#### Form A—State Operated

DIRECTIONS: The SUNY Student Opinion Survey is given to a sample of students every third year. The information is used to evaluate services, programs, and facilities at your campus. Your participation is voluntary and your responses will be kept confidential. Giving us your opinions will not harm you in any way.

Please mark your responses by filling in the ovals with a No. 2 pencil or ballpoint pen (using blue or black ink). DO NOT use a mechanical pencil, nylon or felt-tip pen, marker, or colored pencil. Give us only one response per question, and if a question does not apply, please respond using the "Did Not Use or Not Available" oval.

If you are 17 years of age or younger, please do not respond to this survey. If you are 18 years of age or older, please write your student ID in the box to the right and darken the appropriate oval below each number or character. Your student ID will most likely be the ID you use to register for classes. We use the ID to match your responses with academic records to better understand the responses. We will never release or divulge your name or ID to anyone else, or use what you tell us for any purpose other than improving the programs and services we provide to students. If you do not want to give us your ID, you may still participate in the survey.

Student ID _Enter first number or character here.										
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Please read and sign at the right. I have read the directions and give permission to use my Student ID		
for the purposes indicated. $\overline{Y}$	our Signature (Do not print.)	Date

#### Section I—College Impressions and Plans

- 1. Compared to your expectations, your academic experiences at this college have:
  - Exceeded your expectations.
  - Met your expectations.
  - Not met your expectations.
- 2. At the time you applied for admission, this college was your:
  - First choice.
  - Second choice.
  - Third choice.
  - Fourth or lower choice.
- 3. If you could start over, would you choose to attend this college again?
  - Definitely yes
  - Probably yes
  - Uncertain
  - Probably no
  - Definitely no
- 4. Is your current plan to graduate from this college?
  - Definitely yes

  - Uncertain
  - Probably no
- - Probably yes

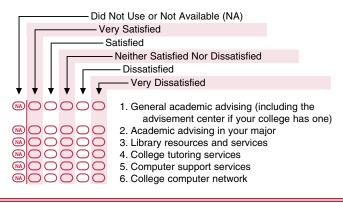
  - Definitely no

- 5. In which of the following areas is your current or planned major? Mark only one.
  - Agriculture and Forestry
  - Applied Arts
  - Architecture and Design
  - **Business**
  - Communications & Journalism
  - Computer & Info. Sciences
  - Education
  - Engineering
  - Fine Arts
  - Health & Nursing

- Hospitality
- Liberal Arts and Humanities
- Life Sciences Mathematics
- Physical Sciences
- Public Services and
  - Criminal Justice Social Sciences
- Other
- Undecided
- 6. What is your overall impression of the quality of education at this college?
  - Very high
  - O High
  - Average
  - Low
  - Very low
- 7. How satisfied are you with this college in general?
  - Very satisfied
  - Satisfied
  - Neither satisfied nor dissatisfied
  - Dissatisfied
  - Very dissatisfied

# Section II—Academic Services, Environment, and Experiences

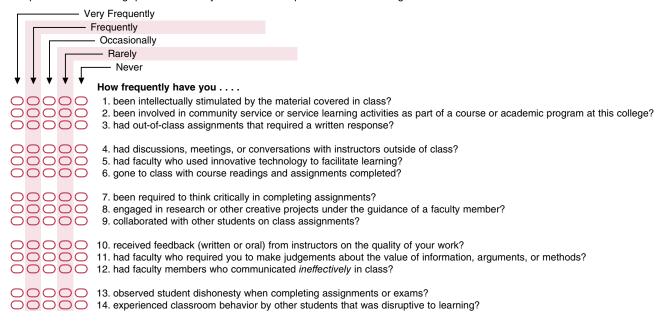
A. Fill in the oval indicating your level of satisfaction with each of the following aspects of this college's academic services and environment. If a question does not apply, please respond using the "Did Not Use or Not Available" oval. Mark only one of the six alternatives for each item.



Did Not Use or Not Available (NA)
Very Satisfied
Satisfied
Neither Satisfied Nor Dissatisfied
Dissatisfied
<b>V V V V V</b>
7. Availability of instructors outside of class
8. Class size considering the type of class
9. Availability of courses in your major
10. Availability of general education courses
11. Availability of internships
12. Quality of instruction

### Section II—Academic Services, Environment, and Experiences (Continued)

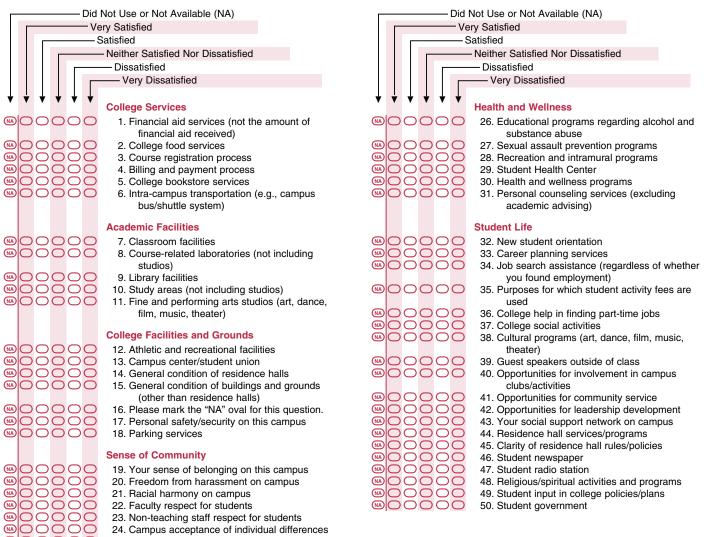
B. Respond to the following questions about your academic experiences at this college.



#### Section III—College Services, Facilities, and Environment

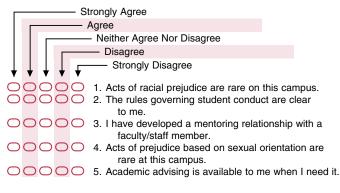
25. Campus openness to opinions of others

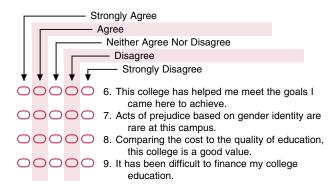
A. Fill in the oval indicating your level of satisfaction with each of the following aspects of this college's services, facilities, and environment.



## Section III—College Services, Facilities, and Environment (Continued)

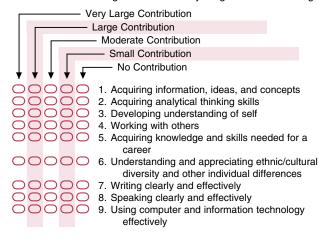
B. Indicate your level of agreement with the following statements.

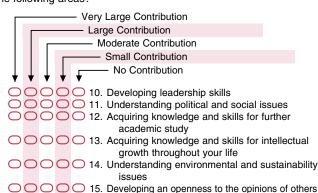




#### Section IV—College Outcomes

How much has this college contributed to your growth and learning in each of the following areas?





#### Section V—Background Information

••	What is your age group.
	○ 18 or 19
	O 20 to 24
	25 to 34
	35 to 44
	○ 45 to 54
	○ 55 and over
2.	What is your gender?
	Male Female
3.	Indicate if you are of Hispanic or Latino background.
	Yes

- Prefer not to respond 4. Indicate your race. Mark all that apply. (Leave blank if none of these
  - apply to you.) American Indian/Alaska Native
  - Asian Black/African American

What is your age group?

- Native Hawaiian/Other Pacific Islander
- White

No

- Prefer not to respond
- 5. Are you currently married?
  - Yes O No
- 6. Are you the parent or guardian of one or more dependent children?
  - Yes O No
- 7. Did you complete high school in New York State?
  - O No

Ο.	0 0	(AP®) courses for which you received college credit?
	Yes	○ No
9.	Is it vour pla	an to find work in New York State following graduation?

- - Yes
- 10. Which of the following was true for you when you first entered this college?
  - This is the first college I attended after high school.

During high cohool did you aproll in college cours

- Transferred from a 2-year college
- Transferred from a 4-year college
- 11. What is your overall cumulative grade point average (GPA) at this college?
  - 3.5-4.0
  - 3.0-3.49
  - 2.5-2.99
  - 2.0-2.49
  - Below 2.0
  - Not applicable or do not know
- 12. Are you enrolled this semester as a full-time or part-time student?
  - Full time (12 credits or more)
  - Part time (less than 12 credits)
- 13. How many college credits have you earned toward your current degree?
  - O-30 (freshman)
  - 31–60 (sophomore)
  - 61-90 (junior)
  - 91 or more (senior)
  - Other or do not know

# **Section V—Background Information (Continued)**

14. Indicate the number of hours in a typical week that you spend on each type of activity liste	ed below.
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	0 1–5 6–10 11–15 16–20 21–30 31–40 Over 40 <u>Hours</u> <u>Hours</u> <u>Hours</u> <u>Hours</u> <u>Hours</u> <u>Hours</u> <u>Hours</u> <u>Hours</u> <u>Hours</u>									
a. Attending classes b. Homework and studying outside of class c. Other college-sponsored activities (athletics, intramurals, social activities, d. On-campus employment e. Off-campus employment f. Household duties/care of family	student government) O O O O O O O O O O O O O O O O									
<ul> <li>15. In which of the following have you participated as part of your academic program? Check all that apply. (Leave blank if none apply.)</li> <li>Paid internship for college credit</li> <li>Paid internship—no college credit</li> <li>Non-paid internship for college credit</li> <li>Non-paid internship—no college credit</li> <li>Non-paid internship—no college credit</li> <li>16. During the past year, how many TOTAL hours did you spend in</li> </ul>	<ul> <li>20. Did you receive a TAP Grant this year? <ul> <li>Yes</li> <li>No</li> <li>Don't know</li> </ul> </li> <li>21. Did you receive a Pell Grant this year? <ul> <li>Yes</li> <li>No</li> </ul> </li> </ul>									
non-compensated community service or service learning activities (e.g., student teaching), or charitable volunteering?  O hours  1 to 20 hours  21 to 40 hours  41 to 60 hours  More than 60 hours	<ul> <li>Don't know</li> <li>22. Are you fluent in a language other than English? <ul> <li>Yes</li> <li>No</li> </ul> </li> <li>23. When you were a child, the English language was:</li> </ul>									
17. What has been your <i>primary</i> source of academic advising during this academic year? Mark only one.  My assigned college advisor College publications/college website Friends or family Instructor or staff member not assigned as my advisor Academic Advising Center or other official advising office/service Other  18. Where do you currently live? On campus (college residence hall or apartment) Off campus with parents or relatives Off campus housing with other students or friends Off campus with spouse Off campus alone Other  19. If living off campus, how long does it take you to get to campus? (Leave blank if you live on campus.) Less than 15 minutes 15–30 minutes 31 minutes to 1 hour More than 1 hour	the only language spoken at home one of multiple (two or more) languages spoken at home  24. Were either of your parents born in a non-English speaking country? Yes No  25. What is the highest degree or level of schooling completed by either of your parents? No formal schooling Grades 1–12, no diploma High school graduate—diploma or GED Some college, but no degree Associate degree Bachelor's degree Master's degree Professional degree (e.g., JD, MD, DDS) Doctoral degree (e.g., PhD, EdD)									
Section VI—Additional Questions	Section VII—Comments and Suggestions									
If an additional set of questions is included with this form, please record your responses in this section.	If you wish to make any comments or suggestions, please write them on the lines below.									

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B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B				
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If you wish to make any comments or suggestions, please write them on the lines below.

DO NOT WRITE BELOW THIS LINE.