

NSSE 2024 Core U.S. Survey

1. During the current school year, about how often have you done the following?

Response options: Very often=4, Often=3, Sometimes=2, Never=1

- a. Asked questions or contributed to course discussions in other ways
- b. Asked another student to help you understand course material
- c. Explained course material to one or more students
- d. Prepared for exams by discussing or working through course material with other students
- e. Worked with other students on course projects or assignments
- f. Given a course presentation

2. During the current school year, about how often have you done the following?

Response options: Very often=4, Often=3, Sometimes=2, Never=1

- a. Combined ideas from different courses when completing assignments
- b. Connected your learning to societal problems or issues
- c. Included diverse perspectives (political, religious, racial/ethnic, gender, etc.) in course discussions or assignments
- d. Examined the strengths and weaknesses of your own views on a topic or issue
- e. Tried to better understand someone else's views by imagining how an issue looks from their perspective
- f. Learned something that changed the way you understand an issue or concept
- g. Connected ideas from your courses to your prior experiences and knowledge

3. During the current school year, about how often have you done the following?

Response options: Very often=4, Often=3, Sometimes=2, Never=1

- a. Talked about career plans with a faculty member
- b. Worked with a faculty member on activities other than coursework (committees, student groups, etc.)
- c. Discussed course topics, ideas, or concepts with a faculty member outside of class
- d. Discussed your academic performance with a faculty member

4. During the current school year, how much has your coursework emphasized the following?

Response options: Very much=4, Quite a bit=3, Some=2, Very little=1

- a. Memorizing course material
- b. Applying facts, theories, or methods to practical problems or new situation
- c. Analyzing an idea, experience, or line of reasoning in depth by examining its parts
- d. Evaluating a point of view, decision, or information source
- e. Forming a new idea or understanding from various pieces of information

5. During the current school year, to what extent have your instructors done the following?

Response options: Very much=4, Quite a bit=3, Some=2, Very little=1

- a. Clearly explained course goals and requirements
- b. Taught course sessions in an organized way
- c. Used examples or illustrations to explain difficult points
- d. Provided feedback on a draft or work in progress
- e. Provided prompt and detailed feedback on tests or completed assignments
- f. Explained in advance the criteria for successfully completing your assignments
- g. Reviewed and summarized key ideas or concepts
- h. Taught in a way that aligns with how you prefer to learn
- i. Enabled you to demonstrate your learning through quizzes, assignments, and other activities

6. During the current school year, about how often have you done the following?

Response options: Very often=4, Often=3, Sometimes=2, Never=1

- a. Reached conclusions based on your own analysis of numerical information (numbers, graphs, statistics, etc.)
- b. Used numerical information to examine a real-world problem or issue (unemployment, climate change, public health, etc.)
- c. Evaluated what others have concluded from numerical information

7. During the current school year, about how many papers, reports, or other writing tasks of the following lengths have you been assigned? (Include those not yet completed.)

Response options: None=1, 1-2=2, 3-5=3, 6-10=4, 11-15=5, 16-20=6, More than 20 papers=7

- a. Up to 5 pages
- b. Between 6 and 10 pages
- c. 11 pages or more

8. During the current school year, about how often have you had discussions with people from the following groups?

Response options: Very often=4, Often=3, Sometimes=2, Never=1

- a. People of races or ethnicities other than your own
- b. People from economic backgrounds other than your own
- c. People with religious beliefs other than your own
- d. People with political views other than your own
- e. People with sexual orientations other than your own
- f. People from countries other than your own

9. During the current school year, about how often have you done the following?

Response options: Very often=4, Often=3, Sometimes=2, Never=1

- a. Identified key information from reading assignments
- b. Reviewed your notes after class
- c. Summarized what you learned in class or from course materials

10. During the current school year, to what extent have your courses challenged you to do your best work? [challenge]

Response options: Not at all=1 to Very much=7

11. Which of the following have you done while in college or do you plan to do before you graduate?

Response options: Done or in progress=4, Plan to do=3, Do not plan to do=2, Have not decided=1

- a. Participate in an internship, co-op, field experience, student teaching, or clinical placement
- b. Hold a formal leadership role in a student organization or group
- c. Participate in a learning community or some other formal program where groups of students take two or more classes together
- d. Participate in a study abroad program
- e. Work with a faculty member on a research project
- f. Complete a culminating senior experience (capstone course, senior project or thesis, portfolio, recital, comprehensive exam, etc.)

12. About how many of your courses at this institution have included a community-based project (service-learning)?

Response options: All=4, Most=3, Some=2, None=1

13. Indicate the quality of your interactions with the following people at your institution.

Response options: Poor=1 to Excellent=7, Not applicable (coded as missing)=9

- a. Students
- b. Academic advisors
- c. Faculty
- d. Student services staff (career services, student activities, housing, etc.)
- e. Other administrative staff and offices (registrar, financial aid, etc.)

14. How much does your institution emphasize the following?

Response options: Very much=4, Quite a bit=3, Some=2, Very little=1

- a. Spending significant amounts of time studying and on academic work
- b. Providing support to help students succeed academically
- c. Using learning support services (tutoring services, writing center, etc.)
- d. Encouraging contact among students from different backgrounds (social, racial/ethnic, religious, etc.)
- e. Providing opportunities to be involved socially
- f. Providing support for your overall well-being (recreation, health care, counseling, etc.)
- g. Helping you manage your non-academic responsibilities (work, family, etc.)
- h. Attending campus activities and events (performing arts, athletic events, etc.)
- i. Attending events that address important social, economic, or political issues

15. To what extent do you agree or disagree with the following statements?

Response options: Strongly disagree=1, Disagree=2, Agree=3, Strongly agree=4

- a. I feel comfortable being myself at this institution.
- b. I feel valued by this institution.
- c. I feel like part of the community at this institution.

16. About how many hours do you spend in a typical 7-day week doing the following?

Response options: 0=1, 1-5=2, 6-10=3, 11-15=4, 16-20=5, 21-25=6, 26-30=7, More than 30 (Hours per week)=8

- a. Preparing for class (studying, reading, writing, doing homework or lab work, analyzing data, rehearsing, and other academic activities)
- b. Participating in co-curricular activities (organizations, campus publications, student government, fraternity or sorority, intercollegiate or intramural sports, etc.)
- c. Working for pay on campus
- d. Working for pay off campus
- e. Doing community service or volunteer work
- f. Relaxing and socializing (time with friends, video games, TV or videos, keeping up with friends online, etc.)
- g. Providing care for dependents (children, parents, etc.)
- h. Commuting to campus (driving, walking, etc.)

17. Of the time you spend preparing for class in a typical 7-day week, about how much is on assigned reading? [reading]

Response options: Very little=1, Some=2, About half=3, Most=4, Almost all=5

18. How much has your experience at this institution contributed to your knowledge, skills, and personal development in the following areas?

Response options: Very much=4, Quite a bit=3, Some=2, Very little=1

- a. Writing clearly and effectively
- b. Speaking clearly and effectively
- c. Thinking critically and analytically
- d. Analyzing numerical and statistical information
- e. Acquiring job- or work-related knowledge and skills
- f. Working effectively with others
- g. Developing or clarifying a personal code of values and ethics
- h. Understanding people of other backgrounds (economic, racial/ethnic, political, religious, nationality, etc.) [pgdiverse]
- i. Solving complex real-world problems
- j. Being an informed and active citizen

19. How would you evaluate your entire educational experience at this institution?

Response options: Excellent=4, Good=3, Fair=2, Poor=1

20. If you could start over again, would you go to the same institution you are now attending?

Response options: Definitely yes=4, Probably yes=3, Probably no=2, Definitely no=1

21. Do you intend to return to this institution next year?

Response options: Yes=1, No=0, Not sure=9 Note: Only non-seniors receive this question.

22a. How many majors do you plan to complete? (Do not count minors.)

Response options: One=1, More than one=2

22b	. Please enter your major or expected major:
	- Major
	Response options: Text box plus drop-down list of majors (see Appendix A) from NSSE's lookup table OR -
	Please enter up to two majors or expected majors (do not enter minors):
	- Major
	Response options: Text box plus drop-down list of majors
	- Second Major
	Response options: Text box plus drop-down list of majors
22 M/hat	Note: Item wording and second major depend on the respondent's selection on item 22a.
	is your class level? Response options: First year=1, Sophomore=2, Junior=3, Senior=4, Unclassified=5
•	Acsportse options. This year -1, supriorities-2, sumor-3, semor-4, onclussifica-5
24. What	type of courses have you taken at this institution this current school year?
	Response options: Mostly in-person courses=1, Mostly remote courses (online, web-based, Zoom, etc.)=2, Mostly hybrid or blended
	courses that combine in-person and remote instruction=3, A balanced mix of the above course types=4
25. What	have most of your grades been up to now at this institution?
	Response options: A=8, A-=7, B+=6, B=5, B-=4, C+=3, C=2, C- or lower=1
26. Did yo	ou begin college at this institution or elsewhere?
,	Response options: Started here=0, Started elsewhere=1
27.Since	graduating from high school, which of the following types of schools have you attended other than the one you are now
	ding? (Select all that apply.)
	Response options: Selected=1, Not selected=0
	□ Vocational or technical school
	□ Community or junior college
	4-year college or university other than this one
	□ None
	□ Other
	Note: The item 'none' was disabled if respondent selected 'Started elsewhere' on item 26
28. What	is the highest level of education you ever expect to complete?
	Response options: Some college but less than a bachelor's degree=1, Bachelor's degree (B.A., B.S., etc.)=2, Master's degree (M.A., M.S.,
	etc.)=3, Doctoral or professional degree (Ph.D., J.D., M.D., etc.)=4
29. What	is the highest level of education completed by either of your parents, guardian(s), or those who raised you)?
	Response options: Did not finish high school=1, High school diploma or G.E.D.=2, Attended college but did not complete degree=3,
	Associate's degree (A.A., A.S., etc.)=4, Bachelor's degree (B.A., B.S., etc.)=5, Master's degree (M.A., M.S., etc.)=6, Doctoral or professional
	degree (Ph.D., J.D., M.D., etc.)=7, I prefer not to respond=8
30. How v	would you describe your gender identity? (Select all that apply.)
	Response options: Selected=1, Not selected=0
	□ Woman
[□ Man
[□ Trans/Transgender
[☐ Agender or gender neutral
]	□ Demigender
	☐ Genderqueer, non-binary, gender non-conforming, or genderfluid
	□ Two-spirit
	□ Cis/Cisgender
	Questioning or unsure
	Another gender identity, please specify:
I	□ I prefer not to respond
31. How v	would you describe your sexual orientation? (Select all that apply.)
	Response options: Selected=1, Not selected=0
	□ Straight or heterosexual ´

	□ Bisexual
	□ Lesbian
	□ Gay
	□ Queer
	□ Pansexual or polysexual
	☐ Ace, gray, or asexual
	Demisexual
	Questioning or unsure
	Another sexual orientation, please specify:
	□ I prefer not to respond
	would you describe yourself? (Select all that apply.)
	Response options: Selected=1, Not selected=0
	□ Asian
	Black or African American
	Hispanic, Latina/o, Latine, or Latinx
	☐ Indigenous, American Indian, Native American, or Alaska Native ☐ Middle Eastern or North African
	□ Native Hawaiian or Pacific Islander
	□ White
	□ Another race or ethnicity
	☐ I prefer not to respond
	- Tyreter not to respond
222 Ara	you an international student?
	Response options: Yes=1, No=0
22h Wh	at is very account of siting a him?
SSD. WII	at is your country of citizenship?
	Response option: Text box with pull-down country list Note: See Appendix B for list of country codes and categories.
	,
	at is the 5-digit ZIP code of your home address during your last year of high school? [zipcode] Response option: [#####] You have a disability or condition that impacts your learning, working, or living activities?
	Response options: Yes=1, No=0, I prefer not to respond=9
	nich of the following impacts your learning, working, or living activities?
	Response options: Selected=1, Not selected=0
	Response options: Selected=1, Not selected=0 Sensory disability
	Response options: Selected=1, Not selected=0 Sensory disability □ Blind or low vision
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI)
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD)
	Response options: Selected=1, Not selected=0 Sensory disability □ Blind or low vision Deaf or hard of hearing Physical disability □ Mobility condition that affects walking □ Mobility condition that does not affect walking □ Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability □ Anxiety □ Attention deficit or hyperactivity disorder (ADD or ADHD) □ Autism spectrum
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD) Autism spectrum Depression
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD) Autism spectrum Depression Post-Traumatic Stress Disorder (PTSD)
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD) Autism spectrum Depression
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD) Autism spectrum Depression Post-Traumatic Stress Disorder (PTSD) Another mental health or developmental disability (schizophrenia, eating disorder, etc.)
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD) Autism spectrum Depression Post-Traumatic Stress Disorder (PTSD) Another mental health or developmental disability (schizophrenia, eating disorder, etc.) Another disability or condition
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD) Autism spectrum Depression Post-Traumatic Stress Disorder (PTSD) Another mental health or developmental disability (schizophrenia, eating disorder, etc.) Another disability or condition Chronic medical condition (asthma, diabetes, Crohn's disease, etc.)
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD) Autism spectrum Depression Post-Traumatic Stress Disorder (PTSD) Another mental health or developmental disability (schizophrenia, eating disorder, etc.) Another disability or condition Chronic medical condition (asthma, diabetes, Crohn's disease, etc.) Learning disability Intellectual disability Disability or condition not listed
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD) Autism spectrum Depression Post-Traumatic Stress Disorder (PTSD) Another mental health or developmental disability (schizophrenia, eating disorder, etc.) Another disability or condition Chronic medical condition (asthma, diabetes, Crohn's disease, etc.) Learning disability Intellectual disability
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD) Autism spectrum Depression Post-Traumatic Stress Disorder (PTSD) Another mental health or developmental disability (schizophrenia, eating disorder, etc.) Another disability or condition Chronic medical condition (asthma, diabetes, Crohn's disease, etc.) Learning disability Intellectual disability Disability or condition not listed
	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD) Autism spectrum Depression Post-Traumatic Stress Disorder (PTSD) Another mental health or developmental disability (schizophrenia, eating disorder, etc.) Another disability or condition Chronic medical condition (asthma, diabetes, Crohn's disease, etc.) Learning disability Intellectual disability Disability or condition not listed Note: Items were only given if the respondent selected 'Yes' to item 34a
35. Of wl	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Mobility condition that does not affect walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD) Autism spectrum Depression Post-Traumatic Stress Disorder (PTSD) Another mental health or developmental disability (schizophrenia, eating disorder, etc.) Another disability or condition Chronic medical condition (asthma, diabetes, Crohn's disease, etc.) Learning disability Intellectual disability Disability or condition not listed Note: Items were only given if the respondent selected 'Yes' to item 34a
35. Of wl	Response options: Selected=1, Not selected=0 Sensory disability Blind or low vision Deaf or hard of hearing Physical disability Mobility condition that affects walking Speech or communication disorder Traumatic or acquired brain injury (TBI) Mental health or developmental disability Anxiety Attention deficit or hyperactivity disorder (ADD or ADHD) Autism spectrum Depression Post-Traumatic Stress Disorder (PTSD) Another mental health or developmental disability (schizophrenia, eating disorder, etc.) Another disability or condition Chronic medical condition (asthma, diabetes, Crohn's disease, etc.) Learning disability Intellectual disability Disability or condition not listed Note: Items were only given if the respondent selected 'Yes' to item 34a

	 □ Independent Greek Council (IGC) □ Interfraternity Conference (IFC, NIC) □ National Panhellenic Conference (NPC) □ National Pan-Hellenic Council (NPHC, The Divine 9) □ United Greek Council (UGC) or Multicultural Greek Councils (NMGC, NALFO, NAPA) □ Another Greek letter social or service organization, please specify:
	h of the following best describes where you are living while attending college? Response options: Campus housing (other than a fraternity or sorority house)=1; Fraternity or sorority house=2; House, apartment, or other residence within walking distance to campus=3; House, apartment, or other residence farther than walking distance to campus=4, Not applicable: Homeless or in transition=6
-	ou a student-athlete on a team sponsored by your institution's athletics department? Response options: Yes=1, No=0
-	ou a current or former member of the U.S. Armed Forces, Reserves, or National Guard? Response options: Yes=1, No=0

39. Prompt for open-ended comments (Institutions select one of the following for the end of the NSSE questionnaire or customize their own question.)

Response option: Text boxes with a 5,000 character limit

- --If you have any additional comments or feedback that you'd like to share on the quality of your educational experience, please enter them below
- --What has been most satisfying about your experience so far at this institution? What has been most disappointing?;
- --Please describe the most significant learning experience you have had so far at this institution. ;
- --What one change would most improve the educational experience at this institution? What one thing should not be changed?
- --Comment prompt customized by school



NSSE 2024 HIP Quality Topical Module

This module—developed for the <u>Assessing Quality and Equity in High-Impact Practices</u> project, supported by Lumina Foundation—enables participating institutions to examine quality concerns related to HIP experiences. Students who indicated on the core NSSE that they have done or were doing at least one HIP received a set of questions (*Questions for HIP Participants*) probing their experience, while those who have not done any of the HIPs received a single open-ended item (*Question for Non-Participants*).

QUESTIONS FOR HIP PARTICIPANTS

If respondent participated in only one HIP:

1. Earlier, you indicated that you participated or are participating in:. We have some follow-up questions about this experience. If you participated in this type of experience more than once, base your answers on your most recent participation.

If respondent participated in more than one HIP:

1. Earlier, you indicated that you participated or are participating in the special learning experiences below. Please select ONE of these experiences for a short set of follow-up questions. It can be any one you choose, so long as you remember it well. If you participated in this type of experience more than once, base your answers on your most recent participation.

HIPselect options include:

1= A course that includes a community-based project (service-learning); 2=A learning community or some other formal program where groups of students take two or more classes together; 3= A research project with a faculty member; 4= An internship, co-op, field experience, student teaching, or clinical placement; 5= A study abroad program; 6= A culminating senior experience (capstone course, senior project or thesis, portfolio, recital, comprehensive exam, etc.)

Note: Capstone experiences are suppressed for FY students. HIPs are identified if the student selected "Done or in progress" or (for service-learning) "Some/Most/or All."

You selected: [HIPselect]

If [HIPselect] = 2 (Learning Community):

1a. Did students in this program live in the same residence hall or housing unit? [HIPlearncomsame] 1=Yes, 0=No, 9=Not sure

2a. Is this experience finished?

1=Yes, 0=No

If = 0 (No):

2b. About how long have you been participating in it?

1=1 week or less, 2=2 weeks, 3=3 weeks, 4=More than 3 weeks

If = 1 (Yes):

2d. Was it offered or arranged by this institution?

1=Yes, 0=No, 9=Not sure

3. To what extent were the following explained to you?

4=Very much, 3=Quite a bit, 2=Some, 1=Very little

- a. The activities you would do as part of this experience
- b. What you would learn from this experience
- c. How you would be evaluated in this experience

Note: The verb tense on items below depends on if HIP was finished. If the experience was finished, past tense was used; if the experience was not finished, present tense was used. If missing, past tense was used.

4. To what extent did [does] this experience challenge you to do your best work?

7=Very much, 6, 5, 4, 3, 2, 1=Not at all

5. About how many hours did [do] you spend in a typical 7-day week on this experience?

0=0, 1=1-5, 2=6-10, 3=11-15, 4=16-20, 5=21-25, 6=26-30, 7=More than 30 hours

6. Compared to your typical learning experiences at this institution, about how much effort did [does] this experience require? 5=Much more effort, 4=More effort, 3=About as much effort, 2=Less effort, 1=Much less effort

7. During this experience, about how often did [do] you receive helpful feedback from the following individuals?

4=Very often, 3=Often, 2=Sometimes, 1=Never, 9=Not applicable

- a. Faculty or staff member from this institution
- b. Supervisor on site
- c. Co-worker
- d. Other student(s)

8. As part of this experience, about how often did [do] you find yourself in settings or circumstances that were [are] new or unfamiliar to you?

4=Very often, 3=Often, 2=Sometimes, 1=Never

9. As part of this experience, about how often did [do] you interact with people from a different background or identity (racial/ethnic, economic, political, religious, etc.)? [

4=Very often, 3=Often, 2=Sometimes, 1=Never

10. To what extent do you agree or disagree with the following statements about your experience?

4=Strongly agree, 3=Agree, 2=Disagree, 1=Strongly disagree

- a. I feel [felt] comfortable being myself while participating in this experience.
- b. I feel [felt] valued while participating in this experience.
- c. I feel [felt] like part of a community while participating in this experience.

11. How much does [did] this experience emphasize the following?

5=Very much, 4=Quite a bit, 3=Some, 2=Very little, 1=Not at all

- a. Respecting the expression of diverse ideas
- b. Examining issues of equity or privilege

12a. As part of this experience, about how often did [do] you meet with a faculty or staff member from this institution?

4=Very often, 3=Often, 2=Sometimes, 1=Never

If = 2 (Sometimes), 3 (Often), or 4 (Very often)

12b. To what extent did [do] these meetings focus on what you were [are] learning in this experience?

4=Very much, 3=Quite a bit, 2=Some, 1=Very little, -9=student did not receive question

13. As part of this experience, about how often did you do [have you done] the following?

4=Very often, 3=Often, 2=Sometimes, 1=Never

- a. Work with other students
- b. Discuss your experience with other students in an organized setting (class, seminar, work group, etc.)
- c. Track your experience with informal writing (notes, journal, blog, etc.)
- d. Connect what you were learning to societal problems or issues
- e. Connect what you were learning to your major field or career goals

14. At or near the conclusion of this experience, which of the following did you do [will you have done]?

1=Yes, 0=No, 9=Not sure

- a. Give a presentation for a class or other closed meeting at this institution
- b. Give a public presentation or performance (conference, video, recital, exhibit, etc.)
- c. Write a paper or report

- 15. To what extent has this experience contributed to your knowledge, skills, and personal development in the following areas? 4=Very much, 3=Quite a bit, 2=Some, 1=Very little
 - a. Understanding concepts in your courses or major
 - b. Understanding societal problems or issues
 - c. Applying theory to practice
 - d. Thinking creatively about complex, real-world problems
 - e. Acquiring job- or work-related skills
 - f. Preparing for your plans after graduation
 - g. Developing the skills necessary to work effectively with people from various backgrounds
- 16. Overall, how would you evaluate the quality of this experience?

7=Excellent, 6, 5, 4, 3, 2, 1=Poor

17. What is [was] *most* satisfying about this experience (5,000 character limit; at the end of the survey, you will have an opportunity to comment on your overall experience at this institution.)

Response option: Text box

18. What is [was] *least* satisfying about this experience? (5,000 character limit; at the end of the survey, you will have an opportunity to comment on your overall experience at this institution.)

Response option: Text box

QUESTION FOR HIP NON-PARTICIPANTS

For those not eligible for the above set, only this item was administered.

19. So far at this institution, have you had any educational experiences that profoundly impacted you or that you consider life-changing? If so, please describe. (5,000 character limit; at the end of the survey, you will have an opportunity to comment on your overall experience at this institution.)

Response option: Text box