

EDUCATION LONGITUDINAL STUDY OF 2002



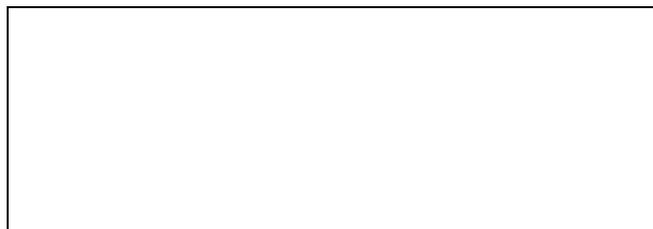
HOMESCHOOL STUDENT QUESTIONNAIRE

First Follow-up

Sponsored by:

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

Conducted by:
RTI



USES OF THE DATA

The data from this survey will be used by educators and by federal and state policy makers to address important issues facing the nation's schools: educational standards, high school course-taking patterns, dropping out of school, the education of the disadvantaged, the needs of language minority students, and the features of effective schools.

ASSURANCE OF CONFIDENTIALITY

The collection of information in this survey is authorized by Section 404(a) of the National Education Statistics Act of 1994, Title IV of the Improving America's Schools Act of 1994, Public Law 103-382 and continued under the auspices of the Education Sciences Reform Act of 2002, Public Law 107-279. Participation is voluntary. You may skip questions you do not wish to answer; however, we hope that you will answer as many questions as you can. All responses that relate to or describe identifiable characteristics of individuals may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose, unless otherwise compelled by law. Information will be protected from disclosure by federal statute (20 USC 9003a-9007, as amended). Data will be combined to produce statistical reports. No individual data that links your name, address, telephone number, or identification number with your responses will be reported.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1850-0652. The time required to complete this information collection is estimated to average 30 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. **If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to:** U.S. Department of Education, Washington, D.C. 20202-4651. **If you have comments or concerns regarding the status of your individual submission of this form, write directly to:** National Center for Education Statistics, ESLSD, 1990 K Street, N.W., Washington, D.C., 20006.

Educational Organizations That Have Endorsed ELS:2002

American Association of School Administrators
American Association of School Librarians
American Federation of Teachers
Council of Chief State School Officers
Council of the Great City Schools
National Association of Independent Schools
National Association of Secondary School Principals
National Catholic Educational Association Department of Secondary Schools
National Education Association
National Parent Teacher Association
National Resource Center for Safe Schools
National School Boards Association
National School Safety Center

GENERAL INSTRUCTIONS

PLEASE READ EACH QUESTION CAREFULLY. It is important that you follow the directions for responding to each kind of question. Here are examples of five types of items:

I. MARK ONE RESPONSE

1. What is the color of your eyes?

(MARK ONE RESPONSE)

- Brown..... O
Blue O
Green..... O
Another Color O

If the color of your eyes is green, you would mark the circle beside green.

II. MARK ALL THAT APPLY

2. Last week, did you do any of the following?

(MARK ALL THAT APPLY)

- Saw a play O
Went to a movie O
Attended a sporting event O
None of the above O

If you went to a movie and attended a sporting event last week, but did not see a play, you would mark the two circles as shown.

III. MARK ONE RESPONSE ON EACH LINE

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

(MARK ONE RESPONSE ON EACH LINE)

- | | Yes | No | Don't Know |
|------------------------------|---------|---------|------------|
| a. Study at a friend's house | O | O | O |
| b. Go to a museum | O | O | O |
| c. Visit a relative | O | O | O |

If you plan to study at a friend's house, do not plan to go to a museum, and do not plan to visit a relative you would mark one circle on each line as shown.

IV. MARK ONE RESPONSE IN EACH COLUMN

4. What is your favorite color and your best friend's favorite color? BE SURE TO ANSWER BOTH A AND B BELOW.

	(MARK ONE) A	(MARK ONE) B
	Your favorite color	Your best friend's favorite color
Blue	O	O
Green.....	O	O
Yellow.....	O	O
Purple.....	O	O
None of the above.....	O	O

If you like blue best and your best friend likes yellow best, you would mark one circle in each column as shown.

V. QUESTION WITH A SKIP

5. Do you eat sweet foods?

(MARK ONE RESPONSE)

Yes O → **GO TO QUESTION 6**

No O → **SKIP TO QUESTION 7**

If you do not eat sweet foods, you would mark the circle as shown.

6. Do you brush your teeth after eating sweet foods?

(MARK ONE RESPONSE)

Yes O

No O

You would not answer Question 6. Instead, you would skip over Question 6 and go directly to Question 7.

7. Last week, did you do any of the following?

(MARK ALL THAT APPLY)

Went to a movie O

Attended a sporting event O

None of the above O

If you did not go to a movie or attend a sporting event last week, you would mark none of the above.

Sometimes you will be asked to skip more than one question.

THIS IS THE END OF THE EXAMPLES.

THIS QUESTIONNAIRE IS NOT A TEST.

WE HOPE YOU WILL ANSWER EVERY QUESTION (OTHER THAN THE ONES YOU ARE DIRECTED TO SKIP OVER), BUT YOU MAY SKIP ANY QUESTION YOU DO NOT WISH TO ANSWER.

PLEASE GO TO THE NEXT PAGE TO BEGIN THE QUESTIONNAIRE.

PART I. INFORMATION FOR FUTURE FOLLOW-UP

1. Please print your name, address, home telephone number, and email address.

Your Name:

Last Name First Name Middle Initial

Address (include number, street, apartment number, P.O. Box, etc):

Address

City State Zip code

Telephone:

() _____ You do not have a telephone →
Area Code Telephone number

E-mail address:

_____ You do not have an e-mail address →

WHEN WE SAY PARENT(S), MOTHER, OR FATHER, ANSWER FOR THE PARENT, GUARDIAN, OR STEPPARENT WITH WHOM YOU LIVE MOST OF THE TIME.

2. Please print your mother's name in the space below. If you have both a mother and a female guardian, write in the name of the one you live with most of the time.

Mother's (female guardian's) Name:

Last Name First Name Middle Initial

3. Is her address and telephone number the same as yours?

Yes → **SKIP TO QUESTION 5 ON PAGE 2**

No..... → **GO TO QUESTION 4 ON PAGE 2**

She is no longer living → **SKIP TO QUESTION 6 ON PAGE 2**

4. Please **print** her address and telephone number in the space below. If you don't know the complete address, fill in as much as you know.

Address (include number, street, apartment number, P.O. Box, etc):

Address

City

State

Zip code

Mark here if you don't know any of her address →

Telephone:

() _____ She does not have a telephone →
Area Code Telephone number You don't know her telephone number →

5. What is her work phone number?

Mother's (female guardian's) Work Telephone:

() _____ She does not work →
Area Code Telephone number Extension You don't know her work phone number →

6. Please **print** your father's name in the space below. If you have both a father and a male guardian, write in the name of the one you live with most of the time.

Father's (male guardian's) Name:

Last Name First Name Middle Initial

7. Is his address and telephone number the same as yours?

- Yes → **SKIP TO QUESTION 9 ON PAGE 3**
No..... → **GO TO QUESTION 8 ON PAGE 3**
He is no longer living..... → **SKIP TO QUESTION 10 ON PAGE 3**

8. Please print his address and telephone number in the space below. If you don't know the complete address, fill in as much as you know.

Address (include number, street, apartment number, P.O. Box, etc):

Address

City

State

Zip code

Mark here if you don't know any of his address →

Telephone:

()
Area Code

Telephone number

He does not have a telephone →

You don't know his telephone number →

9. What is his work phone number?

Father's (male guardian's) Work Telephone:

()
Area Code

Telephone number

Extension

He does not work →

You don't know his work phone number →

10. Please print the name, address, and telephone number of a relative or close friend who does not live with you and who will always know how to contact you. If you don't know the complete address, fill in as much as you know.

Relative or close friend's name:

Last Name

First Name

Middle Initial

Address (include number, street, apartment number, P.O. Box, etc):

Address

City

State

Zip code

Telephone:

()
Area Code

Telephone number

He/she does not have a telephone →

You do not know his/her phone number →

11. What is this person's relationship to you?

(MARK ONE RESPONSE)

- A parent..... O
- A grandparent..... O
- An aunt or uncle..... O
- A brother or sister O
- A friend O
- Other O

QUESTION 12, 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.

12. What is your social security number?

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

- You don't know your social security number. → O
- You do not wish to provide your social security number. → O

13. What is today's date?

Month	Day	Year
January O	1 O 11 O 21 O	2004 ●
February O	2 O 12 O 22 O	
March O	3 O 13 O 23 O	
April O	4 O 14 O 24 O	
May O	5 O 15 O 25 O	
June O	6 O 16 O 26 O	
July O	7 O 17 O 27 O	
August O	8 O 18 O 28 O	
	9 O 19 O 29 O	
	10 O 20 O 30 O	
		31 O

PART II. SCHOOL EXPERIENCES AND ACTIVITIES

14. What grade are you in?

(MARK ONE RESPONSE)

- 10th grade..... O
- 11th grade O
- 12th grade O
- Ungraded program O

15. When you complete your current school program, which of the following are you most likely to receive?

(MARK ONE RESPONSE)

- Diploma granted by a homeschooling or independent study program..... O
- Diploma granted by your local school or school district..... O
- GED or other equivalency certificate O
- Diploma created by your parents/guardian(s).... O

16. From the beginning of ninth grade to the end of this school year, how many years of science coursework will you have completed in each of the following subjects? Count only courses that meet at least three times (or three periods) a week for at least one half year. Also include summer school and AP (advanced placement) classes.

(MARK ONE RESPONSE ON EACH LINE)

	None or less than half year	Half year	1 year	More than 1 year
a. General science	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O
b. General physical science.....	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O
c. Biology.....	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O
d. Botany or zoology.....	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O
e. Earth science	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O
f. Chemistry.....	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O
g. Principles of technology	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O
h. Physics	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O
i. Other science.....	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O	<input type="radio"/> O

17. From the beginning of ninth grade to the end of this school year, how many years of math coursework will you have completed in each of the following subjects? Count only courses that meet at least three times (or three periods) a week for at least one half year. Also include summer school and AP (advanced placement) classes.

(MARK ONE RESPONSE ON EACH LINE)

	None or less than half year	Half year	1 year	More than 1 year
a. General math.....	O	O	O	O
b. Pre-Algebra.....	O	O	O	O
c. Algebra I.....	O	O	O	O
d. Geometry.....	O	O	O	O
e. Algebra II.....	O	O	O	O
f. Trigonometry.....	O	O	O	O
g. Pre-Calculus.....	O	O	O	O
h. Calculus.....	O	O	O	O
i. Consumer or Business math.....	O	O	O	O
j. Other math.....	O	O	O	O

18. Have you taken or are you planning to take any of the following tests?

(MARK ONE RESPONSE ON EACH LINE)

	You haven't thought about it	No, you don't plan to take it	Yes, you've already taken it	Yes, you plan to take it
a. PSAT (College Board Preliminary Scholastic Assessment Test).....	O	O	O	O
b. PLAN (American College Testing Program's PLAN).....	O	O	O	O
c. SAT or ACT (College Board Scholastic Assessment Test or American College Test).....	O	O	O	O
d. AP tests (College Board Advanced Placement test(s) given in May of each year).....	O	O	O	O
e. ASVAB (Armed Services Vocational Aptitude Battery).....	O	O	O	O

19. Have you participated in any school-sponsored activities this school year?

- Yes → **GO TO QUESTION 20**
 No → **SKIP TO QUESTION 22 ON PAGE 8**

20. Have you participated in the following school-sponsored activities this school year?

(MARK ONE RESPONSE ON EACH LINE)

	Did not Participate	Participated	Participated as an officer, leader, or captain
a. Intramural sports (competition between teams in your school).....	O	O	O
b. Interscholastic sports (competition with teams from other schools).....	O	O	O
c. Band, orchestra, chorus, choir	O	O	O
d. School play or musical	O	O	O
e. Student government	O	O	O
f. National Honor Society (NHS) or other academic honor society.....	O	O	O
g. School yearbook, newspaper, literary magazine	O	O	O
h. Service club (such as Key Club, Big Brother or Big Sister).....	O	O	O
i. Academic club (such as Art, Computer, Foreign Language, Debate).....	O	O	O
j. Hobby club (such as photography, chess)....	O	O	O
k. Vocational education club, vocational student organization (such as DECA, SkillsUSA, VICA, FFA, FHA).....	O	O	O

21. In a typical week, how many total hours do you spend on all school-sponsored extracurricular activities (sports, clubs, or other activities)?

(MARK ONE RESPONSE)

- None
 Less than 1 hour per week
 1-4 hours per week.....
 5-9 hours per week.....
 10-14 hours per week.....
 15-19 hours per week.....
 20-24 hours per week.....
 25 hours or more per week.....

PART III. HOW YOU SPEND YOUR TIME

22. How often do you use your public library for any of the following activities?

(MARK ONE RESPONSE ON EACH LINE)

- | | Never | Rarely | Sometimes | Often |
|--|-------|--------|-----------|-------|
| a. Course assignments..... | O | O | O | O |
| b. In-school projects..... | O | O | O | O |
| c. Homework (assignments to be
completed outside of class time) | O | O | O | O |
| d. Research papers | O | O | O | O |
| e. Leisure reading..... | O | O | O | O |
| f. Read magazines or newspapers | O | O | O | O |
| g. Read books for fun..... | O | O | O | O |
| h. Learn about things that are not
course-related, such as sports,
hobbies, people or music..... | O | O | O | O |
| i. Use the Internet..... | O | O | O | O |

23. Overall, about how many hours do you spend on homework each week?

(MARK ONE RESPONSE)

- None O
- Less than 1 hour each week O
- 1-3 hours O
- 4-6 hours O
- 7-9 hours O
- 10-12 hours O
- 13-15 hours O
- 16-20 hours O
- Over 20 hours each week..... O

**24 How many hours of additional reading do you do each week on your own outside of school - not in connection with schoolwork? (Do not count any homework assigned.)
(MARK ONE RESPONSE)**

- None O
- 1 hour or less per week O
- 2 hours..... O
- 3 hours..... O
- 4-5 hours O
- 6-7 hours O
- 8-9 hours O
- 10 hours or more a week..... O

25. During the school year, how many hours a day do you usually watch TV, videotapes, or DVDs? BE SURE TO ANSWER BOTH A AND B BELOW.

- | | (MARK ONE) | (MARK ONE) |
|---|-------------|-----------------|
| | A | B |
| | On weekdays | On weekend days |
| Don't watch TV, videotapes or DVDS..... | O | O |
| Less than 1 hour a day | O | O |
| 1 hour or more, but less than 2..... | O | O |
| 2 hours or more, but less than 3 | O | O |
| 3 hours or more, but less than 5 | O | O |
| 5 hours or more a day..... | O | O |

26. During the school year, how many hours a day do you usually play video or computer games such as Nintendo, Play Station, or XBOX? BE SURE TO ANSWER BOTH A AND B BELOW.

- | | (MARK ONE) | (MARK ONE) |
|---|-------------|-----------------|
| | A | B |
| | On weekdays | On weekend days |
| Don't play video or computer games..... | O | O |
| Less than 1 hour a day | O | O |
| 1 hour or more, but less than 2..... | O | O |
| 2 hours or more, but less than 3 | O | O |
| 3 hours or more, but less than 5 | O | O |
| 5 hours or more a day..... | O | O |

27. How many hours a day do you usually use a computer for schoolwork and other than for schoolwork? BE SURE TO ANSWER BOTH A AND B BELOW.

	(MARK ONE)	(MARK ONE)
	A	B
	For	Other than
	Schoolwork	for schoolwork
None	O	O
Less than 1 hour a day	O	O
1 hour or more, but less than 2.....	O	O
2 hours or more, but less than 3	O	O
3 hours or more, but less than 5	O	O
5 hours or more a day.....	O	O

28. How often do you use a computer...

(MARK ONE RESPONSE ON EACH LINE)

	No computer	Never	Less than once a week	Once or twice a week	Every day or almost every day
a. at home?	O	O	O	O	O
b. at the public library (for activities other than catalog searches)?	O	O	O	O	O
c. at a friend's house?	O	O	O	O	O
d. at another place?	O	O	O	O	O

29. How often do you spend time on the following activities outside of homeschooling?

(MARK ONE RESPONSE ON EACH LINE)

	Rarely or never	Less than once a week	Once or twice a week	Every day or almost every day
a. Visiting with friends (hanging out).....	O	O	O	O
b. Working on hobbies, arts, crafts	O	O	O	O
c. Volunteering or performing community service	O	O	O	O
d. Driving or riding around with friends or in your own car	O	O	O	O
e. Talking with friends on the telephone	O	O	O	O
f. Taking classes: music, art, language, dance	O	O	O	O
g. Taking sports lessons (other than at school)	O	O	O	O
h. Playing non-school sports	O	O	O	O
i. Communicating with friends or relatives via the Internet	O	O	O	O

PART IV. PLANS AND EXPECTATIONS FOR THE FUTURE

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

(MARK ONE RESPONSE ON EACH LINE)

	Not Important	Somewhat Important	Very Important
a. Being successful in your line of work.....	O	O	O
b. Finding the right person to marry and having a happy family life	O	O	O
c. Having lots of money	O	O	O
d. Having strong friendships	O	O	O
e. Being able to find steady work	O	O	O
f. Helping other people in your community ...	O	O	O
g. Being able to give your children better opportunities than you've had	O	O	O
h. Living close to parents and relatives	O	O	O
i. Getting away from this area of the country	O	O	O
j. Working to correct social and economic inequalities	O	O	O
k. Having children.....	O	O	O
l. Having leisure time to enjoy your own interests	O	O	O
m. Becoming an expert in your field of work ..	O	O	O
n. Getting a good education	O	O	O
o. Getting a good job.....	O	O	O
p. Being an active and informed citizen	O	O	O
q. Supporting environmental causes	O	O	O
r. Being patriotic	O	O	O

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

(MARK ONE RESPONSE)

- Less than high school graduation..... O
- GED or other equivalency only
- High school graduation only..... O
- Attend or complete a 1- or 2-year program in a
 community college or vocational school
- Attend college, but not complete a 4- or 5-year degree. O
- Graduate from college (4- or 5-year degree)
- Obtain a Master's degree or equivalent
- Obtain a Ph.D., M.D., or other advanced degree
- Don't know

WHEN WE SAY PARENTS, MOTHER, OR FATHER, ANSWER FOR THE PARENT, GUARDIAN, OR STEPPARENT WITH WHOM YOU LIVE MOST OF THE TIME.

32. How far in school do you think your mother and father want you to go? BE SURE TO ANSWER BOTH A AND B BELOW.

	(MARK ONE)	(MARK ONE)
	A	B
	Mother (or female guardian)	Father (or male guardian)
Less than high school graduation.....	O	O
GED or other equivalency only	O	O
High school graduation only	O	O
Attend or complete a 1- or 2-year program in a community college or vocational school	O	O
Attend college, but not complete a 4- or 5-year degree.....	O	O
Graduate from college (4- or 5-year degree)	O	O
Obtain a Master's degree or equivalent.....	O	O
Obtain a Ph.D., M.D., or other advanced degree.....	O	O
Don't know	O	O
Does not apply	O	O

33. What do the following people think is the most important thing for you to do right after high school?

(MARK ONE RESPONSE ON EACH LINE)

	Does not apply	Go to college	Get a full- time job	Vocational- technical or apprenticeship program	Enter military	Get married	He/she thinks you should do what you want	You don't know
a. Your mother (or female guardian)	O	O	O	O	O	O	O	O
b. Your father (or male guardian)	O	O	O	O	O	O	O	O
c. A close relative	O	O	O	O	O	O	O	O
d. Your friends.....	O	O	O	O	O	O	O	O

34. Do you plan to go on to school right after high school?

Yes O → **SKIP TO QUESTION 37 ON PAGE 14**

No O → **GO TO QUESTION 35**

Don't know . O → **SKIP TO QUESTION 36**

35. Which of the following are reasons why you have decided NOT to continue your education right after high school?

(MARK ONE RESPONSE ON EACH LINE)

- | | Yes | No |
|---|------------|-----------|
| a. You don't like school. | O | O |
| b. Your grades aren't high enough. | O | O |
| c. Your college admission scores weren't high enough. | O | O |
| d. You won't need more education for the career you want. | O | O |
| e. You can't afford to go on to school. | O | O |
| f. You haven't taken the right courses. | O | O |
| g. No one in your family has ever gone on to school after high school. | O | O |
| h. You plan to join the military. | O | O |
| i. You'd rather work and make money than go to school. | O | O |
| j. You don't feel that going on to school is important. | O | O |
| k. You need to help support your family. | O | O |

36. Do you plan to continue your education at some time in the future?

- No, you don't plan to continue your education after high school..... O → **SKIP TO Q41 ON PAGE 15**
- Yes, right after high school..... O
- Yes, after staying out of school for up to one year..... O
- Yes, after staying out of school for over a year O
- Don't know O → **SKIP TO Q41 ON PAGE 15**
- } **GO TO Q37 ON PAGE 14**

PART V. EDUCATION AFTER HIGH SCHOOL

37. Which of the following will you most likely attend?

(MARK ONE RESPONSE)

- Four-year college or university..
- Two-year community college
- Vocational, technical or trade school.....

38. To how many schools have you applied?

(MARK ONE RESPONSE)

- None..... → **SKIP TO QUESTION 40 ON PAGE 15**
- 1 school.....
- 2 to 4 schools } **GO TO QUESTION 39**
- 5 or more schools.....

39. Write in below the names and locations of the two schools to which you have applied that you are most likely to attend.

School 1 Name: _____

City: _____ State _____

School 2 Name: _____

City: _____ State _____

40. How important is or was each of the following in choosing a school you would like to attend?

(MARK ONE RESPONSE ON EACH LINE)

	Not Important	Somewhat Important	Very Important
a. Low expenses (tuition, books, room and board).....	O	O	O
b. Availability of financial aid, such as a school loan, scholarship or grant	O	O	O
c. Availability of specific courses or curriculum.....	O	O	O
d. Strong reputation of the school's athletic program	O	O	O
e. Active social life at the school.....	O	O	O
f. Ability to attend school while living at home.....	O	O	O
g. Chance to live away from home	O	O	O
h. A low-crime environment.....	O	O	O
i. A good record for placing graduates in jobs.....	O	O	O
j. A good record for placing graduates in graduate school	O	O	O
k. Strong reputation of the school's academic programs	O	O	O
l. Easy admission standards	O	O	O
m. Availability of a degree program that will allow you to get a job in your chosen field	O	O	O
n. Racial or ethnic composition of the school	O	O	O
o. Size of the school.....	O	O	O
p. Geographic location of the school	O	O	O
q. Ability to attend the same school your parents attended	O	O	O
r. Being able to apply college credits earned while you were in high school.	O	O	O

PART VI. WORK AFTER HIGH SCHOOL

41. Do you plan to work right after high school?

(MARK ONE RESPONSE)

- Yes, full-time. O → **GO TO QUESTION 42**
 Yes, part-time..... O → **SKIP TO Q43 ON PAGE 16**
 No, you don't plan to work right after high school..... O → **SKIP TO Q44 ON PAGE 16**

42. Do you have a regular, *full-time* job lined up after high school graduation?

(MARK ONE RESPONSE)

- Yes, you'll continue the job you have now. O
 Yes, you have a new job lined up. O
 No, but you are looking for a job. O
 No, you haven't done anything yet to get a job. O

43. Write in the name of the job or occupation that you expect or plan to have right after high school.

Occupation right after high school _____

Not planning to work right after high school.....

You don't know

44. Write in the name of the job or occupation that you expect or plan to have at age 30.

Occupation at age 30 _____

Not planning to work at age 30.....

You don't know

} **SKIP TO Q46 ON PAGE 17**

45. How much education do you think you need to get the job you expect or plan to have when you are 30 years old?

(MARK ONE RESPONSE)

Some high school.....

High school diploma or GED

Less than 2 years in a community college or vocational school

Completion of a 2-year program at a community college or vocational school

Attend college, but not complete a 4- or 5-year degree

4- or 5-year college degree

Master's degree.....

Ph.D.

Professional degree (such as J.D. or M.D).....

Not planning to work at age 30.....

PART VII. WORK EXPERIENCES

46. Have you ever worked for pay, not counting work around the house?

(MARK ONE RESPONSE)

- No → **SKIP TO Q48 ON PAGE 18**
- Yes, and you are currently employed. } **GO TO QUESTION 47**
- Yes, but you are not currently employed. }

47. How many hours do/did you usually work each week on your current or most recent job during this school year?

(MARK ONE RESPONSE)

- You have not worked during this school year ...
- 1-5 hours a week
- 6-10 hours a week
- 11-15 hours a week
- 16-20 hours a week
- 21-25 hours a week
- 26-30 hours a week
- 31-35 hours a week
- 36-40 hours a week
- Over 40 hours a week

CONTINUE TO QUESTION 48 ON PAGE 18

PART VIII. COMMUNITY, FAMILY AND FRIENDS

48. During the past two years, have you performed any unpaid volunteer or community service work (through such organizations as youth groups, service clubs, church groups, school groups, or social action groups)?

- Yes
 No

49. In the first semester or term of this school year, how often have you discussed the following with either or both of your parents or guardians?

(MARK ONE RESPONSE ON EACH LINE)

	Never	Sometimes	Often
a. Selecting courses or program at school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. School activities or events of particular interest to you	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Things you've studied in class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Your grades	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Jobs you would like to have after completing school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Specific jobs you might apply for after high school	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Plans and preparation for ACT or SAT tests	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Going to college	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Community, national, and world events	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Things that are troubling you	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

50. How many of your friends...

(MARK ONE RESPONSE ON EACH LINE)

	None of them	A few of them	Some of them	Most of them	All of them
a. dropped out of high school without graduating?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. plan to have a regular full-time job after high school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. plan to attend a two-year community college or technical school?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. plan to attend a four-year college or university?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**YOU HAVE COMPLETED THE ELS:2002 FIRST FOLLOW-UP
HOMESCHOOL STUDENT QUESTIONNAIRE.**

THANK YOU FOR YOUR COOPERATION.