine (including crack)	0	1	2	3

On how many occasions (if any) have you used marijuana (pot) or hashish (hash, hash oil)?

73.

VI. YOUR FAMILY

76A. Which of the following people live in the same household with you?

		Yes No
	a.	Father 2
	b.	Stepfather 2
	c.	Other adult male (foster father, guardian, other) 1
	d.	Mother 2
	e.	Stepmother 2
	f.	Other adult female (foster mother, guardian, other)
	g.	Your husband/wife 2
	h.	Your boyfriend/girlfriend
76B.	Hov	many of the following people live in the same household with you?
		(CIRCLE ONE ON EACH LINE)
		None One Two Three Four Five Six or more
	a.	Brother(s) (including adopted, step- or half-) 00 01 02 03 04 05 06
	b.	Sister(s) (including adopted, step- or half-)
	c.	Your child or children 00 01 02 03 04 05 06
	d.	Grandparent(s) 00 01 02 03 04 05 06
	e.	Other relative(s) (under 18)
	f.	Other relative(s) (over 18)
	g.	Other non-relative(s) (under 18)
	h.	Other non-relative(s) (over 18)

77.	Do you babysit or take care of your own child, younger brothers or sisters, or other younger relatives?
	(CIRCLE ONE)
	Yes
	No 2 -> SKIP TO QUESTION 80 ON PAGE 54
78.	About how many hours each day are you responsible for their care?
	(CIRCLE ONE)
	Less than 1 hour
	1 hour, less than 3 hours
	3 hours, less than 5 hours
	5 hours, less than 7 hours
	7 hours, less than 10 hours
	10 hours or more a day
79.	The last year that you were in school, about how many school days did you miss in a typical month because of taking care of your own child, younger brothers or sisters, or other younger relatives?
	(CIRCLE ONE)
	None
	1-2 days
	3-6 days
	7-9 days
	10 days or more

80. Lots of things happen in families that may affect young people. In the last 2 years, have any of the following happened to your family?

	Ye	es No
a.	My family moved to a new home	1 2
b.	My parents got divorced or separated	1 2
c.	One of my parents got married or remarried	12
d.	One of my parents lost his/her job	12
e.	One of my parents started to work	1 2
f.	One of my parents got a better job	1 2
g.	I became seriously ill or disabled	1 2
h.	One of my parents died	1 2
i.	A close relative died	1 2
j.	One of my unmarried sisters got pregnant	1 2
k.	One of my brothers or sisters dropped out of school	1 2
1.	My family was on welfare	1 2
m.	My family went off welfare	1 2
n.	A family member became seriously ill or disabled	1 2
0.	A member of my family used lillegal drugs	1 2
p.	A member of my family spent time in a drug/alcohol rehabilitation program	1 , 2
q.	A member of my family was the victim of a crime	1 2

ANSWER QUESTIONS 81 AND 82 ONLY IF YOU CURRENTLY LIVE WITH YOUR PARENT OR GUARDIAN. IN THESE QUESTIONS, "GUARDIAN(S)" MAY INCLUDE FOSTER PARENTS, LEGAL GUARDIANS, OR OTHER OLDER ADULTS LIVING IN YOUR HOUSEHOLD, SUCH AS GRANDPARENTS, WHO ARE RESPONSIBLE FOR YOU.

81. In your family, who makes most of the decisions on each of the following topics?

			My parent(s)/ guardian(s) decide them- selves	My parent(s)/ guardian(s) decide after discussing it with me	We decide together after discussing it	I decide after discussing it with my parent(s)/ guardian(s)	I decide by myself
	a.	How late you can stay out	1	2	3	4	. 5
	b.	When you can use the car	1 ·	2	3	4	. 5
	c.	Whether you can have a job	1	2	3	4	. 5
	d.	How you spend your money	1	2		4	. 5
	e.	Whether you can drink alcohol in front of them	1	2	3	4	. 5
	f.	Whether you can drink alcohol when you are at parties/social gatherings without them	1	2		4	. 5
į	g.	If privileges should be taken away because you used alcohol or drugs	1	2	3	. 4	. 5
]	h.	Whether you should go to college or vocational technical school	/	2		4	. 5

82. How true are the following statements for you and your parent(s)/guardian(s)?

		False		Mostly false	More false than true	More true than faise	Mosti true	ly True
a.	My parent(s)/guardian(s) trust me to do what they expect without checking up on me	. 01	• • •	. 02	03	04	05	06
b.	I often do not know WHY I am supposed to do what my parent(s)/ guardian(s) tell me to do.	. 01	• • • •	. 02	03	04	05	06
c.	I often count on my parent(s)/guardian(s) to solve many of my problems for me	. 01		. 02	03	04	05	06
d.	I think that I will be a source of pride to my parent(s)/guardian(s) in the future	. 01		. 02	03	04	05	06
e.	My parents/guardians get along well with each other	. 01		. 02	03	04	05	06
f.	When I grow up and have a family, it will be similar to my own	. 01		02	03	04	05	06

	83.	Did you run away from home for a week or more at any time during the last two years?
		(CIRCLE ONE)
		Yes
		No 2
	84.	How old were you when you were first left alone for one week or longer without other adults in th household? (If you have never been left alone for one week or longer, circle "1" below.) (WRITE IN BELOW)
		YEARS OLD
		I have never been left alone for a week or longer
	85.	How many times have you moved since January 1, 1988?
		(CIRCLE ONE)
		None 1
		1 time
		2 times
ı		3 or more times
	86.	How many times have you changed schools <u>since January 1, 1988?</u> (DO NOT count changes that occurred as a result of promotion to another grade level or a move from a middle school building to a high school building in the same district.)
		(CIRCLE ONE)
		None 1
		1 time
		2 times
		3 or more times

NOTE: The following two questions concern the basic right of self-expression. Your answers will help us interpret the results of the survey. We hope you will answer both questions, but you may leave them blank.

87.	Do you think of yourself as a religious person? (CIRCLE ONE)	
	Yes, very	
	Yes, somewhat 2	
	No, not at all	
88.	In the past year, about how often have you attended religious services?	
00.	In the past year, about now often have you attended rengious services.	
00.	(CIRCLE ONE)	
00.		
00.	(CIRCLE ONE)	
00.	(CIRCLE ONE) More than once a week	
00.	(CIRCLE ONE) More than once a week	
00.	(CIRCLE ONE) More than once a week	

VII. LANGUAGE USE

89.	Is English your native language	(the first lan	guage you learned to speak when you w	vere a child)?
0		((CIRCLE ONE)	
	Yes	,	1> SKIP TO PAGE 62	
	No		2> GO TO QUESTION 90	
90.	How often do you use your nativ (IF ANY EXAMPLE DOES NO		ith YOU, PLEASE CIRCLE "Does not app	oly")
			(CIRCLE ONE ON EACH LINE)	
		Always or most of the time	About half of the time Sometimes Never	Does not apply
	a. Your mother?	1	2 3 4	5
	b. Your father?	1	2 3 4	5
	c. Your brothers and sisters?	1	2 3 4	5
	d. Your friends?	1	2 3 4	5
	e. Your spouse?	1	2 3 4	5
91.	How well do you do the following	•	IRCLE ONE ON EACH LINE)	
		Very well	Well well	Not at all
	a. Understand spoken Englis	h1	2	4
	b. Speak English	1	2	4
	c. Read English	1		4
	d. Write English	1	2	4

			(CIRCL	E ONE)		
		Yes	1 -	> GO TO QUESTION	92B	
		No	2	-> SKIP TO QUESTIO	N 93	
92B.	Wa	s the special help in the form of	(CIR	CLE ONE ON EACH LI	NE)	
				Yes No		
	a.	Individual (one-to-one) tutoring?		12		
	b.	A small group?		1		
	с.	A large group other than your regular	r class?	2		
	d.	English as a Second Language?		12		
	e.	Bilingual education?		12		
92C.		w much have your English skills improve sses or activities?		g areas because you part		
			Not at all	Somewhat	A great deal	
	a.	Understanding spoken English	1		3	
	b.	Speaking English	1	2	3	
	c.	Reading English	1		3	
	d.	Writing English	1	2	3	
93.		nking back to when you last left school, wledge of the English language?	do you feel that	t you might have stayed i	n school if you had	d bette
				(CIRCLE ONE)		
		Yes		1		
		No		2		

When you were in school, did you ever receive special help in reading, writing, or speaking English?

92A.

94. How much of a problem do you feel your understanding of the English language is or would be in the following situations?

		No pr		m			oble	200			ajor olem
a.	Obtaining good grades in high school		1 .				 2		 	 	 3
b.	Getting hired for a job that you really want		1.			٠.,	 2	•	 	 	 3
c.	Getting higher pay in a job	1	1.			,	 2		 	 	 3
d.	Applying to a four-year college	1	1.		٠	٠.	 2		 	 	 3
e.	Applying to a two-year community/junior college	1	1.				 2		 	 	 3
f.	Applying to a vocational, technical, trade, or business school	1	1.		.,.		 2		 	 	 3
g.	Getting accepted at a four- year college	1	ι.				 2		 	 	 3
h.	Getting accepted at a two-year community/junior college	1	1 .			٠,	 2	·	 	 	 3
i.	Getting accepted at a vocational, technical, business, or trade school .	1	ι.				 2		 	 	 3
j.	Getting good grades in college	1	ι.	,			 2		 	 	 3
k.	Getting good grades in vocational, technical, business, or trade school .	1	ι.	, . _. .			 2		 	 	 3

PERMISSION FORM

This form is to request your signed permission to have the last school you attended give us a copy of your high school transcripts. The information will be used solely for the purposes of this survey. We wish to thank you in advance for your help and cooperation.

SCHOOL RECORD INFORMATION

Please give the NELS:88 Second Follow-Up a copy of my school transcript. The information to be given includes standard test scores, grade point averages, and attendance records.

6	ignature	

THANK YOU FOR YOUR COOPERATION.