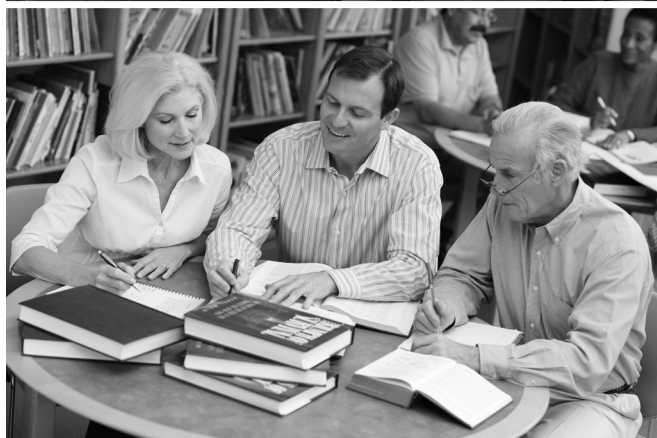
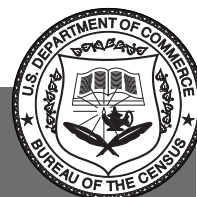


# The 2013 National Adult Training and Education Survey



Conducted by

**UNITED STATES DEPARTMENT OF COMMERCE**  
Economics and Statistics Administration  
**U.S. Census Bureau**



**NATES-10AC**  
(01/03/2013)



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## Instructions

- ◆ The Department of Education is studying the education and job training experiences of adults and youth. Each household is different, and we need your response.
  - ◆ Each person living at this address, ages 16 to 65 should fill out a survey. Youths who are still in high school should not fill out a survey.
  - ◆ Surveys should be completed by adults and youth who are temporarily away from home (for example, on vacation) but do not include adults or youth who are living at another address for an extended period of time (for example, living in college dormitories).
  - ◆ If you need additional surveys, please call us on our toll-free number: 1-800-845-8243.
  - ◆ Return each completed survey using the postage-paid envelopes provided.
  - ◆ To answer a question, simply mark the box [X] that best represents the answer.
  - ◆ Please use a black or blue pen, if available.
- 
- 



# Introduction

## Start Here

Adults acquire their job skills in many ways, including formal education, on-the-job-training, and other work training. This survey asks about all of these, including sections on professional certifications and licenses, educational certificates and other education degrees and classes, apprenticeship programs, and other classes taken for work reasons.

You will be asked to answer only the sections that apply to you. Please start with question A below. (Only one adult in the household needs to answer questions A and B on this page.)

**A. How many of the people living in this household are ages 16-65?**

If no one in this household is ages 16-65, please enter "0" in the box and return the questionnaire in the postage-paid envelope. It is important that you return your questionnaire. No one in your household needs to complete any other questionnaires.

**B. Of these people ages 16-65, how many are no longer in high school?**

☐

If everyone in this household ages 16-65 is still in high school, please mark this box and return this questionnaire in the postage-paid envelope. No one in your household needs to complete any other questionnaires.



***Please have each of these people fill out a questionnaire.***

***If you have any questions or need additional questionnaires, please contact us toll-free at 1-800-845-8243.***



## Educational Attainment

1. What is the highest degree or level of school you have completed? (Mark one.)

- ☐ Elementary or high school, but no high school diploma or GED  
→ **GO TO question 4**
- ☐ High school diploma, GED, or other high school completion
- ☐ Some college credit but less than one year of college credit
- ☐ 1 or more years of college credit, no degree
- ☐ Associate's degree (for example, AA, AS)
- ☐ Bachelor's degree (for example, BA, BS)
- ☐ Master's degree (for example, MA, MS, MEng, MEd, MSW, MBA)
- ☐ Professional degree beyond a bachelor's degree (for example, MD, DDS, DVM, LLB, JD)
- ☐ Doctorate degree (for example, PhD, EdD)
- **GO TO question 3**

2. What was the major or field of study for your highest level of education? If there was more than one, please choose the one you consider most important.

Write in:

3. Did you complete your high school requirements through a regular high school diploma, or through the GED or other high school equivalency? (Mark one.)

- ☐ Regular high school diploma
- ☐ GED or other high school equivalency

4. Do you have a professional certification or a state or industry license? A professional certification or license shows you are qualified to perform a specific job and includes things like Licensed Realtor, Certified Medical Assistant, Certified Construction Manager, a Project Management Professional certification, or an IT certification.

- ☐ Yes
- ☐ No → **GO TO question 20**

5. Thinking of all the certifications and licenses you have, did you get any of them for work-related reasons, or were they all for personal interest? (Mark one.)

- ☐ I got ONE OR MORE certifications or licenses for work-related reasons  
→ **GO TO question 6**
- ☐ I did NOT GET ANY certifications or licenses for work-related reasons  
→ **GO TO question 20**

► Continue on the next page.



## Certification and Licensure

➤ In the questions below, we ask a few details about the certification or license that you most recently earned for work-related reasons.

➤ Please answer these questions only about this MOST RECENT work-related certification or license. If you got a certification as part of getting a license, please respond for the license.

**6. In what year were you first issued your MOST RECENT work-related certification or license?**

Write in year:

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**7. Who issued this certification or license? (Mark one.)**

- ☐ Federal, state, or local government
- ☐ Professional or trade association (for example, Pediatric Nursing Certification Board, National Exercise and Sports Trainers Association, CompTIA)
- ☐ Business or company (for example, Microsoft™, 3M Company™, Xerox®)
- ☐ Other group or organization (specify) ↴

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**8. Why did you get this certification or license? (Mark "Yes" or "No" for each.)**

	Yes ▼	No ▼
To get a job in a new field . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To get a promotion or raise in pay . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To stay current in my field or expand skills in my field . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To start my own business . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To meet an employer requirement . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify) ↴ . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

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**9. Did you have to pass a test or exam or demonstrate your skills to get this certification or license?**

- ☐ Yes
- ☐ No

**10. What kind of courses, training, or instruction (online or in-person) did you take in order to prepare for this certification or license? (Mark all that apply.)**

- ☐ I did not need any courses, training, or instruction
- ☐ I took vocational or occupationally focused high school courses
- ☐ I took courses from a vocational or trade school, community or technical college, or other college or university
- ☐ I took courses from a private company or my employer
- ☐ I participated in on-the-job training, an internship, or an apprenticeship
- ☐ I studied on my own
- ☐ Other (specify) ↴

--	--	--	--	--

**11. Do you have to earn continuing education units (CEUs) or other professional development credits to maintain this certification or license?**

- ☐ Yes
- ☐ No → **GO TO question 14**

► **Continue on the next page.**



- 12. Which ONE of the following best describes the MOST RECENT activity you engaged in to earn your continuing education or other professional development credits for this certification or license? (Mark one.)**

☐ Have not yet had to meet these requirements



**GO TO question 14**

☐ Attended conference or demonstration (online or in-person)

☐ Completed class or seminar (online or in-person)

☐ Read instructional materials (online or hardcopy)

☐ Other (specify)

- 13. Who was the main provider of the instruction or learning materials for the activity you indicated in question 12? (Mark one.)**

☐ My employer

A group other than my employer:

☐ Professional or trade association

☐ Labor union or labor organization

☐ Community or technical college, vocational or trade school, college, or university

☐ Federal, state, or local government

☐ Private training company

☐ Other (specify)

- 14. What is the name of your MOST RECENT certification or license? Please do not use abbreviations.**

Write in:

- 15. What kind of work is this certification or license for? (for example: teaching, vocational nursing, computer network administration, auditing, truck driving)**

Write in:

- 16. Could this certification or license be used if you wanted to get a job with any employer in that line of work? If you have a state certification or license that can be used state-wide, please answer "yes".**

☐ Yes

☐ No

- 17. Is this certification or license for the job you have now? If you are currently not employed, please answer "no". (Mark one.)**

☐ Yes, and it is required for my job

☐ Yes, and it is NOT required for my job

☐ No



**GO TO question 20**

- 18. Is this certification or license for a job you held in the past or for a job you plan to hold in the future? (Mark "Yes" or "No" for each.)**

Yes No



For a job that I held in the past . . . . . ☐ ☐

For a job that I plan to hold in the future . . . . . ☐ ☐

- 19. Other than your most recent certification or license, do you have another certification or license for the job you have now? If you are currently not employed, please answer "no".**

☐ Yes

☐ No

► **Continue on the next page.**



## Educational Certificates

- These next questions ask about education you might have received after high school. Include educational certificates you may have earned as part of getting a professional certification or license, but report only information for the educational certificate (not for the certification or license).

- 20. Some people complete a program of study at a vocational or trade school, community or technical college, or other college or university in order to earn an educational certificate rather than a degree. Sometimes this is called a vocational diploma, for example, a cosmetology or mechanics diploma, which differs from a high school diploma. Have you ever earned this type of educational certificate?**

☐ Yes

☐ No → **GO TO question 29**

- 21. Thinking of all the educational certificates you have, which one of the following best describes them? (Mark one.)**

☐ All of my educational certificates were for people who HAVE a bachelor's degree



**GO TO question 29**

☐ One or more of my educational certificates were for people who DO NOT HAVE a bachelor's degree

- Of the educational certificates or diplomas you earned after high school, we would like to know a few details about the one you earned most recently. We will use the word "certificate" to refer to this educational certificate or diploma.
- Please answer the questions in this section about this MOST RECENT certificate.

- 22. In what year did you earn this MOST RECENT certificate?**

Write in year:

--	--	--	--

- 23. How long did it take you to earn this certificate? (Mark one.)**

☐ Less than 10 weeks (2½ months)

☐ 10 weeks (2½ months) or more, but less than one year

☐ One year or more

☐ I don't know

- 24. What type of school awarded this certificate? (Mark one.)**

☐ Trade, vocational, or business school

☐ Community or technical college

☐ Other college or university

☐ Other type of school (specify) ↴

--

► **Continue on the next page.**



**25. Why did you get this certificate? (Mark "Yes" or "No" for each.)**

	Yes ▼	No ▼
To get a job in a new field . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To get a promotion or raise in pay . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To stay current in my field or expand skills in my field . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To start my own business. . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To get a professional certification or license. . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify) ↴ . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

**26. What was the primary subject or field of study for this certificate?**

Write in:

**27. Is the subject field of this certificate related to the job you have now? If you are currently not employed, please answer "no."**

☐ Yes → GO TO question 29

☐ No

**28. Is the subject field of this certificate related to a job you held in the past or to a job you plan to hold in the future? (Mark "Yes" or "No" for each.)**

	Yes ▼	No ▼
Related to a job that I held in the past . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Related to a job that I plan to hold in the future . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

► **Continue on the next page.**

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## Apprenticeships

29. In a formal apprenticeship program, an apprentice receives both instruction and on-the-job training and is paid a training salary. Have you ever participated in this type of apprenticeship program? (Do not count student teaching, medical internship or residency, or unpaid internships. Mark one.)

☐ Yes, I have COMPLETED this type of program

☐ Yes, I am currently participating in this type of program

☐ No, I have not participated in this type of program

**GO TO  
question  
35**

30. In what year did you complete this apprenticeship program?

Write in year:

--	--	--	--	--

31. Did this apprenticeship program lead to a Certificate of Completion of Apprenticeship from your state or from the U.S. Department of Labor?

☐ Yes

☐ No

☐ I don't know

32. As part of this apprenticeship program, did you take any courses from a community or technical college or from another college or university?

☐ Yes

☐ No

33. Was this apprenticeship program for the job or industry you work in now? If you are currently not employed, please answer "no".

☐ Yes → **GO TO question 35**

☐ No

34. What occupation was this apprenticeship program for? (for example: carpenter, electrician, water treatment operator, emergency medical technician)

Write in:

--

► **Continue on the next page.**



## College Classes

- 35. Are you currently taking classes from a vocational or trade school, community or technical college, or other college or university? If you are on spring, summer, or holiday break, please answer "yes".**

☐ Yes

☐ No → **GO TO question 46**

➤ The rest of this section asks about these college classes. If you are on a school break, please respond for the classes you were taking before you went on break.

- 36. Are you taking these classes to earn a diploma, certificate, or degree? (Do not count professional certifications or licenses.)**

☐ Yes

☐ No → **GO TO question 39**

- 37. What diploma, certificate, or degree are you earning? (Mark one.)**

☐ Diploma or certificate below the bachelor's degree level

☐ Associate's degree (for example, AA, AS, AAS)

☐ Bachelor's degree (for example, BA, AB, BS, BFA)

☐ Certificate above the bachelor's degree level

☐ Master's degree (for example, MA, MS, MEng, MEd)

☐ Professional or doctorate degree (for example, MD, DDS, DVM, LLB, JD, PhD, EdD)

- 38. Are you going to school full time or part time? (Mark one.)**

☐ Full time

☐ Part time

→ **GO TO question 46**

- 39. How many classes are you currently taking? (Mark one.)**

☐ One class

☐ Two or more classes

- 40. Which ONE of the following best describes the type of classes you are taking? (Mark one.)**

☐ All my classes are for college credit

☐ Some of my classes are for college credit, some are not for credit

☐ All my classes are not for credit

☐ I don't know whether my classes are for college credit

- 41. Why are you taking these classes? (Mark "Yes" or "No" for each.)**

	Yes ▼	No ▼
To get a job in a new field. . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To get a promotion or raise in pay . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To stay current in my field or expand skills in my field . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To start my own business. . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To get a professional certification or license . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To earn continuing education or other professional development credits . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
To help me decide if I want to get a diploma, certificate, or degree. . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Classes are required to enter a college program . . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Personal interest in the subject of the classes. . . . .	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify) ↘ . . . . .	<input type="checkbox"/>	<input type="checkbox"/>

- 42. What is the primary subject or field of study for these classes? If you are taking classes in different subjects, please list the subject you consider your main interest or focus.**

Write in:

► **Continue on the next page.**



**43. Did your employer require that you take any of these classes?**

☐ Not relevant – I am not employed or I am self-employed



**GO TO question 46**

☐ Yes

☐ No

**44. For any of these classes, is your employer paying your tuition or fees, or reimbursing you for your tuition or fees? (Mark one.)**

☐ Yes, my employer is paying all of the tuition and fees

☐ Yes, my employer is paying part of the tuition and fees

☐ No

**45. Are any of these classes designed specifically for employees at your company?**

☐ Yes

☐ No

☐ I don't know

► **Continue on the next page.**



## Other Instruction or Training

46. **OTHER THAN APPRENTICESHIPS AND COLLEGE CLASSES YOU MAY HAVE DESCRIBED EARLIER, in the past 12 months, have you completed any other courses, training, or formal instruction, either at work or outside of work?**

*This includes both work or personal interest courses, seminars, webinars, or workshops on topics such as:*

- *job safety, work ethics or other regulations*
- *equipment use*
- *communication, sensitivity, or team-building*
- *computer or technical skills*
- *management skills*
- *other job skills*
- *fitness classes, art, dance, or music lessons, religious education*
- *learning to speak English*
- *basic skills education classes*
- *other topics not listed here*

**Have you completed any such instruction or training IN THE PAST 12 MONTHS?**

☐

Yes

☐

No



**GO TO question 52**

47. **In the past 12 months, which of the following types of instruction or training have you completed, either online or in-person? (Mark all that apply.)**

### Job training

☐

**SAFETY AND COMPLIANCE TRAINING** (includes information on company or professional procedures and regulations concerning legal, ethical, and safety issues)

☐

**COMMUNICATION, SENSITIVITY, OR TEAM TRAINING** (includes training to improve communication in the workplace, encourage teamwork, or to reorganize work teams and work flow)

☐

**MANAGEMENT TRAINING** (includes training in supervising employees and in implementing employment practices, regulations, and policies)

☐

**JOB SKILLS TRAINING** (includes training to develop the skills you need to do your work, such as sales and customer relations training, professional or technical skill development, use of computer applications, and other practical job skills)

### Basic skills education

☐

**BASIC READING, WRITING, OR ARITHMETIC INSTRUCTION** (instruction for adults below the high school level)

☐

**HIGH SCHOOL COMPLETION** (classes to prepare for the GED or other adult high school program)

☐

**ENGLISH LANGUAGE INSTRUCTION** (classes to learn to speak English)

### Other instruction or training

☐

**PERSONAL INTEREST OR DEVELOPMENT** (instruction related to hobbies and interests outside of work)

☐

**OTHER (specify)**



► **Continue on the next page.**



**48. Did any ONE of these activities last at least 8 hours (either in one session or across multiple sessions)?**

☐

Yes

☐

No



**GO TO question 52**

➤ In the questions below, we ask a few details about your most recently completed instruction or training that lasted at least 8 hours.

➤ Please answer these questions only about this **MOST RECENT** completed instruction or training that lasted at least 8 hours.

**49. Which ONE of the following best describes this MOST RECENT instruction or training? (Mark one.)**

☐

Safety and compliance training

☐

Communication, sensitivity, or team training

☐

Management training

☐

Job skills training

☐

Basic reading, writing, or arithmetic instruction

☐

High school completion

☐

English language instruction

☐

Personal interest or development

☐

**GO TO question 52**

☐

Other (specify) ↴

**GO TO question 50**

**50. Was this instruction or training that your employer offered at no charge during working hours?**

☐

Yes

☐

No

☐

Not relevant – I was self-employed or not employed when I took the instruction or training

**51. Why did you take this instruction or training? (Mark "Yes" or "No" for each.)**

Yes No  
▼ ▼

To get a job in a new field . . . . .

☐
☐

To get a promotion or raise in pay. . . . .

☐
☐

To stay current in my field or expand skills in my field. . . . .

☐
☐

To start my own business. . . . .

☐
☐

To get a professional certification or license. . . . .

☐
☐

To earn continuing education or other professional development credits. . . . .

☐
☐

To meet an employer requirement. . . . .

☐
☐

Other (specify) ↴ . . . . .

☐
☐


► **Continue on the next page.**



## Employment

**52. LAST WEEK, were you employed for pay at a job or business, or were you temporarily absent from a job or business?**

☐ Yes – was working (even for as little as one hour) or was temporarily absent from work (on vacation, temporary illness, maternity leave, other family/personal reasons, bad weather, etc.)

☐ No – was not employed, was on layoff, or was retired

**GO TO question 56**

**53. For the job or business you were in last week, were you a member of a labor union or of an employee association similar to a union? (for example, AFL-CIO, Change to Win Federation, NEA)**

☐ Yes

☐ No

**54. Which one of the following best describes your employment situation last week (or when you last worked)? (Mark one.)**

☐ I worked at a full-time job (job of 35 hours or more per week)

**GO TO question 61**

☐ I worked at one or more part-time jobs (no full-time job)

**55. Would you have preferred to work at a full-time job?**

☐ Yes

☐ No

**GO TO question 61**

**56. LAST WEEK, were you on layoff from a job?**

☐ Yes

☐ No

**57. During the LAST 4 WEEKS, have you been ACTIVELY looking for work?**

☐ Yes

☐ No

**GO TO question 59**

**58. LAST WEEK, could you have started a job if offered one, or returned to work if recalled?**

☐ Yes, I could have gone to work

☐ No, because of my own temporary illness

☐ No, because of some other reason (in school, etc.)

**GO TO question 60**

**59. Do you intend to look for work within the next 5 years?**

☐ Yes

☐ No

☐ I don't know

**60. When did you last work, even for a few days?**

☐ Within the past 12 months

☐ Over 12 months ago

**GO TO question 63**

☐ Never worked for pay

**GO TO question 70**

**61. During the PAST 12 MONTHS (52 weeks), how many weeks did you work, even for a few hours, INCLUDING paid vacation, paid sick leave, and military service?**

☐ 50 to 52 weeks

☐ 48 to 49 weeks

☐ 40 to 47 weeks

☐ 27 to 39 weeks

☐ 14 to 26 weeks

☐ 13 weeks or less

**62. During the PAST 12 MONTHS, in the WEEKS WORKED, how many hours did you usually work each WEEK?**

Usual hours worked each WEEK

**GO TO question 64**

► **Continue on the next page.**



- 63. Please write in the month and year for when you last worked.**

/   
month

year



**GO TO question 65**

- 64. Which category best fits your earnings from wages, salary, commissions, bonuses or tips, from all jobs over the PAST 12 MONTHS? Report amount before deductions for taxes, bonds, dues or other items. (Mark one.)**

- ☐ \$0 to \$10,000
- ☐ \$10,001 to \$20,000
- ☐ \$20,001 to \$30,000
- ☐ \$30,001 to \$40,000
- ☐ \$40,001 to \$50,000
- ☐ \$50,001 to \$60,000
- ☐ \$60,001 to \$75,000
- ☐ \$75,001 to \$150,000
- ☐ \$150,001 or more

- 65. For the next few questions, please describe clearly your chief job activity or business last week. If you had more than one job, describe the one at which you worked the most hours. If you had no job or business last week, give information for your last job or business.**

**In your current or last job, which ONE of the following were you? (Mark one.)**

- ☐ An employee of a private for-profit company or business, or of an individual, for wages, salary, or commissions
- ☐ An employee of a private not for-profit, tax exempt, or charitable organization
- ☐ A local government employee (city, county, etc.)
- ☐ A state government employee
- ☐ A Federal government employee
- ☐ Self-employed in own business, professional practice, or farm
- ☐ Working without pay in family business or farm

- 66. For whom did you work?**

- ☐ If now on active duty in the Armed Forces, mark (X) this box and print the branch of the Armed Forces below.

Name of company, business, or other employer

- 67. What kind of business or industry was this?**

*Describe the activity at the location where employed. (for example: hospital, newspaper publishing, mail order house, auto engine manufacturing, bank)*

- 68. What kind of work were you doing?**

*(for example: registered nurse, personnel manager, supervisor of order department, secretary, accountant)*

- 69. What were your most important activities or duties?**

*(for example: patient care, directing hiring policies, supervising order clerks, typing and filing, reconciling financial records)*

► **Continue on the next page.**



## Background

**70. Are you male or female?**

- ☐ Male  
☐ Female

**71. How old are you?**

years old

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

- ☐ Now married → **GO TO question 75**  
☐ Widowed  
☐ Divorced  
☐ Separated  
☐ Never married

**73. Are you currently living with a boyfriend/girlfriend or partner in this household?**

- ☐ Yes  
☐ No → **GO TO question 75**

**74. Are you currently in a registered domestic partnership or civil union?**

- ☐ Yes  
☐ No

**75. Are you of Hispanic or Latino origin?**

- ☐ Yes  
☐ No

**76. What is your race? Choose one or more.**

- ☐ White  
☐ Black or African American  
☐ Asian  
☐ American Indian or Alaska Native  
☐ Native Hawaiian or other Pacific Islander

**77. Do you speak a language other than English at home?**

- ☐ Yes  
☐ No → **GO TO question 79**

**78. How well do you speak English? (Mark one.)**

- ☐ Very well  
☐ Well  
☐ Not very well  
☐ Not at all

**79. Where were you born? (Mark one.)**

- ☐ In the United States (the 50 states or the District of Columbia)  
→ **GO TO question 82**  
☐ In a U.S. territory (Puerto Rico, Guam, American Samoa, U.S. Virgin Islands, or Northern Marianas)  
→ **GO TO question 82**  
☐ Outside the U.S. (in a foreign country)

**80. Were you born abroad to one or more parents who were U.S. citizens?**

- ☐ Yes  
☐ No

**81. When did you come to live in the United States?**

Year

► **Continue on the next page.**





**82. Which category best fits the total income of all persons in your household over the past 12 months? Include your own income. Include money from jobs or other earnings, pensions, interest, rent, Social Security payments, and so on. (Mark one.)**

- ☐ \$0 to \$10,000
- ☐ \$10,001 to \$20,000
- ☐ \$20,001 to \$30,000
- ☐ \$30,001 to \$40,000
- ☐ \$40,001 to \$50,000
- ☐ \$50,001 to \$60,000
- ☐ \$60,001 to \$75,000
- ☐ \$75,001 to \$150,000
- ☐ \$150,001 or more

## Thank you.

*Please return this questionnaire in the postage-paid envelope provided. If you need additional questionnaires for other eligible household members, please call the Census Bureau toll-free at 1-800-845-8243.*

*If you have lost the envelope, mail the completed questionnaire to:*

**U.S. Census Bureau  
ATTN: DSB 60-A  
1201 E. 10th Street  
Jeffersonville, IN 47132-0001**

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## Commonly Asked Questions

### **Q: How was my household chosen?**

- A: Your address was randomly selected from among all of the home addresses in the nation. It was selected using scientific sampling methods to represent other U.S. households. The sample was designed so that surveys of only a few thousand people will accurately describe the educational experiences of almost all Americans.

### **Q: Why should I participate? Do I have to do this?**

- A: Your answers are very important to the success of this study. You represent thousands of other adults like yourself, and you cannot be replaced. This survey is voluntary. You may choose not to answer any or all questions in this survey, but in order for the survey to be representative, it is important that you complete and return it. Those who do not return the survey will not be represented in statistics used by policymakers and researchers. There are no penalties should you choose not to participate in the study.

### **Q: Will the information I provide be kept confidential? Will my privacy be protected?**

- A: Yes. Your responses will be combined with those from other adults to produce statistical summaries and reports about education and training in the United States. Your individual data will not be reported. Your answers may be used only for statistical purposes and may not be disclosed, or used, in identifiable form for any other purpose except as required by law (20 United States Code (U.S.C), Section 9573).

### **Q: What about my son/daughter who is away at school? What about my relative who is visiting for the week?**

- A: Please have eligible household members who are temporarily away from home (for example, away on vacation) complete a survey as soon as they can, but do not include household members who are living at another address for an extended period of time (for example, away at college). Guests or visitors who have another permanent home should not complete a survey.

### **Q: How will my response help the Federal Government?**

- A: The U.S. Departments of Education and Labor want to understand how adults acquire and maintain the skills they need for work. This survey is the only way these Departments can learn about the education and training that adults receive from schools, employers, and other training sponsors. The survey will allow policymakers and researchers to better understand the demand for education and training programs, and can help direct national policy in these areas. Your responses will be combined with those from other households to inform educators, policy makers, and schools about how adults in the U.S. learn the skills needed for work.

### **Q: Who is sponsoring this study?**

- A: The National Center for Education Statistics (NCES), within the U.S. Department of Education, is authorized to conduct this study (20 United States Code (U.S.C), Section 9573). The U.S. Census Bureau is conducting this survey on behalf of NCES. This study has been approved by the Office of Management and Budget (OMB), the office that reviews all federally sponsored surveys. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB approval number assigned to this study is 1850-0803. You may send any comments about this survey, including its length, to the Federal Government. Write to: Lisa Hudson, National Center for Education Statistics, U.S. Department of Education, 1990 K Street NW, Washington, DC 20006-5650.

### **Q: What if I have other questions?**

- A: If you have any questions about the study, you may send e-mail to [NATES@census.gov](mailto:NATES@census.gov) or you may call the Census Bureau toll-free at 1-800-845-8243.

