

**NOTICE** – This report is authorized by law (20 U.S. Code 1221e). Your answers will be kept strictly confidential. Results from this survey will appear in summary or statistical form only, so that individuals cannot be identified.

FORM **TFS-2**  
(12-16-94)

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

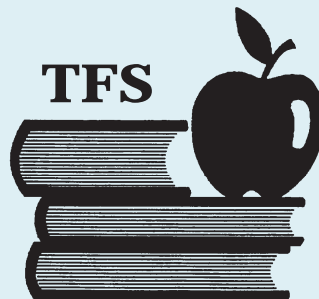
# **TEACHER FOLLOW-UP SURVEY**

## **QUESTIONNAIRE FOR FORMER TEACHERS**

### **1994 – 1995**

Conducted by:

U.S. Department of Commerce  
Bureau of the Census



**THIS SURVEY HAS BEEN ENDORSED BY:**

American Association for Counseling and Development  
American Association of School Administrators  
American Federation of Teachers  
Bureau of Indian Affairs  
Council for American Private Education  
Council of Chief State School Officers  
National Association of Elementary School Principals  
National Association of Independent Schools  
National Association of Secondary School Principals  
National Catholic Educational Association  
National Education Association

## INSTRUCTIONS

Most of the items on this questionnaire are arranged so that the answer categories or spaces for written answers are under the questions. Please answer the questions by marking the appropriate answer category with an X, or recording your answer in the space provided. We suggest that you use a pencil, rather than a pen or marker.

Notice that at the end of some answer categories and answer spaces, there are instructions to go to later questions or to continue with the next question on the questionnaire.



If you are unsure about how to answer a question, please give the best answer you can and make a comment in the "Notes" space. Please include the item number.

If you have any questions, call the Bureau of the Census, toll free, at 1-800-221-1204.

Return your completed questionnaire to the Bureau of the Census in the enclosed preaddressed envelope. Please return it within two weeks.

**Please keep count of the time you spend completing this questionnaire.  
At the end of the survey, you are asked to record the amount of time spent.**

**Are you currently teaching – full-time, part-time, or as a long-term substitute – in grades K through 12?**

- 003
- 1  Yes  *RETURN THIS FORM to the Bureau of the Census in the enclosed envelope. You will be sent another form for teachers who are still teaching.*
- 2  No  *PLEASE CONTINUE with this survey.*

## SECTION I – EMPLOYMENT STATUS

### 1. What is your MAIN OCCUPATIONAL status?

Mark (X) only one box.

- 004
- 1  Working in an elementary or secondary school with an assignment OTHER THAN teaching
- 2  Working in an occupation outside of elementary or secondary education → **GO to item 3.**
- 3  Student at a college or university
- 4  Caring for family members
- 5  Retired
- 6  Disabled
- 7  Other – Specify ↴
- 
- ↓ **GO to item 8.**

### 2. What is your MAIN school assignment?

Mark (X) only one box.

- 005
- 1  Administrator (e.g., principal, assistant principal, director, head)
- 2  Nonteaching specialist (e.g., counselor, librarian)
- 3  Resource person for other teachers (e.g., department head, resource teacher, curriculum coordinator, mentor teacher)
- 4  Support staff (e.g., secretary, aide)
- 5  Coach
- 6  Other – Specify ↴
- 
- ↓ **GO to item 4.**

## SECTION I – EMPLOYMENT STATUS – CONTINUED

**NOTE:** Answer questions 3a–e ONLY if you marked box 2 in answer to question 1 on page 2.

**3a. For whom do you work?** Record the name of the company, business, or organization. ↘

**b. What kind of business or industry is this?** For example, retail shoe store, State Labor Department, bicycle manufacturer, farm. ↘

006

Office use only

**c. What kind of work do you do?** Please record your job title; for example, electrical engineer, cashier, typist, farmer, loan officer. ↘

007

Office use only

**d. What are your most important activities or duties at this job?** For example, typing, selling cars, driving delivery truck, caring for livestock. ↘

**e. How would you classify yourself on this job?**

Mark (X) only one box.

008

- 1  An employee of a PRIVATE company, business, or individual for wages, salary, or commission  
2  A FEDERAL government employee  
3  A STATE government employee  
4  A LOCAL government employee  
5  SELF-EMPLOYED in your own business, professional practice, or farm  
6  Working WITHOUT PAY in a family business or farm  
7  Working WITHOUT PAY in a volunteer job

**4. Which of these best describes your position as an EMPLOYEE?**

Mark (X) only one box.

009

- 1  Full time employee  
2  3/4 time or more, but less than full-time employee  
3  1/2 time or more, but less than 3/4 time employee  
4  1/4 time or more, but less than 1/2 time employee  
5  Less than 1/4 time employee

**5. Altogether, how much do you usually earn at this job before taxes?**

010

\$  Dollars ■  Cents per 

011

- 1  Hour  
2  Day  
3  Week  
4  Biweekly  
5  Month  
6  Year  
7  Other –Specify ↘

## SECTION I – EMPLOYMENT STATUS – CONTINUED

### 6. How long do you plan to remain in this job?

Mark (X) only one box.

- 012
- 1  As long as I am able
  - 2  Until I am eligible for retirement
  - 3  Will probably continue unless something better comes along
  - 4  Definitely plan to leave as soon as I can
  - 5  Undecided at this time

**GO to item 8.**

### 7. In how many years do you plan to retire?

013  Years

### 8. What do you expect your MAIN activity will be NEXT SCHOOL YEAR (1995–96)?

Mark (X) only one box.

- 014
- 1  Teaching any of grades K–12
  - 2  Teaching at the prekindergarten or postsecondary level
  - 3  Student at a college or university
  - 4  Working in a nonteaching occupation in the field of education
  - 5  Working in an occupation outside the field of education
  - 6  Caring for family members
  - 7  Unemployed and seeking work
  - 8  Military service
  - 9  Retired
  - 10  Other – Specify

## SECTION II – EDUCATIONAL ACTIVITIES AND FUTURE PLANS

### 9. Have you earned any new degrees in the past 12 months?

- 015
- 1  Yes
  - 2  No

**GO to item 14.**

### 10. When did you earn this degree?

016   Month

017  **1**  **9**   Year

### 11. What type of degree is it?

Mark (X) only one box.

- 018
- 1  Associate degree
  - 2  Bachelor's
  - 3  Master's
  - 4  Education specialist or professional diploma (at least one year beyond Master's level)
  - 5  Doctorate (e.g., Ph.D., Ed.D.)
  - 6  Professional (e.g., M.D., D.D.S., J.D., L.L.B.)

## SECTION II – EDUCATIONAL ACTIVITIES AND FUTURE PLANS – CONTINUED

### MAJOR FIELD OF STUDY CODES FOR QUESTIONS 12 and 16

#### EDUCATION

##### General education

- 01 Pre-elementary/early childhood education
- 03 Elementary education
- 04 Secondary education

##### Subject area education

- 07 Agricultural education
- 11 Art education
- 13 Bilingual education
- 15 Business, commerce, and distributive education
- 89 Crosscultural education
- 22 English education
- 23 English as a second language
- 24 Foreign languages education
- 29 Home economics education
- 88 American Indian/Native American education
- 30 Industrial arts, vocational and technical, trade and industry education
- 34 Mathematics education
- 38 Music education
- 40 Physical education/health education
- 43 Reading education
- 45 Religious education
- 46 Science education
- 48 Social studies/social sciences education

##### Special education

- 67 Special education, general
- 68 Emotionally disturbed
- 69 Mentally retarded
- 70 Speech/language impaired
- 71 Deaf and hard-of-hearing
- 72 Visually handicapped
- 73 Orthopedically impaired
- 74 Mildly handicapped
- 75 Severely handicapped
- 76 Specific learning disabilities
- 77 Other special education

##### Other education

- 78 Curriculum and instruction
- 79 Educational administration
- 80 Educational psychology
- 81 Counseling and guidance
- 82 Other education

#### GENERAL

- 06 Agriculture and natural resources
- 86 American Indian/Native American studies
- 87 Other area and ethnic studies
- 08 Architecture and environmental design
- 10 Art, fine and applied
- 14 Business and management
- 16 Communications and journalism
- 17 Computer and information sciences
- 19 Drama, theater
- 20 Engineering
- 21 English (literature, letters, speech, classics)
- 25 General studies
- 27 Health professions and occupations
- 28 Home economics
- 85 Humanities
- 31 Law
- 32 Library science
- 33 Mathematics
- 35 Military science
- 36 Multi/interdisciplinary studies
- 37 Music
- 39 Philosophy
- 41 Psychology
- 42 Public affairs and services
- 44 Religion, theology

##### Foreign languages

- 51 French
- 52 German
- 53 Latin
- 54 Russian
- 55 Spanish
- 56 Other foreign languages

##### Natural sciences

- 57 Biology/life science
- 58 Chemistry
- 59 Geology/earth science
- 60 Physics
- 61 Other natural sciences

##### Social sciences

- 62 Economics
- 63 History
- 64 Political science and government
- 65 Sociology
- 66 Other social sciences

##### 84 All others

### 12. What is the major field of study for your NEW degree?

Enter the field and two-digit code from the list above.

019

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Code

Major field

### 13. For what purpose did you earn this degree? Mark (X) only one box.

020

- 1  To increase salary
- 2  For professional development in current field
- 3  To teach in a different field than the one taught last year
- 4  For a nonteaching position in elementary or secondary education
- 5  For an occupation outside elementary or secondary education other than current job
- 6  Other – Specify

**SECTION II – EDUCATIONAL ACTIVITIES AND FUTURE PLANS – CONTINUED**

**14. Are you currently enrolled in a degree program?**

Mark (X) only one box.

- 021
- 1  No → **GO to item 18.**
  - 2  Yes, as a full-time student
  - 3  Yes, as a part-time student
- ↓

**15. What type of degree are you pursuing?**

Mark (X) only one box.

- 022
- 1  Associate degree
  - 2  Bachelor's
  - 3  Master's
  - 4  Education specialist or professional diploma (at least one year beyond Master's level)
  - 5  Doctorate (e.g., Ph.D., Ed.D.)
  - 6  Professional (e.g., M.D., D.D.S., J.D., L.L.B.)

**16. What is the major field of study for the degree you are pursuing?**

Enter the field and two-digit code from the list on page 5.

023

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Code Major field

**17. For what purpose are you pursuing this degree?**

Mark (X) only one box.

- 024
- 1  To increase current salary
  - 2  For professional development in current field
  - 3  To teach in a different field than the one taught last year
  - 4  For a nonteaching position in elementary or secondary education
  - 5  For an occupation outside elementary or secondary education other than current job
  - 6  Other – Specify ↴

\_\_\_\_\_

**18. Do you plan to return to teaching?**

Mark (X) only one box.

- 025
- 1  Undecided
  - 2  Yes
  - 3  No → **GO to item 21.**
- ↓

**19. How soon might you return to teaching?**

Mark (X) only one box.

- 026
- 1  Later this school year
  - 2  Next year
  - 3  Within five years
  - 4  More than five years from now
  - 5  Undecided

**SECTION II – EDUCATIONAL ACTIVITIES AND FUTURE PLANS – CONTINUED**

**20. At which level would you teach?**

*Mark (X) all that apply.*

- 027 1  Prekindergarten
- 028 2  Elementary (including kindergarten)
- 029 3  Junior high/middle school
- 030 4  Senior high
- 031 5  Postsecondary

**21. Has there been a change in your teacher certification status since last year?**

*Mark (X) all that apply.*

- 032 1  No change
- 033 2  Yes, certification has lapsed
- 034 3  Yes, certification has been upgraded from temporary or emergency to a regular certificate
- 035 4  Yes, certified in a different field
- 036 5  Other change – *Specify* ↴


**22. Do you plan to maintain or reinstate your teaching certificate?**

- 037 1  Yes
- 2  No
- 3  Undecided

NOTES

## SECTION III – YOUR OPINIONS

### POSSIBLE REASONS FOR LEAVING THE TEACHING PROFESSION

(Use codes to answer items 23a, b, and c.)

- 01 Family or personal move
- 02 Pregnancy/child rearing
- 03 Health
- 04 To retire
- 05 To pursue another career
- 06 For better salary or benefits
- 07 To take courses to improve career opportunities in the field of education
- 08 To take courses to improve career opportunities outside the field of education
- 09 School staffing action (e.g., reduction-in-force, lay-off, school closing, school reorganization, reassignment)
- 10 To take a sabbatical or other break from teaching
- 11 Dissatisfied with teaching as a career
- 12 Other family or personal reason

#### 23a. What was your main reason for leaving the teaching profession?

Enter code from above.

039

Code

Main reason

#### b. Did you have a second reason for leaving?

040

1  Yes  
2  No

GO to item 23d.

What was your second reason? Enter code, then continue with item 23c.

041

Code

#### c. Did you have a third reason for leaving?

042

1  Yes  
2  No

GO to item 23d.

What was your third reason? Enter code.

043

Code

#### d. Did you enter code 11 for one of your reasons in question 23a, b, or c?

044

1  Yes  
2  No

GO to item 24a.

Continue with item 23e, page 9.



## SECTION III – YOUR OPINIONS – CONTINUED

### POSSIBLE AREAS OF DISSATISFACTION

(Use codes to answer items 23e, f, and g.)

- 01 Poor opportunity for professional advancement
- 02 Lack of recognition and support from administration
- 03 Lack of resources and material/equipment for your classroom.
- 04 Inadequate support from administration
- 05 Lack of influence over school policies and practices
- 06 Lack of control over own classroom
- 07 Intrusions on teaching time (i.e., not enough time working directly with teaching students)
- 08 Inadequate time to prepare lesson/teaching plans
- 09 Poor student motivation to learn
- 10 Class sizes too large
- 11 Student discipline problems
- 12 Poor salary

#### 23e. What was your main area of dissatisfaction with the teaching profession?

Enter code from above.

045

Code

Main dissatisfaction

#### f. Did you have a second area of dissatisfaction?

046

1  Yes  
2  No

→ **GO to item 24a.**

**What was your second area?** Enter code, then continue with item 23g.

047

Code

#### g. Did you have a third area of dissatisfaction?

048

1  Yes  
2  No

→ **GO to item 24a.**

**What was your third area?** Enter code.

049

Code

## SECTION III – YOUR OPINIONS – CONTINUED

### POSSIBLE STEPS SCHOOLS MIGHT TAKE TO ENCOURAGE TEACHERS TO REMAIN IN TEACHING

(Use codes to answer items 24a, b, and c.)

- 01 Providing higher salaries and/or better fringe benefits
- 02 Improving opportunities for professional advancement
- 03 Dealing more effectively with student discipline and making schools safer
- 04 Giving teachers more authority in the school and in their own classrooms
- 05 Increasing standards for students' academic performance
- 06 Providing better resources and materials for classroom use
- 07 Decreasing class size
- 08 Giving special recognition and/or special assignments to excellent or outstanding teachers
- 09 Reducing the paperwork burden on teachers
- 10 Providing more support for new teachers (e.g., mentor teacher programs)
- 11 Increasing parent involvement in the schools
- 12 Reducing teacher workload
- 13 Providing merit pay or other pay incentives to teachers
- 14 Improving opportunities for professional development
- 15 Providing tuition reimbursement for coursework required for certification or career advancement
- 16 Revising health insurance program to include stress reduction seminars, counseling, and physical fitness options

#### 24a. What would be the most effective step that schools might take to encourage teachers to remain in teaching?

Enter code from above.

050   Most effective step  
Code

#### b. What would be the second most effective step?

Enter code from above.

051   Second step  
Code

#### c. What would be the third most effective step?

Enter code from above.

052   Third step  
Code

## SECTION III – YOUR OPINIONS – CONTINUED

**25. Is your MAIN occupational status "working" (i.e., box 1 or 2 marked in question 1)?**

- 053
- 1  Yes
- 2  No

**GO to item 28.**

**26. How would you rate teaching relative to your current MAIN occupation in terms of EACH of the following aspects? Please indicate (a) Better in teaching, (b) Better in current position, or (c) No difference.**

	Better in teaching (a)	Better in current position (b)	No difference (c)
<b>a.</b> Salary	054 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>b.</b> Opportunities for professional advancement	055 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>c.</b> Opportunities for professional development	056 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>d.</b> Opportunities for learning from colleagues	057 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>e.</b> Recognition and support from administrators/managers	058 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>f.</b> Safety of environment	059 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>g.</b> Influence over workplace policies and practices	060 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>h.</b> Autonomy or control over your own work	061 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>i.</b> Professional prestige	062 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>j.</b> Benefits	063 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>k.</b> Procedures for performance evaluation	064 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>l.</b> Manageability of workload	065 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>m.</b> Availability of resources and materials/equipment for doing job	066 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>n.</b> General work conditions	067 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>o.</b> Job security	068 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>p.</b> Professional caliber of colleagues	069 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>q.</b> Intellectual challenge	070 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<b>r.</b> Overall job satisfaction	071 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

### SECTION III – YOUR OPINIONS – CONTINUED

27. How satisfied are you with EACH of the following aspects of your CURRENT job? Are you (a) Very satisfied, (b) Somewhat satisfied, (c) Somewhat dissatisfied, or (d) Very dissatisfied with –	Very satisfied	Somewhat satisfied	Somewhat dissatisfied	Very dissatisfied
	(a)	(b)	(c)	(d)
<b>a.</b> Salary	072 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>b.</b> Opportunities for professional advancement	073 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>c.</b> Recognition and support from administrators/managers	074 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>d.</b> Safety of environment	075 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>e.</b> Your influence over workplace policies and practices	076 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>f.</b> Autonomy or control over your own work	077 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>g.</b> Professional prestige	078 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>h.</b> Benefits	079 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>i.</b> Procedures for performance evaluation	080 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>j.</b> Manageability of work	081 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>k.</b> Availability of resources and materials for doing job	082 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>l.</b> General work conditions	083 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>m.</b> Job security	084 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>n.</b> Professional caliber of colleagues	085 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>o.</b> Intellectual challenge	086 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
<b>p.</b> Overall job satisfaction	087 1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

NOTES

## SECTION IV – BACKGROUND INFORMATION

**28. Which category represents the total combined income (include your own income) of ALL FAMILY MEMBERS age 14 and older in your household during 1994? Include money from jobs, net business or farm income, pensions, dividends, interest, rent, Social Security payments, and any other income received by family members in your household.**

Mark (X) only one box.

- 088
- 1  Less than \$10,000
  - 2  \$10,000 - \$14,999
  - 3  \$15,000 - \$19,999
  - 4  \$20,000 - \$24,999
  - 5  \$25,000 - \$29,999
  - 6  \$30,000 - \$34,999
  - 7  \$35,000 - \$39,999
  - 8  \$40,000 - \$49,999
  - 9  \$50,000 - \$59,999
  - 10  \$60,000 - \$74,999
  - 11  \$75,000 - \$99,999
  - 12  \$100,000 or more

**29. What is your current marital status?**

- 089
- 1  Married
  - 2  Widowed, divorced, or separated
  - 3  Never married

**30. How many children do you have who are dependent on you (and your spouse) for more than half of their financial support?**

- 090
- 0  None → **GO to item 32a.**

**OR**

091  Children supported

**31. What was the age of your youngest child on his/her last birthday? If child is less than one year, please enter "0."**

092  Age of youngest child

**32a. Do you have persons other than your spouse or children who are dependent on you for more than half of their financial support?**

- 093
- 1  Yes
  - 2  No

**GO to item 33.**

**b. How many persons other than your spouse or children are dependent on you for more than half of their financial support?**

094  Number of persons supported

## SECTION V – RESPONDENT INFORMATION

The survey you have completed may involve a brief follow-up at a later time in order to gain information on former teachers' movements in the labor force. The following information would assist us in contacting you if you move or change jobs.

**33. Please PRINT your name, your spouse's name (if applicable), your home address, telephone number, and the most convenient time to reach you.**

095

1  Same as address label

096 Your name		Telephone number – <i>Include area code</i> (       )	
Spouse's full name		Days/times convenient to reach you	
Street address _____		In whose name is the telephone number listed? <i>Mark (X) only one.</i> 1 <input type="checkbox"/> No phone 2 <input type="checkbox"/> My name 3 <input type="checkbox"/> Other – <i>Specify</i> ↘	
City	State		
_____			

**34. What are the names and addresses of two other people who will know where to get in touch with you during the coming years? List no more than one person who now lives with you. Remember to record the relationship of these persons to you (for example, parent, friend, sister, cousin, etc.).**

097 Name		Telephone number – <i>Include area code</i> (       )	
Relationship to you			
Street address _____		In whose name is the telephone number listed? <i>Mark (X) only one.</i> 1 <input type="checkbox"/> No phone 2 <input type="checkbox"/> Name entered above 3 <input type="checkbox"/> Other – <i>Specify</i> ↘	
City	State		
_____			

098 Name		Telephone number – <i>Include area code</i> (       )	
Relationship to you			
Street address _____		In whose name is the telephone number listed? <i>Mark (X) only one.</i> 1 <input type="checkbox"/> No phone 2 <input type="checkbox"/> Name entered above 3 <input type="checkbox"/> Other – <i>Specify</i> ↘	
City	State		
_____			

**35. Not counting interruptions, how long did it take to complete this survey?**

099

\_\_\_\_\_ Minutes

**THIS COMPLETES THE QUESTIONNAIRE.  
THANK YOU FOR ASSISTING US IN THIS IMPORTANT RESEARCH.  
YOUR TIME AND EFFORT ARE APPRECIATED.**

**THANK YOU FOR ASSISTING US IN THIS IMPORTANT SURVEY.  
YOUR TIME AND EFFORT ARE APPRECIATED.**

**PLEASE RETURN THE QUESTIONNAIRE IN THE ENCLOSED ENVELOPE TO:**

**Bureau of the Census  
Current Projects Branch  
1201 East 10th Street  
Jeffersonville, IN 47132-0001**

*(Please correct any error in name, address, and ZIP Code.)*

