



Beginning College Survey of Student Engagement

We are interested in your high school experiences and how often you expect to participate in certain activities during your first year of college. The information that you provide will help your institution improve teaching, learning and the quality of the student experience. Thanks for your help. Write or mark your answers in the boxes.

Examples: or

Please print your student ID number in the boxes below. Do not print your Social Security number.

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Please print the first three letters of your last name:

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You are taking this survey:

- Before attending orientation
- While attending orientation
- After attending orientation
- Not applicable, not attending orientation

Please write in the 5-digit ZIP code of your home during your last year of high school.

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 (U.S. residents only)

High School Experiences

1 Please write in the year you graduated from high school (for example, "2007"):

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2 From which type of high school did you graduate? (Select only one.)

- Public
- Home school
- Private, religiously-affiliated
- Other (e.g., GED)
- Private, independent

3 What were most of your high school grades? (Select only one.)

- A
- B
- C
- A-
- B-
- C- or lower
- B+
- C+
- Grades not used

4 To date, in which of the following math classes did you earn a passing grade?

	Did not take	Passed	Did not pass
a. Pre-calculus/Trigonometry	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Calculus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Probability or Statistics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5 During high school, how many years of the following subjects did you complete?

Years:	0	1	2	3	4	5 or more
a. English/Literature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Math	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Science	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. History/Social Sciences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Foreign language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6 During high school, how many of the following types of classes did you complete?

	0	1	2	3	4	5 or more
a. Advanced Placement (AP) classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Honors classes (not AP) taught at your high school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7 During your last year of high school, about how much reading and writing did you do?

	Very much	Quite a bit	Some	Very little	None
a. Assigned reading (textbooks or other course materials)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Writing short papers or reports (5 or fewer pages)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Writing longer papers or reports (more than 5 pages)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8 During your last year of high school, about how many hours did you spend in a typical 7-day week doing each of the following?

a. Preparing for class (studying, doing homework, rehearsing, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1-5	6-10	11-15	16-20	21-25	26-30	More than 30
	Hours per week							
b. Working for pay (before or after school, weekends)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1-5	6-10	11-15	16-20	21-25	26-30	More than 30
	Hours per week							
c. Participating in co-curricular activities (arts, clubs, athletics, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1-5	6-10	11-15	16-20	21-25	26-30	More than 30
	Hours per week							
d. Relaxing and socializing (watching TV, partying, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1-5	6-10	11-15	16-20	21-25	26-30	More than 30
	Hours per week							

9 During your last year of high school, about how often did you do each of the following?

	Very often	Often	Sometimes	Never
a. Asked questions in class or contributed to class discussions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Made a class presentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Came to class without completing readings or assignments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Discussed grades or assignments with a teacher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Worked with other students on projects during class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Worked with classmates outside of class to prepare class assignments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Prepared two or more drafts of a paper or assignment before turning it in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Had serious conversations with students of a different race or ethnicity than your own	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Discussed ideas from your readings or classes with teachers outside of class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Discussed ideas from your readings or classes with others outside of class (students, family members, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Talked with a counselor, teacher, or other staff member about college or career plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Had serious conversations with students who are very different from you in terms of their religious beliefs, political opinions, or personal values	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Missed a day of school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10 Did you take the SAT and/or ACT?

Yes No

If yes, please write your scores below (as best you remember):

SAT (possible range=200-800)			ACT (possible range=1-36)	
Critical Reading	<input type="text"/>	<input type="text"/>	Composite	<input type="text"/>
Mathematical Reasoning	<input type="text"/>	<input type="text"/>		
Writing	<input type="text"/>	<input type="text"/>		

11 During your high school years, how involved were you in the following activities at your school or elsewhere?

	Not involved	1	2	3	4	5	Highly involved	6
a. Performing or visual arts programs (band, chorus, theater, art, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Athletic teams (varsity, junior varsity, club sport, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Student government	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Publications (student newspaper, yearbook, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Academic honor societies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Academic clubs (debate, mathematics, science, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Vocational clubs (business, health, technology, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Religious youth groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12 Overall, how academically challenging was your high school?

Not at all challenging							Extremely challenging
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1	2	3	4	5	6		

College Experiences

13 During the coming school year, about how many hours do you think you will spend in a typical 7-day week doing each of the following?

a. Preparing for class (studying, reading, writing, doing homework or lab work, analyzing data, rehearsing, and other academic activities)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1-5	6-10	11-15	16-20	21-25	26-30	More than 30
	Hours per week							
b. Working for pay on- or off-campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1-5	6-10	11-15	16-20	21-25	26-30	More than 30
	Hours per week							
c. Participating in co-curricular activities (organizations, campus publications, student government, fraternity or sorority, intercollegiate or intramural sports, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1-5	6-10	11-15	16-20	21-25	26-30	More than 30
	Hours per week							
d. Relaxing or socializing (watching TV, partying, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	0	1-5	6-10	11-15	16-20	21-25	26-30	More than 30
	Hours per week							

18 How important is it to you that your college or university provides each of the following?

	Not important			Very important		
	1	2	3	4	5	6
a. A challenging academic experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Support to help you succeed academically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Opportunities to interact with students from different economic, social, and racial or ethnic backgrounds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Assistance coping with your non-academic responsibilities (work, family, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Support to help you thrive socially	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Opportunities to attend campus events and activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

19 About how much of your college expenses (tuition, fees, books, room & board) this year will be provided by each of the following sources?

	None	Less than half	Half or more	All or nearly all	Do not know
a. Scholarships and grants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Student loans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Parents/family	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Self (work on-campus or off-campus, savings)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20 Did you receive a Federal Pell Grant?

Yes No Do not know

21 What do you expect most of your grades will be at this college during the coming year?

(Select only one.)

A B C
 A- B- C- or lower
 B+ C+ Grades not used

22 Do you intend to graduate from this college?

Yes No Uncertain

23 What is the highest academic degree that you intend to obtain at this or any college?

(Select only one.)

Associate's degree (A.A., A.S., etc.)
 Bachelor's degree (B.A., B.S., etc.)
 Master's degree (M.A., M.S., etc.)
 Doctoral degree (Ph.D., M.D., J.D., etc.)
 Uncertain

Additional Information

24 Do you know what your major will be?

No
 Yes, specify:

25 Are you, or will you be, a full-time student this fall term?

Yes No

26 How many of your close friends will attend this college during the coming year?

None 1 2 3 4 or more

27 Your sex:

Female Male

28 Are you an international student or foreign national?

Yes No

29 What is your racial or ethnic identification?

(Select only one.)

American Indian or other Native American
 Asian, Asian American or Pacific Islander
 Black or African American
 White (non-Hispanic)
 Mexican or Mexican American
 Puerto Rican
 Other Hispanic or Latino
 Multiracial
 Other
 I prefer not to respond

30 Please indicate whether your parents completed a 4-year college degree.

	Completed 4-year degree	Did not complete 4-year degree	Do not know
Mother (or guardian)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Father (or guardian)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

31 How far is your home from this college?

20 miles or less 101-200 miles
 21-50 miles 201-400 miles
 51-100 miles More than 400 miles

THANKS FOR SHARING YOUR RESPONSES!

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