



2021 Post-School Outcomes Survey

To Interviewer Staff:

As part of the Office of Special Education Programs’ (OSEP) results-based accountability process, OSEP requires states to gather information from students one year post high school exit as part of our State Performance Plan Indicator 14. In Colorado, districts are responsible for contacting students to collect data on special education students who have graduated, dropped out, or aged out and report that information to the Colorado Department of Education. This survey is intended for students who have left high school or a transition program, not those currently enrolled in a secondary education program.

Unless otherwise prompted, please read each survey question below as written and read ALL OF THE ANSWERS and mark ONE RESPONSE per question. If the respondent refuses to answer a question, select the “No response” option and continue to the next appropriate question.

Additional information for interviewer staff is provided below and the text will appear italicized and in a box. Please do not read instructional information to students.

***This data collection is used to determine your former students’ post-school performance. Every effort should be made to contact all students in your sample. This may require more than three attempts using multiple means of outreach including SWAP providers, social media, family, friends, emergency contacts, email, home visits, etc.*

Record the date, time, number called, contact status, your initials, and any notes for each contact attempt.

Date	Time	Number Called	Status	Initials	Notes



Student Name:

Hi XXXXXXXXXXX. My name is XXXXXXXXXXX and I am from [School or District Name]. I'm calling to ask if you would be willing to complete a short survey over the phone about what you've been doing since leaving high school. Would it be possible for you to complete the survey over the phone? The survey will take about 10 minutes to complete.

If yes, ask: Do you have any questions before I begin? Begin the survey with Question 1 below.

If no, ask: Would you like to make an appointment to complete the survey at another time? What days and times are good for you?

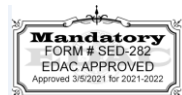
If yes, schedule the appointment and confirm the student, parent, or family member's telephone number. (Date and time: _____)

If the student refuses to take part in the survey thank them for their time. Proceed to Overall Outcome of Call Attempts and select "Interview refused" to end interview.

What was the overall outcome of call attempts? Please select the appropriate response:

Overall Outcome of Call Attempts

- Interview began
- Student still enrolled in school (including receiving 18-21 services)
- Called multiple times but no answer
- Called multiple times, left message, no response
- Phone disconnected – used multiple sources
- Moved / No forwarding information
- Incarcerated
- Deceased
- No student / family contact information available
- Interview refused



POSTSECONDARY EDUCATION/TRAINING

1. In the last 12 months since leaving high school, have you ever been enrolled in any school, job training, or education program?

- Yes (If yes, answer questions 1a-1b)
- No (If no, go to question 2)

1A. What type of training, program, or school was it? (Wait for answer and read back the option that best matches. If the respondent agrees, check the appropriate box.) (If multiple apply, choose one that was attended the longest)

- A four-year college or university
- A two-year community or technical college
- High school completion program (e.g., Adult Basic Education, GED)
- Short-term education or employment training program (e.g., job corps, short-term job training, or apprenticeship program)
- On a mission, AmeriCorps, in the Peace Corps, etc.
- Vocational/Technical School – less than a 2-year program
- Other: _____

1B. Did you complete an entire term/program? (NOTE: a semester, a quarter, a summer session, online, etc.)

- Yes
- No

EMPLOYMENT

2. In the 12 months since leaving high school, have you ever worked?

- Yes (go to questions 2A-2E)
- No (go to question 3)

2A. Did you work for a total of 3 months (about 90 days)? (NOTE: Days do not need to be in a row)

- Yes
- No
- I don't know

2B. Did you work, on average, 20 or more hours per week while you were employed (e.g., student may have worked 10 hours one week and 30 hours the following week; this is an average of 20 hours per week)?

- Yes
- No
- I don't know



2C. Were/are you paid at least minimum wage (NOTE: 2020-\$12.00; 2021-\$12.32; Denver County: 2020-\$12.85; 2021-\$14.77)?

- Yes
- No
- I don't know

2D. Where is/was your job? (Read all choices) (Note: if more than one job, ask about the job they held the longest)

- In a company or business in your community that employs people with and without disabilities.
- In a supported employment site (e.g., paid work for people with disabilities that includes services such as a job coach or specialized job training to assist you with your job)
- In a work site that includes only employees with disabilities
- In your family's business (farm, family store, daycare, etc.)
- In the military
- Self-employed (making/selling jewelry, artwork/crafts, essential oils, t-shirts, etc.)
- Employed while in jail or prison
- Other _____
- No response

2E. What is/was the name of the business or company you work/worked for? (Proceed to question 4)

3. Why haven't you worked since leaving school? (Wait for answer, then check all that apply)

- | | | |
|--|---|---|
| <input type="radio"/> Currently working with agency on workforce development | <input type="radio"/> In School | <input type="radio"/> Baby/Family |
| <input type="radio"/> Have not found a job | <input type="radio"/> Transportation issues | <input type="radio"/> Other: _____
(volunteering, church/missions) |
| <input type="radio"/> Need help with employment process | <input type="radio"/> Medical reason | <input type="radio"/> Don't Know/No Answer |
| <input type="radio"/> Laid off/lost job | <input type="radio"/> Drugs/Alcohol | |
| <input type="radio"/> Don't want or need to work | <input type="radio"/> Disability | |
| | <input type="radio"/> Incarceration | |
| | <input type="radio"/> Legal issues | |



AGENCY LINKAGES

4. **Which community agency are/were you working with?** (check all that apply)
- Division of Vocational Rehabilitation/School to Work Alliance Program (SWAP)
 - Community-Centered Board (The Resource Exchange, Developmental Pathways, RMHS, etc.)
 - Independent Living Center (Atlantis, The Independence Center, etc.)
 - Workforce Center
 - Other (e.g., volunteering: meals on wheels, foodbank, mowing lawns; recreation/leisure program, community participation program, etc.)
 - I am/was not working with any community agency

SCHOOL-RELATED INFORMATION

5. **Did you participate in services for students ages 18-21 in your district (receive services after your senior year)?**
- Yes
 - No
- 5A. **Why didn't you participate in 18-21 services in your district?**
- The special education team decided that I did not need these services
 - I thought I was prepared and did not think that I needed these services
 - I was not aware that these services were available/they did not exist
 - Those services would have been helpful
6. **Did the student leave before graduating or reaching maximum age?** (If the exit code in the demographic information above is any code other than "90 - Graduated with Regular Diploma" or "01 - Reached Maximum" the student did leave before graduating or reaching maximum age.)
- Yes (the student left before graduating or reaching maximum age) – **If student left before reaching maximum age, answer questions 6A-6B.**
 - NO (the student did not leave before graduating or reaching maximum age): (go to Q7)



6A. **According to our information, you left school before graduating or reaching maximum age. Did you leave school because:** (Check all that apply)

- You felt/thought that classes were boring
- You missed too many school days and could not catch up
- You spent time with people who were not interested in school
- You had too much freedom and not enough rules in school
- You were failing in school

6B. **Would you have stayed in school if:** (Check all that apply.)

- You had more support from school personnel
- You had more support from family
- If different classes were offered
- Nothing would have kept me in school

CLOSING OF INTERVIEW

7. Thank you very much for taking my call today – is there anything that I can do to assist you to connect to resources in your community? _____

8. Is there anything else that you would like your school to know? (Make a suggestion to help better prepare current students for life after high school)? (Prompt: What was most helpful or could have been done better?) _____

9. Those are all the questions I have. Do you have any questions for me before I go?

If you find you have questions later, please feel free to call me at XXX-XXX-XXXX. We have completed the interview. Have a great day.



For interviewer: In order that CDE better understand the post-school outcomes interviews process, please answer the following:

10. Interviewer:

- Teacher
- Administrator
- Related service provider (licensed staff)
- Other (non-licensed staff) _____

11. Which of the following method (s) did you use to contact the student?

- Called the student
- SWAP provider made the calls
- Looked up the student on social media
- Asked family for contact information
- Asked friends for contact information
- Emailed the student
- Texted the student
- Made a home visit
- Other: _____

Interviewer notes: (Include information about how a question was re-worded (if at all), what probing questions were used (if any), and general impressions about the interview. Please be brief.

For technical assistance or questions,

contact: Gail Lott (CDE) at

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