

Evaluation of the DC Opportunity Scholarship Program

Follow Up Parent Telephone Survey

Spring 2009

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1850-0800 (expiration XX/XX/XX). The time required to complete this information collection is estimated to average 1/4 hour, including the time to review instructions, search existing data resources, gather the data needed, and complete the information collection. **If you have any comments concerning the accuracy of the time estimate or suggestions for improving this form, please contact:** Marsha Silverberg, U.S. Department of Education, Institute of Education Sciences, 555 New Jersey Avenue, NW, Washington, DC 20208, marsha.Silverberg@ed.gov. **If you have comments or concerns regarding the status of your individual submission of this form, e-mail directly to:** babettegutmann@westat.com.

Responses to this data collection will be used only for statistical purposes. The reports prepared for this study will summarize findings across the sample and will not associate responses with a specific district or individual. We will not

Parent Name: _____ Child Name: _____

Child ID: _____

1. Is your child currently enrolled in and regularly attending high school (as of May/June of 2009)?

Yes..... ⁰ (Go to Question 1a)

No..... ¹ (Go to Question 2)

1a. What is the name of the high school your child is currently attending?

_____ (Go to Question 5)

2. Why is your child not currently enrolled in and regularly attending high school (as of May/June of 2009)?

Reason	Yes	No
a. Child already graduated from high school.....	<input type="checkbox"/> ⁰	<input type="checkbox"/> ¹
Circle Year child graduated: 2006 2007 2008	<input type="checkbox"/> ⁰	<input type="checkbox"/> ¹
b. Child is graduating this June (2009).....	<input type="checkbox"/> ⁰	<input type="checkbox"/> ¹
c. Child got a job and left school.....	<input type="checkbox"/> ⁰	<input type="checkbox"/> ¹
d. Child didn't like school.....	<input type="checkbox"/> ⁰	<input type="checkbox"/> ¹
e. Child did not feel safe at school.....	<input type="checkbox"/> ⁰	<input type="checkbox"/> ¹
f. Child had to care for a member of his/her family.....	<input type="checkbox"/> ⁰	<input type="checkbox"/> ¹
g. Child could not keep up with the school work.....	<input type="checkbox"/> ⁰	<input type="checkbox"/> ¹
h. Child changed school and didn't like the new school...	<input type="checkbox"/> ⁰	<input type="checkbox"/> ¹
i. Child thought it would be easier to get a GED.....	<input type="checkbox"/> ⁰	<input type="checkbox"/> ¹

3. Was your child who is no longer attending high school enrolled in any of the following educational/training programs or institutions this year (2008-09) or are they enrolled for this coming fall (2009-10)? CHECK ONE for each year.

	2008-09	2009-10
GED program.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ¹
A job training program or technical school.....	<input type="checkbox"/> ²	<input type="checkbox"/> ²
A 2-year college.....	<input type="checkbox"/> ³	<input type="checkbox"/> ³
A 4-year college.....	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁴
Other (specify _____).....	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁵
Not sure.....	<input type="checkbox"/> ⁸	<input type="checkbox"/> ⁸

4. **What is the employment status of your child who is no longer attending high school?
CHECK ONE.**

- In the military..... 1
- Working full-time..... 2
- Working part-time..... 3
- Looking for work..... 4
- Other (*specify* _____)..... 5
- Not sure..... 8

5. **Lastly, could you please give us the telephone number(s) where you can be reached?**

Home: _____

Work: _____

Cell: _____

Thank you very much for your cooperation.