

**NATIONAL LONGITUDINAL TRANSITION STUDY - 2 (NLTS2)  
YOUTH CONTINUATION [PART 2B] INTERVIEW  
WAVE 2**

NOTE: This part will not be administered in Wave 1; the complete Wave 1 interview will be conducted with parents. In Wave 2, this part will be conducted after Part 1 is administered to parents, if parents indicate that the youth can answer by phone for him/herself. In Wave 3, if the youth is 17 or 18, the Parent Part 1 will be administered first, followed by this part. If the youth is 19 or older, this part will be administered to youth who completed it in Wave 2, whether or not the Parent Part 1 is completed beforehand. I.e., interviews are sequential (Parent Part 1 then Youth Part 2b) in Wave 2 and for 17- and 18-year-olds in Wave 3, but can occur in either order in Waves 3 through 5 for youth who are at least 19 years old.

**PARENT PART 1**

- S Introduction .....
- A Living arrangements
- B Disability
- C Health insurance
- D School status and secondary school experiences .....
- E Family involvement
- F. Services
- G. Youth behaviors
- H. Household
- I. Screen for continuation, overlap items, tracing questions.

**PARENT CONTINUATION, PART 2A**

- J. Secondary school experiences (continued)/postsecondary education .....
- K. Employment .....
- L. Social and extracurricular activities/youth behaviors
- M. Youth's household .....
- N. Closing

**YOUTH CONTINUATION, PART 2B**

- O. Youth introduction
- P. Social and extracurricular activities
- Q. Health
- R. Secondary school experiences/involvement
- S. Postsecondary education.....
- T. Employment .....
- U. Risk behaviors
- V. Youth's feelings and expectations
- W. Youth's household .....
- X. Closing

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### O. YOUTH INTRODUCTION

O1a. Hello, my name is \_\_\_\_\_.

IF YOUTH PORTION IS CONTINUATION OF SAME PHONE CALL AS PARENT, GO TO S2a.  
IF YOUTH PORTION IS A NEW CONTACT, TO GO S1b.

O1b. May I please speak with [NAME OF YOUTH]?

	YES, SUBJECT IS AVAILABLE	1
	SUBJECT(S) NOT AVAILABLE, BUT WILL BE AVAILABLE AT ANOTHER TIME, SET APPOINTMENT	2
GO TO O4.	SUBJECT NO LONGER AVAILABLE	3
	LANGUAGE BARRIER	4

O2a. I'm calling as part of a national study being done by the U.S. Department of Education about young peoples' experiences during and after high school. You were chosen to be in that study [IF WAVE 2 AND IN WAVES 3-5 IF YOUTH IS 17 OR 18 OR IF PARENT PART 1 HAS BEEN COMPLETED: and we have talked with your parent or guardian already. Now we would like to talk with you]. I have some questions about what you have been doing in the way of work or school or other things [IF IN HIGH SCHOOL IN PRECEDING WAVE: during and since high school]. Could I ask you those questions?

GO TO O3	YES	1
	WILL ANSWER, NOT NOW, SET APPOINTMENT	2
TERMINATION SCRIPT	REFUSED	-2

O3. What you say will be kept private and you don't have answer any question that you don't want to. A few questions are about things like smoking, drinking, and sexual activity. If you don't want to answer a question, just say "skip that one." Nothing you say will ever be reported individually about you or your family. If you have any questions or concerns about the study, I can give you a toll-free number to call. IF ASKED, PROVIDE TOLL-FREE NUMBER.

If this is a good time to talk, we can start the interview now. IF RESPONDENT HESITATES, SAY: Why don't we start and then I can always call back if you need to stop before we finish.

GO TO SECTION P.

O3a. Do you have a phone number where I can call [YOUTH]?

GO TO O3a	YES RECORD NUMBER:	
GO TO O3b	NO	2

O3b. Do you have the address where [YOUTH] is living now?

GO TO O3a	YES RECORD ADDRESS	
GO TO TERMINATION SCRIPT	NO	2

TERMINATION SCRIPT: Thank you for your time.

**P. SOCIAL AND EXTRACURRICULAR ACTIVITIES**

My first questions are about where you live and what you do in your spare time.

NLTS

P1a. Where do you live now? Do you live with a parent, on your own, or where? **DO NOT READ CATEGORIES. CODE ALL THAT APPLY. IF ASKED, WE MEAN WHERE YOUTH SPENDS AT LEAST 5 NIGHTS A WEEK MOST WEEKS. PROBE FOR: WHAT TYPE OF PLACE IS THAT? OK TO READ CATEGORIES IF NEEDED.**

GO TO P1b	WITH PARENT	1
GO TO P1c	ALONE	2
	WITH SPOUSE OR ROOMMATE	3
	IN FOSTER CARE	4
	IN A RESIDENTIAL OR BOARDING SCHOOL OTHER THAN A COLLEGE	5
	WITH AN ADULT FAMILY MEMBER OTHER THAN A SPOUSE OR PARENT	6
	IN A COLLEGE DORM	7
	IN MILITARY HOUSING IN BARRACKS	8
	IN A GROUP HOME, ASSISTED LIVING CENTER, OR OTHER SUPERVISED LIVING ARRANGEMENT	9
	IN A HOSPITAL, MEDICAL FACILITY, CONVA-LESCENT HOSPITAL, OR INSTITUTION FOR PERSONS WITH DISABILITIES	10
	IN A MENTAL HEALTH FACILITY	11
	IN A CORRECTIONAL FACILITY/YOUTH DETENTION CENTER	12
	TRANSIENT, HOMELESS, ON THE STREET, IN HIS/HER CAR	13
GO TO P1b	NON-FAMILY LEGAL GUARDIAN	14
GO TO P1c	OTHER, SPECIFY _____	15
	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT:**

IF THIS IS WAVE 2, GO TO CHECKPOINT BEFORE P2D.

IF THIS IS WAVE 3, 4, OR 5 AND YOUTH IS  $\leq$  18 OR PARENT PART 1 INDICATES YOUTH IS STILL IN HIGH SCHOOL, GO TO CHECKPOINT BEFORE P1d.

IF THIS IS WAVE 3, 4, OR 5 AND YOUTH  $>$ 18 AND THERE IS NO PARENT PART 1 OR PARENT PART 1 INDICATES YOUTH NOT IN HIGH SCHOOL, ASK P1b and P1c.

P1b. Do you want to be living with your parent or guardian, or would you rather be living somewhere else? **CODE ONE RESPONSE.**

WANTS TO LIVE WITH PARENT	1
WANTS TO LIVE SOMEWHERE ELSE	2
MIXED, DEPENDS, VARIES	3
DON'T KNOW	-1
REFUSED	-2

P1c. Are you happy with this living arrangement, or would you like to change where you live or who you live with? CODE ONE RESPONSE.

SATISFIED WITH ARRANGEMENT	1
WANT TO CHANGE	2
MIXED, DEPENDS, VARIES	3
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF YOUTH HAD GRADUATED IN EARLIER WAVE, GO TO P3. ELSE, ASK P2a.

P2a. Have you been in high school or taken any high school classes at all this school year, that is from September til now?

GO TO P3	GO TO P2b	YES	1
		NO	2
		DON'T KNOW	-1
		REFUSED	-2

P2b. Are you in high school or taking any high school classes now?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

P3. During the last few weeks, how have you spent most of your time when you weren't working (IF P2b=1, or going to school]? DON'T READ. CODE ALL THAT APPLY

VISITING WITH FAMILY MEMBERS	1
VISITNG WITH FRIENDS	2
DOING HOMEWORK	3
READING FOR PLEASURE	4
GOING OUT ON DATES	5
JUST DRIVING AROUND (WITH FRIENDS OR ALONE)	6
TALKING WITH FRIENDS ON THE TELEPHONE	7
PLAYING COMPUTER GAMES	8
USING THE COMPUTER FOR EMAIL OR INTERNET OR CHAT ROOMS	9
THINKING OR DAYDREAMING	10
WATCHING TELEVISION OR VIDEOS	11
LISTENING TO MUSIC	12
PLAYING SPORTS	13
SHOPPING/HANGING OUT AT THE MALL	14
HANGING OUT SOMEWHERE ELSE/DOING NOTHING	15
OTHER, SPECIFY _____	16
DON'T KNOW	-1
REFUSED	-2

AHW1

- P4. About how many hours a week do you usually watch TV or videos? IF ASKED, THIS ALSO INCLUDES DVDs. WE WANT TOTAL WATCHING TIME.

DOESN'T WATCH TV/VIDEOS	0
NUMBER: _____ OF HOURS	
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:**

IF NOT IN HIGH SCHOOL IN THIS SCHOOL YEAR [P2a NE 1] GO TO P6.  
 IF PARENT PART 1 INDICATES HOME SCHOOLED OR HOMEBOUND [D = ], GO TO P6.  
 ELSE, GO TO P5.  
 IF IN SCHOOL THIS SCHOOL YEAR [P2a = 1], READ BRACKETED WORDS IN THIS SECTION.

NHES96

- P5. During the last 12 months, have you taken part in any school activities outside of class, such as a sports team, band or chorus, a school club, or student government?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NHES93, SIMILAR NELS88 AND NHES96

- P6. During the last 12 months, that is from (NAME CURRENT MONTH) 2000 until now, have you taken part in any [out-of-school] group activity, such as scouting, church or temple youth group, or nonschool team sports like soccer or softball?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF P5 OR P6 = 1, HAD GROUP ACTIVITY, ASK P7. ELSE GO TO P8.

NLTS and NELS (NELS asks "ever")

P7a. What kinds of groups have you belonged to during the last 12 months? DO NOT READ. CODE ALL THAT APPLY.

SCOUTING (E.G., CUB SCOUTS/BROWNIES, BOY/GIRL SCOUTS, CAMPFIRE/BLUEBIRDS)	1
RELIGIOUS GROUP, RELIGIOUS YOUTH GROUP	2
YMCA, YWCA, JCC CLUB/ACTIVITIES, BOYS-GIRLS CLUBS	3
SPORTS TEAM (E.G., LITTLE LEAGUE, AYSO SOCCER, OTHER SPORTS TEAM)	4
SPECIAL OLYMPICS	5
4-H CLUB	6
SPECIAL INTEREST CLUB (E.G., CHESS CLUB, COMPUTER CLUB, ENVIRONMENT CLUB)	7
PERFORMING GROUP (CHOIR, BAND, THEATER GROUP, DANCE TROUPE)	8
STUDENT GOVERNMENT	9
SCHOOL SUBJECT MATTER CLUB (E.G., SCIENCE, LANGUAGE, JOURNALISM, YEARBOOK, SCHOOL PAPER)	10
VOLUNTEER SERVICE GROUP (E.G., CANDYSTRIPERS)	11
DISABILITY-ORIENTED SUPPORT, ADVOCACY, OR SOCIAL GROUP (E.G., ADHD)	12
CULTURAL AFFINITY GROUP (E.G., ASIAN STUDENTS CLUB, HISPANIC CLUB)	13
HOMEWORK CLUB	14
LEADERSHIP, YOUTH DEVELOPMENT CLUB	15
VOCATIONAL CLUBS (E.G., FUTURE HOMEMAKERS, DECA)	16
AFTER-SCHOOL CARE CENTER	17
OTHER SPECIFY: _____	18
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF P7a= 5 OR 12, GO TO P8.

IF ONLY ANSWER TO P7a=9 [STUDENT GOVERNMENT], GO TO P8.

IF PARENT WAVE 1 INDICATED NO DISABILITY OR IF ONLY DISABILITIES ON SAMPLE FILE ARE LD AND/OR SPEECH, GO TO P8.

IF P7a HAS ONLY ONE ANSWER AND THAT ANSWER IS NOT 89 [STUDENT GOVERNMENT], GO TO P7b.

IF P7a HAS MORE THAN ONE ANSWER AND THEY ARE NOT 5 OR 12, GO TO P7c.

P7b. Does this group include only youth with disabilities?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

P7c. How many of these groups include only youth with disabilities? Would you say... READ CATEGORIES, CODE ONE RESPONSE.

	None of them,	1
	Some of them, or	2
	All of them?	3
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

P8. During the last 12 months, have you done any volunteer or community service activities? This could include community service that is part of a school class or other group activity.

YES	1
NO	2
DON'T KNOW	8

NELS

P9. During the last 12 months, have you taken lessons or classes [outside of school] in things like art, music, dance, a foreign language, religion, or computer skills?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF YOUTH LIVED AT RESIDENTIAL SCHOOL OR COLLEGE DORM IN THE PAST YEAR (P1a= 5 OR 7), GO TO P12a. ELSE GO TO P10.

NLTS

P10. During the last 12 months, about how many days a week did you usually get together with friends [outside of school and] outside of organized activities or groups? OK TO READ CATEGORIES IF NEEDED. CODE ONE.

	NEVER,	0
	SOMETIMES, BUT NOT EVERY WEEK,	1
	1 DAY A WEEK,	2
	2 OR 3 DAYS A WEEK,	3
	4 OR 5 DAYS A WEEK, OR	4
	6 OR 7 DAYS A WEEK?	5
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT:** IF NOT IN SCHOOL DURING THE PAST YEAR [P2a NE 1], GO TO P12. ELSE GO TO P11.

P11. During the last 12 months, have you been invited to other kids' social activities, like over to their home or to a party?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

P12. During the last 12 months, how often have friends called you on the phone? Would you say ... READ CATEGORIES. CODE ONE.

	Never,	1
	Rarely/less than once a month,	2
	A few times a month, but not every week,	3
	About once a week, or	4
	Several days a week.	5
	Every day	6
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

NELS 88

P13a. Do you know how to use a computer for: READ EACH ITEM TO CODE RESPONSE IN COLUMN A. FOR EACH YES FOR ITEMS A THROUGH C, ALSO READ Q9b IMMEDIATELY FOR THAT COMPUTER USE AND CODE RESPONSE IN COLUMN B. CODE NA FOR ITEM A IF DOESN'T GET HOMEWORK OR GO TO SCHOOL. IF PARENT PART 1 INDICATES YOUTH HAS NOT BEEN IN SCHOOL IN THE PAST YEAR, OR IF PARENT PART 1 HAS NOT BEEN COMPLETED, START WITH ITEM b.

P13b. Do you use a computer for:

		A. ABLE TO USE COMPUTER FOR:					B. DOES USE COMPUTER FOR:			
		Y	N	DK	R	NA	Y	N	DK	R
a.	Homework and school assignments	1	2	-1	-2	0	1	2	-1	-2
b.	Playing games	1	2	-1	-2		1	2	-1	-2
c.	The internet	1	2	-1	-2		1	2	-1	-2
d.	E-mail	1	2	-1	-2					
e.	Taking part in chat rooms	1	2	-1	-2					

**CHECKPOINT:** IF P13a, items d or e=1, GO TO P13c. ELSE, GO TO P14.

P13c. How frequently do you use e-mail or take part in chat rooms. Would you say ...  
 READ CATEGORIES, CODE ONE RESPONSE.

	Several times a day	1
	Once a day	2
	Several times a week,	3
	Once a week, or	4
	Less often than that?	5
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

AHW1

P14. During the past week, how many times did you do each of the following things? READ FIRST CATEGORY. Would you say you did it not at all, 1 or 2 times, 3 or 4 times, or 5 or more times? READ REMAINING ITEMS AND RESPONSE CATEGORIES. CODE ONE RESPONSE FOR EACH ITEM.

		NOT AT ALL	1 OR 2 TIMES	3 OR 4 TIMES	5 OR MORE TIMES	DK	REF
a.	Do work around the house, such as cleaning, cooking, laundry, yard work, or caring for a pet.	4	3	2	1	-1	-2
b.	Do hobbies, such as collecting baseball cards, playing a musical instrument, reading, or doing arts and crafts.	4	3	2	1	-1	-2
c.	Just hang out with friends.	4	3	2	1	-1	-2
d.	Buy a few things at the store you need	4	3	2	1	-1	-2

NLTS

P15. Do you have a driver's license or learners permit?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

P16. Do you have ... READ CATEGORIES; CODE ONE RESPONSE FOR EACH ITEM.

		YES	NO	DK	REF
a.	An allowance or have other money that you can decide how to spend (IF ASKED, THIS COULD INCLUDE MONEY EARNED FROM A JOB).				
b.	A savings account	4	3	-1	-2
c.	A checking account where you write checks	4	3	-1	-2
IF YOUTH'S AGE IS <16, GO TO Q1. ELSE ASK P16d.					
d.	A credit card or charge account in your own name	4	3	-1	-2

**Q. HEALTH**

NHIS, AHW1

Q1. My next questions are about your health. Would you say your general health is ... READ CATEGORIES. CODE ONE.

	Excellent,	1
	Very good,	2
	Good,	3
	Fair, or	4
	Poor?	5
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT:** IF YOUTH IS NOT IN SECONDARY SCHOOL NOW (P2b NE 1), GO TO Q3.

AHW1

Q2. In the last month, how often did a health or emotional problem cause you to miss a day of school? Would you say... READ CATEGORIES, CODE ONE RESPONSE.

	Never	1
	Just a few times	2
	About once a week	3
	Almost every day, or	4
	Every day?	5
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

AHW1

Q3. In the last month, how often did a health or emotional problem cause you to miss a social or recreational activity? Would you say ... READ CATEGORIES, CODE ONE RESPONSE.

	Never	1
	Just a few times	2
	About once a week	3
	Almost every day, or	4
	Every day?	5
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT:**  
 IF YOUTH LIVES WITH PARENT OR GUARDIAN (P1a = 1 or 14) GO TO Q5.  
 IF YOUTH DOES NOT LIVE WITH PARENT OR GUARDIAN (P1a NE 1 or 14) OR PARENT WAVE 1 INDICATED NO DISABILITY GO TO Q4b  
 ELSE, GO TO Q4a.

NHIS, SEELS

Q4a. Are you now taking any prescription medicine for a condition or problem related to a disability?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

SEELS

Q4b. Are you taking any prescription medicine that controls your behavior or changes your mood, such as Ritalin or an antidepressant?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

Q4c. What prescription medicine are you taking to control your behavior or change your mood? CODE **ALL** THAT APPLY.

	STIMULANT, UNSPECIFIED	1
	ADDERAL (AMPHETAMINES)	2
	CYLERT (PEMOLINE)	3
	DEXEDRINE (DEXTRO-AMPHETAMINE)	4
	RITALINE (METHYLPHENIDATE)	5
	ANTIDEPRESSANT/ANTIANSIETY, UNSPECIFIED	6
	ANAFRANIL (CLOMIPRAMINE)	7
	EFFEXOR (VENIAFAXINE)	8
	LUVOX (FLUVOXAMINE)	9
	PAXIL (PAROXETINE)	10
	PROZAC (FLUOXETINE)	11
	SERZONE (NEFAZODONE)	12
	SENEQUAN (DOXEPIN)	13
	TOFRANIL (IMIPRAMINE)	14
	WELLBUTRIN (BUPROPION)	15
	ZOLOFT (SERTRALINE)	16
	MOOD STABILIZER, UNSPECIFIED	17
	CIBALITH-S (LITHIUM CITRATE)	18
	DEPAKOTE (DIVALPROAX SODIUM)	19
	ESKALITH (LITHIUM CARBONATE)	20
	LAMICTAL (LAMOTRIGINE)	21
	LITHOBID (LITHIUM CARBONATE)	22
	NEURONTIN (GABAPERTIN)	23
	TEGRETOL (CARBAMAZEPINE)	24
	ANTIPSYCHOTIC, UNSPECIFIED	25
	CLOZARIL (CLOZAPINE)	26
	HALDOL (HALOPERIDOL)	27
	RISPERDAL (RISPERIDONE)	28
	SEROQUEL (QUETIAPINE)	29
	THIORIZDAZINE	30
	ZPREXA (OLANZAPINE)	31
	ORAP (PIMOZIDE)	32
GO TO R4d	DON'T KNOW	-1
	REFUSED	-2

Q4d. Was the medicine prescribed to control... READ CATEGORIES, CODE ONE RESPONSE

	Behavior or activity level?	1
	Emotions, such as depression or anxiety?	2
	Mood?	3
	Anything else?	4
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

AHW1

Q5. Some people have a disability or special need that makes it hard for them to do some things. Do you consider yourself to have any kind of disability?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT.** IF Q5 NE 1, GO TO CHECKPOINT AT BEGINNING OF SECTION R.

EmpS

Q6. Do you think you know what services you need to help you deal with your disability?

	YES	1
	NO	2
GO TO SECTION R	DOESN'T NEED SERVICES	3
	DON'T KNOW	-1
	REFUSED	-2

Q7. Do you get any services or therapies from any school, agency, or professionals because of your disability?

	YES	1
	NO	2
GO TO SECTION R	DON'T KNOW	-1
	REFUSED	-2

Q8. How often do you tell professionals what you think about the services they provide you? Would you say ...

	Hardly ever	1
	Sometimes, or	2
	Often?	3
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

### R. SECONDARY SCHOOL EXPERIENCES

**CHECKPOINT:**

IF YOUTH WAS NOT IN SECONDARY SCHOOL DURING THIS SCHOOL YEAR (P2a NE 1), GO TO CHECKPOINT BEFORE S1a.

FOR QUESTIONS IN THIS SECTION, IF STUDENT IS IN SCHOOL NOW (P2B=1) USE PRESENT TENSE, IF NOT IN SCHOOL NOW (P2B NE 1) USE PAST TENSE.

My first questions are about your experiences at school this year. By school we mean any place you received instruction in school subjects. For some students, this is a regular school; other students are schooled at home or in a hospital or some other kind of place.

NHES 96, a; NELS, a.; SSS a; ADW1 b

R1. Please tell me how much you ... READ FIRST STATEMENT. Would you say a lot, pretty much, a little, or not at all? READ REMAINING STATEMENTS. CODE ONE RESPONSE FOR EACH.

		A LOT	PRETTY MUCH	A LITTLE	NOT AT ALL	DK	REF
a.	[Enjoy/Enjoyed] school.	4	3	2	1	-1	-2
b.	[Feel/Felt] like you [are/were] part of the school.	4	3	2	1	-1	-2

Similar to NHES 96, NELS, SSS

R2. How hard [is/was] school for you? Would you say ...

	Very hard,	1
	Pretty hard,	2
	Not very hard, or	3
	Not hard at all?	4
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

Similar to ADW1

R3. How safe [do/did] you feel at school? Would you say ...

	Very safe,	1
	Pretty safe,	2
	Not very safe, or	3
	Not safe at all?	4
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT:** IF ANY OF YOUTH'S DISABILITY CODES IS MENTAL RETARDATION, TO GO R4b. ELSE ASK R4a.

NHES 96, SSS

R4a. Please tell me how much you agree with each of the following. **READ FIRST STATEMENT.** Do you agree a lot, agree a little, disagree a little, or disagree a lot? **READ REMAINING STATEMENTS. CODE ONE RESPONSE FOR EACH.**

		AGREE A LOT	AGREE A LITTLE	DIS- AGREE A LITTLE	DIS- AGREE A LOT	DK	REF
a.	There [is/was] an adult at school who you [feel/felt] close to and who [cares/cared] about you.	1	2	3	4	-1	-2
b.	You [are/were] getting the support and services from the school that you [need/ed] to do well.	1	2	3	4	-1	-2

**CHECKPOINT: GO TO R5.**

R4b. [Is/Was] there an adult at school who you [feel/felt] close to and who [cares/cared] about you?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

R4c. [Are/Were] you getting the support and services from the school that you [need/ed] to do well there?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

AHW1

R5. Since school started this year, how often [have/did] you [had/have] trouble... **READ FIRST STATEMENT.** Would you say never, just a few times, about once a week, almost every day, or every day? **READ REMAINING STATEMENTS. CODE ONE RESPONSE FOR EACH ITEM. IF NO HOMEWORK OR NO OTHER STUDENTS, CODE 0.**

		NEVER	JUST A FEW TIMES	ABOUT ONCE A WEEK	ALMOST EVERY DAY	EVERY DAY	NA.	DK	REF
a.	Getting along with your teachers	1	2	3	4	5		-1	-2
b.	Paying attention in school	1	2	3	4	5		-1	-2
c.	Getting your homework done	1	2	3	4	5	0	-1	-2
d.	Getting along with other students	1	2	3	4	5	0	-1	-2

**CHECKPOINT**

IF PARENT PART 1 INDICATES STUDENT'S SCHOOLING WAS HOMEBOUND OR HOMESCHOOLED (D = ), GO TO R6.  
ELSE GO TO R5.

R6. Have you had any of the following things happened during this school year? READ EACH. CODE ONE RESPONSE FOR EACH ITEM.

		YES	NO	NA	DK	REF
a.	Have you had things stolen from your locker, desk, or other places at school?	1	2	3	-1	-2
b.	Have you been bullied or picked on by other students or made to do things like give them money, either at school or on the way to or from school?	1	2	3	-1	-2
c.	Have you bullied or picked on other students?	1	2	3	-1	-2
d.	Have you been physically attacked or in fights at school or on the way to or from school?	1	2	3	-1	-2

CHECKPOINT: IF PARENT PART 1 INDICATES YOUTH IS NOT RECEIVING SPECIAL EDUCATION (D = ), GO TO CHECKPOINT BEFORE S1a. ELSE, ASK R7a.

R7a. During this school year or the last school year, did you go to a meeting at school about an Individualized Education Plan, or IEP, for special education program or services? IF ASKED WHAT AN IEP IS [ADD DESCRIPTION] ...

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

R7b. Did you meet with adults at school to set goals for what you will do after high school and make a plan for how to achieve them? Sometimes this is called a transition plan.

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF R7a OR R7b = 1 (TOOK PART IN IEP OR TRANSITION PLANNING), GO TO R7c. ELSE, GO TO R8.

R7c. How much choice did you have about the goals on your IEP [IF P6b=1: or transition plan? Did you have ... READ CATEGORIES, CODE ONE RESPONSE.

	Almost no choice about the goals	1
	Some choice, or	2
	A lot of choice?	3
DON'T READ	DON'T KNOW ABOUT ANY GOALS	4
	DIFFERENT EXPERIENCE WITH IEP VS. TRANSITION PLAN	5
	DON'T KNOW	-1
	REFUSED	-2

R7d. How do you feel about your part in the decisions about your IEP [IF P6b=1: or transition plan]? Do you feel you ... READ CATEGORIES. CODE ONE RESPONSE.

	Wanted to be more involved,	1
	Were involved about the right amount, or	2
	Wanted to be less involved?	3
DON'T READ	NO OPINION	4
	DIFFERENT EXPERIENCE WITH IEP VS. TRANSITION PLAN	5
	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF R7c=4, GO TO CHECKPOINT BEFORE S1a. ELSE GO TO R7e.

R7e. How much do you think your IEP [IF P7b=1: or transition] goals are challenging and right for you. Are they .... READ CATEGORIES. CODE ONE.

	Very challenging and right for you,	4
	Pretty challenging and right for you,	3
	Not very challenging and right for you, or	2
	Not at all challenging and right for you?	1
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

### S. POSTSECONDARY EDUCATION

CHECKPOINT: IF YOUTH IS IN HIGH SCHOOL NOW [P2b=1] TO GO SECTION T.

IF YOUTH WAS OUT OF SECONDARY SCHOOL IN PREVIOUS WAVE, AND HAD DROPPED OUT, GO TO S2a.

IF YOUTH WAS OUT OF SECONDARY SCHOOL IN PREVIOUS WAVE AND HAD GRADUATED, GO TO S3a.

IF YOUTH WAS IN SECONDARY SCHOOL IN PREVIOUS WAVE AND IS NOT NOW [P2b NE 1 OR (P2a =1 AND P2b NE 1)], GO TO S1a.

NLTS

S1a. My next questions are about high school. Did you graduate from high school?

GO TO S2b	YES	1
	NO	2
GO TO S1b	DON'T KNOW	-1
	REFUSED	-2

S1b. Did you drop out, did you take a test to get a diploma without taking all your high school classes, were you suspended or expelled, or were you older than the school age limit? IF ASKED, WE MEAN THE MOST RECENT TIME THE YOUTH LEFT HIGH SCHOOL.

GO TO S3a	GRADUATED	1
GO TO S1c	LEFT VOLUNTARILY/DROPPED OUT	2
GO TO S3a	TESTED TO GET DIPLOMA	3
GO TO S2a	TEMPORARILY SUSPENDED	4
	PERMANENTLY EXPELLED	5
GO TO S3a	AGED OUT, OLDER THAN AGE LIMIT	6
	CERTIFICATED	7
GO TO S2a	DON'T KNOW	-1
	REFUSED	-2

NLTS

S1C. Why did you leave school? CODE ALL THAT APPLY

ACADEMIC DIFFICULTY; POOR GRADES, NOT DOING WELL	1
PROBLEMS WITH BEHAVIOR	2
DISLIKE OF SCHOOL EXPERIENCE, SCHOOL TOO DANGEROUS	3
ECONOMIC REASONS	4
EMPLOYMENT, SEEK OR ACCEPT JOB	5
ENTERED CRIMINAL JUSTICE SYSTEM	6
FAILED REQUIRED TEST/FAILED GRADUATION EXAM	7
LACK OF APPROPRIATE CURRICULUM	8
LACK OF CHILDCARE	9
LACK OF TRANSPORTATION	10
LANGUAGE DIFFICULTY	11
MARRIAGE	12
MILITARY, JOINED ARMED FORCES	13
NEEDED AT HOME	14
PARENT/GUARDIAN INFLUENCE	15
POOR RELATIONSHIPS WITH FELLOW STUDENTS	16
POOR RELATIONSHIPS WITH TEACHERS AND SCHOOL STAFF	17
PREGNANCY	18
RELIGION	19
SUBSTANCE ABUSE	20
FRIENDS WERE DROPPING OUT	21
MOVED	22
ILLNESS/DISABILITY	23
OTHER (SPECIFY)	24
DON'T KNOW	-1
REFUSED	-2

**DROPOUTS**

NLTS

S2a. [IF IN HIGH SCHOOL IN PRECEDING WAVE OR (P2a=1 AND P2B NE 1): Since leaving high school] [IF ALREADY OUT OF HIGH SCHOOL IN PRECEDING WAVE: In the past 2 years], have you taken classes or tests to earn a high school diploma or certificate, such as a GED course?

GO TO S2b	YES	1
	NO	2
GO TO S3a	DON'T KNOW	-1
	REFUSED	-2

NLTS

S2b. Did you get a high school diploma or certificate?

GO TO S2d	YES	1
	NO	2
GO TO S2c	DON'T KNOW	-1
	REFUSED	-2

NLTS

S2c. Are you taking classes to earn a high school diploma or certificate now?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

S2d. Was it a diploma or a certificate?

DIPLOMA	1
CERTIFICATE	2
DON'T KNOW	-1
REFUSED	-2

**2-YEAR COLLEGE**

NLTS

S3a. [IF IN HIGH SCHOOL IN PRECEDING WAVE OR (P2a=1 AND P2B NE 1: Since leaving high school)] [IF ALREADY OUT OF HIGH SCHOOL IN PRECEDING WAVE: In the past 2 years], have you taken any classes from a 2-year, junior, or community college?

GO TO S3b	YES	1
	NO	2
GO TO S4a	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF ALREADY OUT OF HIGH SCHOOL IN PRECEDING WAVE, GO TO S3c

S3b. About how long after leaving high school was it before you started going to a 2-year college?

NUMBER: _____	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

NLTS

S3c. Are you going to a 2-year or community college now?

GO TO S3e	YES	1
GO TO S3d	NO	2
GO TO S3e	DON'T KNOW	-1
	REFUSED	-2

S3d. Why did you stop going? DO NOT READ CATEGORIES. CODE ALL THAT APPLY.

GRADUATED	1
FINISHED THE CLASSES YOUTH WANTED/NEEDED TO TAKE	2
CHANGED SCHOOLS, WENT TO A DIFFERENT SCHOOL	3
TRANSPORTATION PROBLEMS	4
DIDN'T GET SERVICES NEEDED	5
TOO EXPENSIVE/COULDN'T AFFORD IT	6
DIDN'T HAVE TIME; SCHEDULE CONFLICTS; CONFLICTED WITH OTHER DEMANDS (E.G., JOB)	7
POOR GRADES/NOT DOING WELL IN SCHOOL	8
DIDN'T LIKE SCHOOL	9
WANTED/NEEDED TO FIND A JOB	10
OFFERED A JOB/CHOSE TO WORK	11
WANTED TO ENTER MILITARY	12
DIDN'T GET INTO THE PROGRAM HE/SHE WANTED	13
ILLNESS/DISABILITY; TOO SICK TO GO	14
GOT MARRIED	15
GOT PREGNANT OR HAD A CHILD	16
MOVED	17
SCHOOL TOO DANGEROUS	18
WANTED TO TRAVEL	19
FRIENDS WEREN'T IN SCHOOL/WERE DROPPING OUT	20
COULDN'T GET ALONG WITH TEACHERS	21
COULDN'T GET ALONG WITH OTHER STUDENTS	22
COULDN'T GET CHILDCARE	23
PARENTS/FAMILY DIDN'T WANT YOUTH TO GO	24
OTHER (SPECIFY)	25
DON'T KNOW	-1
REFUSED	-2

S3e. [IF S3c NE 2, Have you been enrolled] [IF S3c= 2, Were you enrolled] steadily during the school year, or [IF S3b NE 2, have you been enrolled] [IF S3b= 2, were you enrolled] off and on, taking classes some semesters or quarters but not others?

STEADILY	1
OFF AND ON	2
DON'T KNOW	-1
REFUSED	-2

NLTS

S3f. [IF S3c NE 1, Have you gone] [IF S3c= 1, Are you going] to a 2-year or community college full time or part time? IF ASKED, BY FULL TIME, WE MEAN TAKING A FULL COURSE LOAD OF 12 CREDITS OR MORE AT A TIME OR BEING IN CLASS AT LEAST 12 HOURS PER WEEK.

FULL TIME	1
PART TIME	2
DON'T KNOW	-1
REFUSED	-2

S3g. Have you taken mostly vocational courses to train for a job, like computer or business courses, or have you taken mostly academic courses, like English or science?

GO TO S3h	MOSTLY VOCATIONAL	1
GO TO S3l	MOSTLY ACADEMIC	2
GO TO S3h	BOTH, MIXED	3
GO TO S4a	NEITHER, CLASSES ARE FOR PERSONAL INTEREST, RECREATION	4
GO TO S3j	DON'T KNOW	-1
	REFUSED	-2

S3h. What kind of job [IF S3c=1, are you training for] [IF S3c NE 1, did you train for]? CODE ALL THAT APPLY.

AGRICULTURE, GROUNDSKEEPING, HORTICULTURE	1
ANIMAL CARE – E.G., VETERINARY HELPER	2
ARTS, DRAMA, DANCE, MUSIC, GRAPHIC DESIGN/ARTS, FASHION DESIGN	3
COMMUNICATIONS, JOURNALISM, TV/RADIO, ENTERTAINMENT INDUSTRY	4
BUSINESS	5
CHILD CARE, EARLY CHILDHOOD EDUCATION	6
CLERICAL – E.G., FILING, RECEPTIONIST, SECRETARY, TYPIST	7
COMPUTER SUPPORT – E.G., DATA ENTRY, PROGRAMMING, WEB PAGE DEVELOPMENT	8
EDUCATION, TEACHING, TUTORING	9
ENGINEERING (ELECTRICAL, MECHANICAL, CHEMICAL, MATERIALS)	10
FINANCIAL SERVICES	11
FOOD SERVICE , RESTAURANT MANAGEMENT	12
HEALTH CARE – PERSONAL CARE ATTENDANT, NURSE'S AIDE	13
MARKETING, ADVERTISING	14
MECHANICS (AUTO, MACHINERY REPAIR)	15
POLICE SCIENCE, CRIMINAL JUSTICE	16
RETAIL SALES	17
SKILLED CRAFTS (PLUMBING, ELECTRICAL WORK, CARPENTRY)	18
OTHER, SPECIFY _____	19
DON'T KNOW	-1
REFUSED	-2

S3i. [IF S3c=1, Do] [IF S3c NE 1, did] you ever go to a study center or writing center at school to get help with your school work?

GO TO S3	YES	1
	NO	2
DON'T READ	DON'T KNOW	-1
GO TO S3	REFUSED	-2

CHECKPOINT: IF YOUTH ASSERTS A DISABILITY [R5=1] ASK S3j. ELSE, GO TO S3k.

S3j. Did you tell the school that you have a disability... READ CATEGORIES. CODE ONE RESPONSE.

GO TO S3	Before you enrolled there	1
	After you enrolled, or	2
GO TO S3	Have you not told them at all?	3
DON'T READ	DON'T KNOW	-1
GO TO S3	REFUSED	-2

S3k. [IF S3c NE 1, Did you receive] [IF S3c=1, Have you received] any services, accommodations, or other help from the school to help you do your best there, like a tutor or more time to take tests?

GO TO S3m	YES	1
GO TO S3l	NO	2
	DON'T KNOW	-1
	REFUSED	-2

S3l. [IF S3c NE 1, Did you ask or apply] [IF S3c=1, Have you asked or applied] for any services, accommodations, or other help from the school?

GO TO S3n	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

S3m. What services, accommodations, or other help have you received? IF HAS ATTENDED MULTIPLE 2-YEAR, JUNIOR, OR COMMUNITY COLLEGES, WE WANT TO KNOW ABOUT SERVICES FROM ANY OF THEM.

<b>1</b>	<b>Testing Accommodations</b>	
	More time in taking tests	1
	Having tests and other materials read to youth	2
	Different tests	3
	Different grading standards	4
	Different setting to take tests	5
	Instructions given in sign language or manual communication	6
	Scribe to record answers	7
<b>2</b>	<b>Accommodations in assignments</b>	
	Additional time to finish assignments	8
	Different assignments, e.g., shorter, different lab assignments in a science class	9
<b>3</b>	<b>Materials/technology adaptations</b>	
	Large print or Braille materials or large print computer	10
	Books on tape	11
	Use of computer or spell checker in class or to take tests	12
	Computer software designed for students with disabilities	13
	Computer adapted for student's needs (e.g., alternative keyboard, switch interface)	14
	Special use of calculator (e.g., use for tests that other students don't have)	15
<b>4</b>	<b>Human aides</b>	
	A reader or interpreter	16
	Note taker in class	17
	A personal aide or instructional assistant to help you in class	18
	Tutor	19
	Support person to monitor academic progress, help with managing school workload	20
<b>5</b>	<b>Out-of-classroom learning supports</b>	
	A behavior management program	21
	Help with learning strategies or study skills (e.g., writing center)	22
	Support group for students with disabilities	23
	Early registration	24
<b>6</b>	<b>Physical adaptations in classrooms</b>	
	Physical changes to the classroom, special desks	25
	Changes to equipment, like different lab equipment in a science class	26
<b>7</b>	<b>Independent living supports</b>	
	Transportation assistance (i.e., to get to classes)	27
	Housing assistance (e.g., modified living arrangements)	28
	Orientation and mobility services	29
	Social activities for students with disabilities	30
	Food service arrangements or accommodations	31
	Medical supports	32
<b>8</b>	<b>Therapies</b>	
	Psychological or mental health services or counseling	33
	Social work services	34
	Occupational therapy or life skills training	35
<b>9</b>	Service coordination or case management	36
<b>10</b>	Child care	37
<b>11</b>	Other. Specify: _____	38
	DON'T KNOW	-1
	REFUSED	-2

NOTE: THE FOLLOWING PROBES ARE IMPLEMENTED SO AS NOT TO DUPLICATE PROBES FOR YOUTH WITH MORE THAN ONE TYPE OF DISABILITY.

**CHECKPOINT:**

IF NO RESPONSES IN CATEGORY 5: Have there been any supports for you outside of class, like a support group for students with disabilities?

IF NO RESPONSES IN CATEGORY 4: Has there been any person assigned to help you, like a tutor, an interpreter, or someone who takes notes for you in class?

**CHECKPOINT:** IF DISABILITY FROM SAMPLE FILE IS LD OR MR OR SPEECH OR MULTIPLE, PROBE:

IF NO RESPONSES IN CATEGORY 1: Have you had any accommodations in how you take tests, like more time to take tests, or a different setting to take tests?

IF NO RESPONSES IN CATEGORY 2: Have you had any accommodations in how you handle class assignments, like having more time to finish assignments or getting different assignments?

IF NO RESPONSES IN CATEGORY 3: Have you been allowed to use any different kinds of technology in class because of a disability, like using a calculator in math class when other students don't get to use one?

**CHECKPOINT:** IF DISABILITY IS ORTHOPEDIC, OHI, MULTIPLE, VISUAL, OR DEAF/BLIND, PROBE:

IF NO RESPONSES IN CATEGORY 6: Have there been any adaptations to your classrooms, like a special desk for you or different equipment because of a disability?

IF NO RESPONSES IN CATEGORY 7: Have you had any services or supports to help you live or get around at school, like help with transportation or special campus housing or dining arrangements?

S3n. Besides what the school had available, have you gotten any services or help on your own?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF S3k AND S3n NE 1, GO TO S3q. ELSE, GO TO S3o.

S3o. How useful have the services and accommodations been in helping you stay in school and do your best there? Would you say... READ CATEGORIES. CODE ONE RESPONSE.

	Very useful	4
	Somewhat useful	3
	Not very useful, or	2
	Not at all useful?	1
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

S3p. Do you think you [if S3c=1: are; IF S3c NE1, were] getting enough services and accommodation to help with school?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

S3q. Have you gotten a diploma, certificate, or license from a 2-year or community college?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF S3c NE1 (NOT GOING NOW) GO TO S4a.  
IF STILL GOING (S3c=1), GO TO S3o.

NLTS

S3r. Are you working toward [IF S3q NE 1 a] [IF S3q=1, another] diploma, certificate, or license from this school?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**VOCATIONAL TECHNICAL SCHOOL**

NLTS

S4a. [IF IN HIGH SCHOOL IN PRECEDING WAVE OR (P2a=1 AND P2B NE 1: Since leaving high school) [IF NOT IN HIGH SCHOOL IN PRECEDING WAVE: In the past 2 years], have you taken any classes from a vocational, business, or technical school?

GO TO S4b	YES	1
	NO	2
GO TO S5a	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT:** IF ALREADY OUT OF HIGH SCHOOL IN PRECEDING WAVE, GO TO S4c

S4b. About how long after leaving high school was it before you started going to this kind of school?

NUMBER: _____	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

NLTS

S4c. Are you going to a vocational, business, or technical school now?

GO TO S4e	YES	1
GO TO S4d	NO	2
GO TO S4e	DON'T KNOW	-1
	REFUSED	-2

S4d. Why did you stop going? DO NOT READ CATEGORIES. CODE ALL THAT APPLY.

GRADUATED	1
FINISHED THE CLASSES YOUTH WANTED/NEEDED TO TAKE	2
CHANGED SCHOOLS, WENT TO A DIFFERENT SCHOOL	3
TRANSPORTATION PROBLEMS	4
DIDN'T GET SERVICES NEEDED	5
TOO EXPENSIVE/COULDN'T AFFORD IT	6
DIDN'T HAVE TIME; SCHEDULE CONFLICTS; CONFLICTED WITH OTHER DEMANDS (E.G., JOB)	7
POOR GRADES/NOT DOING WELL IN SCHOOL	8
DIDN'T LIKE SCHOOL	9
WANTED/NEEDED TO FIND A JOB	10
OFFERED A JOB/CHOSE TO WORK	11
WANTED TO ENTER MILITARY	12
DIDN'T GET INTO THE PROGRAM HE/SHE WANTED	13
ILLNESS/DISABILITY; TOO SICK TO GO	14
GOT MARRIED	15
GOT PREGNANT OR HAD A CHILD	16
MOVED	17
SCHOOL TOO DANGEROUS	18
WANTED TO TRAVEL	19
FRIENDS WEREN'T IN SCHOOL/WERE DROPPING OUT	20
COULDN'T GET ALONG WITH TEACHERS	21
COULDN'T GET ALONG WITH OTHER STUDENTS	22
COULDN'T GET CHILDCARE	23
PARENTS/FAMILY DIDN'T WANT YOUTH TO GO	24
OTHER (SPECIFY)	25
DON'T KNOW	-1
REFUSED	-2

NLTS

S4e. [IF S4c NE 1, Have you gone] [IF S4c= 1, Are you going] there full time or part time? IF ASKED, BY FULL TIME, WE MEAN TAKING A FULL COURSE LOAD OF 12 CREDITS OR MORE AT A TIME OR BEING IN CLASS AT LEAST 12 HOURS PER WEEK.

FULL TIME	1
PART TIME	2
BOTH, SOMETIMES ONE, SOMETIMES OTHER	3
DON'T KNOW	-1
REFUSED	-2

S4f. What kind of job [IF NOW ENROLLED, S4c=1: are. IF NOT NOW ENROLLED, S4c NE 1: did] you [IF NOW ENROLLED, S4c=1: training. IF NOT NOW ENROLLED, S4c NE 1: train] train for at the vocational, business, or technical school? CODE ALL THAT APPLY.

AGRICULTURE, GROUNDSKEEPING, HORTICULTURE	1
ANIMAL CARE – E.G., VETERINARY HELPER	2
ARTS, DRAMA, DANCE, MUSIC, GRAPHIC DESIGN/ARTS, FASHION DESIGN	3
COMMUNICATIONS, JOURNALISM, TV/RADIO, ENTERTAINMENT INDUSTRY	4
BUSINESS	5
CHILD CARE, EARLY CHILDHOOD EDUCATION	6
CLERICAL – E.G., FILING, RECEPTIONIST, SECRETARY, TYPIST	7
COMPUTER SUPPORT – E.G., DATA ENTRY, PROGRAMMING, WEB PAGE DEVELOPMENT	8
EDUCATION, TEACHING, TUTORING	9
ENGINEERING (ELECTRICAL, MECHANICAL, CHEMICAL, MATERIALS)	10
FINANCIAL SERVICES	11
FOOD SERVICE , RESTAURANT MANAGEMENT	12
HEALTH CARE; PERSONAL ATTENDANT, NURSE'S AIDE, DENTAL ASSISTANT	13
MARKETING, ADVERTISING	14
MECHANICS (AUTO, MACHINERY REPAIR)	15
PERSONAL SERVICES (BEAUTICIAN, MANICURIST, MASSEUSE)	16
POLICE SCIENCE, CRIMINAL JUSTICE	17
RETAIL SALES	18
SKILLED CRAFTS (PLUMBING, ELECTRICAL WORK, CARPENTRY)	19
OTHER, SPECIFY _____	20
DON'T KNOW	-1
REFUSED	-2

S4g. [IF S4c=1, Do] [IF S4c NE 1, did] you ever go to a study center at school to get help with your school work?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF YOUTH ASSERTS A DISABILITY [R5=1] ASK S4h. ELSE, GO TO S4i.

S4h. Did you tell the school that you have a disability... READ CATEGORIES. CODE ONE RESPONSE.

GO TO S4I	Before you enrolled there	1
	After you enrolled, or	2
GO TO S4I	Have you not told them at all?	3
DON'T READ	DON'T KNOW	-1
GO TO S4I	REFUSED	-2

S4i. [IF S4c NE 1, Did you receive] [IF S4c=1, Have you received] any services, accommodations, or other help from the school to help you do your best there, like a tutor or more time to take tests?

GO TO S4k	YES	1
GO TO S4j	NO	2
	DON'T KNOW	-1
	REFUSED	-2

S4j. [IF S4c NE 1, Did you ask] [IF S4c=1, Have you asked] or applied for any services, accommodations, or other help from the school?

GO TO S4I	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

S4k. What services, accommodations, or other help have you received? IF HAS ATTENDED MORE THAN ONE VOCATIONAL SCHOOL, WE WANT TO KNOW ABOUT SERVICES FROM ANY OF THEM.

<b>1</b>	<b>Testing Accommodations</b>	
	More time in taking tests	1
	Having tests and other materials read to youth	2
	Different tests	3
	Different grading standards	4
	Different setting to take tests	5
	Instructions given in sign language or manual communication	6
	Scribe to record answers	7
<b>2</b>	<b>Accommodations in assignments</b>	
	Additional time to finish assignments	8
	Different assignments, e.g., shorter, different lab assignments in a science class	9
<b>3</b>	<b>Materials/technology adaptations</b>	
	Large print or Braille materials or large print computer	10
	Books on tape	11
	Use of computer or spell checker in class or to take tests	12
	Computer software designed for students with disabilities	13
	Computer adapted for student's needs (e.g., alternative keyboard, switch interface)	14
	Special use of calculator (e.g., use for tests that other students don't have)	15
<b>4</b>	<b>Human aides</b>	
	A reader or interpreter	16
	Note taker in class	17
	A personal aide or instructional assistant to help you in class	18
	Tutor	19
	Support person to monitor academic progress, help with managing school workload	20
<b>5</b>	<b>Out-of-classroom learning supports</b>	
	A behavior management program	21
	Help with learning strategies or study skills (e.g., writing center)	22
	Support group for students with disabilities	23
	Early registration	24
<b>6</b>	<b>Physical adaptations in classrooms</b>	
	Physical changes to the classroom, special desks	25
	Changes to equipment, like different lab equipment in a science class	26
<b>7</b>	<b>Independent living supports</b>	
	Transportation assistance (i.e., to get to classes)	27
	Housing assistance (e.g., modified living arrangements)	28
	Orientation and mobility services	29
	Social activities for students with disabilities	30
	Food service arrangements or accommodations	31
	Medical supports	32
<b>8</b>	<b>Therapies</b>	
	Psychological or mental health services or counseling	33
	Social work services	34
	Occupational therapy or life skills training	35
<b>9</b>	Service coordination or case management	36
<b>10</b>	Child care	37
<b>11</b>	Other. Specify: _____	38
	DON'T KNOW	-1
	REFUSED	-2

NOTE: THE FOLLOWING PROBES ARE IMPLEMENTED SO AS NOT TO DUPLICATE PROBES FOR YOUTH WITH MORE THAN ONE TYPE OF DISABILITY.

**CHECKPOINT:**

IF NO RESPONSES IN CATEGORY 5: Have there been any supports for you outside of class, like a support group for students with disabilities?

IF NO RESPONSES IN CATEGORY 4: Has there been any person assigned to help you, like a tutor, an interpreter, or someone who takes notes for you in class?

**CHECKPOINT:** IF DISABILITY FROM SAMPLE FILE IS LD OR MR OR SPEECH OR MULTIPLE, PROBE:

IF NO RESPONSES IN CATEGORY 1: Have you had any accommodations in how you take tests, like more time to take tests, or a different setting to take tests?

IF NO RESPONSES IN CATEGORY 2: Have you had any accommodations in how you handle class assignments, like having more time to finish assignments or getting different assignments?

IF NO RESPONSES IN CATEGORY 3: Have you been allowed to use any different kinds of technology in class because of a disability, like using a calculator in math class when other students don't get to use one?

**CHECKPOINT:** IF DISABILITY IS ORTHOPEDIC, OHI, MULTIPLE, VISUAL, OR DEAF/BLIND, PROBE:

IF NO RESPONSES IN CATEGORY 6: Have there been any adaptations to your classrooms, like a special desk for you or different equipment because of a disability?

IF NO RESPONSES IN CATEGORY 7: Have you had any services or supports to help you live or get around at school, like help with transportation or special campus housing or dining arrangements?

S4l. Besides what the school had available, have you gotten any services or help on your own?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF S4i AND S4l NE 1, GO TO S4o. ELSE, GO TO S4m.

S4m. How useful have the services and accommodations been in helping you stay in school and do your best there? Would you say... READ CATEGORIES. CODE ONE RESPONSE.

	Very useful	4
	Somewhat useful	3
	Not very useful, or	2
	Not at all useful?	1
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

S4n. Do you think you [IF S4c=1: are. IF S4c NE1: were] getting enough services and accommodation to help with school?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

S4o. Have you gotten a diploma, certificate, or license from a vocational, business, or technical school?

GO TO S4p

GO TO S4q

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

S4p. How long was the program that you took that led to this diploma, certificate, or license?

NUMBER \_\_\_\_\_

HOURS	1
DAYS	2
WEEKS	3
MONTHS	4
YEARS	5
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF S4c NE1 (NOT GOING NOW) GO TO S5a.

IF STILL GOING (S4c=1), GO TO S4q.

NLTS

S4q. Are you working toward [IF S4o NE1 a] [IF S4o=1, another] diploma, certificate, or license from this work?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

#### 4- YEAR COLLEGE

NLTS

S5a. [IF IN HIGH SCHOOL IN PRECEDING WAVE OR (P2a=1 AND P2B NE 1: Since leaving high school] [IF NOT IN HIGH SCHOOL IN PRECEDING WAVE: In the past 2 years], have you taken any classes from a 4-year-college or university?

GO TO S5b	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2
GO TO S6a	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

**CHECKPOINT: IF ALREADY OUT OF HIGH SCHOOL IN PRECEDING WAVE, GO TO S5c.**

S5b. About how long after leaving high school was it before you started going to a 4-year college or university?

NUMBER: _____	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

NLTS

S5c. Are you going to a 4-year college or university now?

GO TO S5e	YES	1
GO TO S5f	NO	2
GO TO S5e	DON'T KNOW	-1
	REFUSED	-2

S5d. Why did you stop going to college? DO NOT READ CATEGORIES. CODE ALL THAT APPLY.

GRADUATED	
FINISHED COURSES WANTED/NEEDED TO TAKE	1
CHANGED SCHOOLS, WENT TO A DIFFERENT SCHOOL	2
TRANSPORTATION PROBLEMS	3
DIDN'T GET SERVICES NEEDED	4
TOO EXPENSIVE/COULDN'T AFFORD IT	5
DIDN'T HAVE TIME; SCHEDULE CONFLICTS; CONFLICTED WITH OTHER DEMANDS (E.G., JOB)	6
POOR GRADES/NOT DOING WELL IN SCHOOL	7
DIDN'T LIKE SCHOOL	8
WANTED/NEEDED TO FIND A JOB	9
OFFERED A JOB/CHOSE TO WORK	10
WANTED TO ENTER MILITARY	11
DIDN'T GET INTO THE PROGRAM HE/SHE WANTED	12
ILLNESS/DISABILITY; TOO SICK TO GO	13
GOT MARRIED	14
GOT PREGNANT OR HAD A CHILD	15
MOVED	16
SCHOOL TOO DANGEROUS	17
WANTED TO TRAVEL	18
FRIENDS WEREN'T IN SCHOOL/WERE DROPPING OUT	19
COULDN'T GET ALONG WITH TEACHERS	20
COULDN'T GET ALONG WITH OTHER STUDENTS	21
COULDN'T GET CHILDCARE	22
PARENTS/FAMILY DIDN'T WANT YOUTH TO GO	23
OTHER (SPECIFY)	24
DON'T KNOW	-1
REFUSED	-2

S5e. [IF S5c NE 2, Have you been enrolled] [IF S5c= 2, Were you enrolled] steadily during the school year, or [IF S5b NE 2, have you been enrolled] [IF S5b= 2, were you enrolled] off and on, taking classes some semesters or quarters but not others?

STEADILY	1
OFF AND ON	2
DON'T KNOW	-1
REFUSED	-2

NLTS

S5f. [IF S5c NE 1, Have you gone] [IF S5c= 1, Are you going] there full time or part time? IF ASKED, BY FULL TIME, WE MEAN TAKING A FULL COURSE LOAD OF 12 CREDITS OR MORE AT A TIME OR BEING IN CLASS AT LEAST 12 HOURS PER WEEK.

FULL TIME	1
PART TIME	2
BOTH, SOMETIMES ONE, SOMETIMES OTHER	3
DON'T KNOW	-1
REFUSED	-2

S5g. What [IF S5c=1, is. IF F5c NE 1, was] your major or your primary course of study in a 4-year college or university? CODE ALL THAT APPLY.

AGRICULTURE, HORTICULTURE, VITICULTURE, FORESTRY	1
ARTS, DRAMA, DANCE, MUSIC, GRAPHIC DESIGN/ARTS, FASHION DESIGN	2
COMMUNICATIONS, JOURNALISM, TV/RADIO, ENTERTAINMENT INDUSTRY	3
BUSINESS, MARKETING, MANAGEMENT	4
COMPUTER SCIENCE, PROGRAMMING, ARTIFICIAL INTELLIGENCE, INFORMATION TECHNOLOGIES	5
EDUCATION, TEACHING, CHILD DEVELOPMENT, EARLY CHILDHOOD EDUCATION, HOME ECONOMICS	6
ENGLISH, LITERATURE, LIBRARY SCIENCE	7
HISTORY, POLITICAL SCIENCE, ECONOMICS, SOCIOLOGY, PSYCHOLOGY, HUMANITIES, PUBLIC POLICY, PHILOSOPHY, RELIGION, URBAN STUDIES, WOMEN'S STUDIES, AMERICAN STUDIES, ETHNIC STUDIES, INTERNATIONAL RELATIONS, SOCIAL SCIENCES	8
LIBERAL ARTS, GENERAL STUDIES	9
MATHEMATICS, STATISTICS	10
PRE-MED, NURSING, PUBLIC HEALTH, PHYSICAL THERAPY, RECREATION THERAPY, PREVET	11
SCIENCE, BIOLOGY, EARTH SCIENCE, GEOLOGY, PHYSICS, CHEMISTRY, ENVIRONMENTAL SCIENCE	12
POLICE SCIENCE, CRIMINAL JUSTICE	13
ENGINEERING, ELECTRICAL, MECHANICAL, CHEMICAL	14
FOREIGN LANGUAGE	15
UNDECLARED, UNDECIDED	16
OTHER, SPECIFY _____	17
DON'T KNOW	-1
REFUSED	-2

S5h. [IF S5c=1, Do] [IF S5c NE 1, did] you ever go to a study center or writing center at school to get help with your school work?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF YOUTH ASSERTS A DISABILITY [R = 1] ASK S5i. ELSE, GO TO S5k.

S5i. Did you tell the school that you have a disability ... READ CATEGORIES. CODE ONE RESPONSE.

GO TO S5j	Before you enrolled there	1
	After you enrolled, or	2
GO TO S5m	Have you not told them at all?	3
DON'T READ	DON'T KNOW	-1
GO TO S5j	REFUSED	-2

S5j. [IF S5c NE 1, Did you receive] [IF S5c=1, Have you received] any services, accommodations, or other help from the school to help you do your best there, like a tutor or more time to take tests?

GO TO S5l	YES	1
	NO	2
GO TO S5k	DON'T KNOW	-1
	REFUSED	-2

S5k. [IF S5c NE 1, Did you ask] [IF S5c=1, Have you asked] or applied for any services, accommodations, or other help from the school?

GO TO S5m	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

S5I. What services, accommodations, or other help have you received? IF HAS ATTENDED MORE THAN ONE COLLEGE, WE WANT TO KNOW ABOUT SERVICES FROM ANY OF THEM.

<b>1</b>	<b>Testing Accommodations</b>	
	More time in taking tests	1
	Having tests and other materials read to youth	2
	Different tests	3
	Different grading standards	4
	Different setting to take tests	5
	Instructions given in sign language or manual communication	6
	Scribe to record answers	7
<b>2</b>	<b>Accommodations in assignments</b>	
	Additional time to finish assignments	8
	Different assignments, e.g., shorter, different lab assignments in a science class	9
<b>3</b>	<b>Materials/technology adaptations</b>	
	Large print or Braille materials or large print computer	10
	Books on tape	11
	Use of computer or spell checker in class or to take tests	12
	Computer software designed for students with disabilities	13
	Computer adapted for student's needs (e.g., alternative keyboard, switch interface)	14
	Special use of calculator (e.g., use for tests that other students don't have)	15
<b>4</b>	<b>Human aides</b>	
	A reader or interpreter	16
	Note taker in class	17
	A personal aide or instructional assistant to help you in class	18
	Tutor	19
	Support person to monitor academic progress, help with managing school workload	20
<b>5</b>	<b>Out-of-classroom learning supports</b>	
	A behavior management program	21
	Help with learning strategies or study skills (e.g., writing center)	22
	Support group for students with disabilities	23
	Early registration	24
<b>6</b>	<b>Physical adaptations in classrooms</b>	
	Physical changes to the classroom, special desks	25
	Changes to equipment, like different lab equipment in a science class	26
<b>7</b>	<b>Independent living supports</b>	
	Transportation assistance (i.e., to get to classes)	27
	Housing assistance (e.g., modified living arrangements)	28
	Orientation and mobility services	29
	Social activities for students with disabilities	30
	Food service arrangements or accommodations	31
	Medical supports	32
<b>8</b>	<b>Therapies</b>	
	Psychological or mental health services or counseling	33
	Social work services	34
	Occupational therapy or life skills training	35
<b>9</b>	Service coordination or case management	36
<b>10</b>	Child care	37
<b>11</b>	Other. Specify: _____	38
	DON'T KNOW	-1
	REFUSED	-2

NOTE: THE FOLLOWING PROBES ARE IMPLEMENTED SO AS NOT TO DUPLICATE PROBES FOR YOUTH WITH MORE THAN ONE TYPE OF DISABILITY.

**CHECKPOINT:**

IF NO RESPONSES IN CATEGORY 5: Have there been any supports for you outside of class, like a support group for students with disabilities?

IF NO RESPONSES IN CATEGORY 4: Has there been any person assigned to help you, like a tutor, an interpreter, or someone who takes notes for you in class?

**CHECKPOINT:** IF DISABILITY FROM SAMPLE FILE IS LD OR MR OR SPEECH OR MULTIPLE, PROBE:

IF NO RESPONSES IN CATEGORY 1: Have you had any accommodations in how you take tests, like more time to take tests, or a different setting to take tests?

IF NO RESPONSES IN CATEGORY 2: Have you had any accommodations in how you handle class assignments, like having more time to finish assignments or getting different assignments?

IF NO RESPONSES IN CATEGORY 3: Have you been allowed to use any different kinds of technology in class because of a disability, like using a calculator in math class when other students don't get to use one?

**CHECKPOINT:** IF DISABILITY IS ORTHOPEDIC, OHI, MULTIPLE, VISUAL, OR DEAF/BLIND, PROBE:

IF NO RESPONSES IN CATEGORY 6: Have there been any adaptations to your classrooms, like a special desk for you or different equipment because of a disability?

IF NO RESPONSES IN CATEGORY 7: Have you had any services or supports to help you live or get around at school, like help with transportation or special campus housing or dining arrangements?

S5m. Besides what the school had available, have you gotten any services or help on your own?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF S5j AND S5m NE 1, GO TO S5p. ELSE, GO TO S5n.

S5n. How useful have the services and accommodations been in helping you stay in school and do your best there? Would you say... READ CATEGORIES. CODE ONE RESPONSE.

	Very useful	4
	Somewhat useful	3
	Not very useful, or	2
	Not at all useful?	1
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

S5o. Do you think you [IF s5C=1: are. IF S5c NE 1: were] getting enough services and accommodation to help with school?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

S5p. Have you gotten a diploma, certificate, or license from a 4-year college or university?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT:** IF S5c NE1 (NOT GOING NOW) GO TO S6a.

IF STILL GOING (S5c=1), GO TO S5q.

NLTS

S5q. Are you working toward [IF S5p NE 1, a] [IF S5p=1, another] diploma, certificate, or license from this work?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

## T. EMPLOYMENT OUTCOMES

### SECTION OUTLINE

T1 = In school youth, school-sponsored work

T2 = In school youth, any job past 2 years

T3 = In school youth, job now

T4 = In school youth, most recent job if none now

T5 = In school youth, fired.

T6 = Out of school youth, any job past 2 years

T7 = Out of school youth, all current jobs

T8 = Out of school youth, one current job

T9 = Out of school youth, looked for work before current job

T10 = Out of school youth, previous job of those working now

T11 = Out of school youth, most recent job if no job now

T12 = Out of school youth, looked for work before previous job

T13 = Out of school youth, looking for job now

T14 = Out of school youth, fired in past 2 years

Now, I would like to ask a few questions about your work experience.

**CHECKPOINT:**

IF YOUTH WAS NOT IN SECONDARY SCHOOL THIS SCHOOL YEAR (P2b NE1), GO TO T6a.

IF IN SCHOOL THIS SCHOOL YEAR (P2A = 1) AND PARENT PART 1 INDICATES IT WAS AT A JUVENILE FACILITY, HOSPITAL, HOME SCHOOL, HOMEBOUND INSTRUCTION, GO TO CHECKPOINT BEFORE T2a.

ELSE ASK T1a.

**YOUTH IN SECONDARY SCHOOL, SCHOOL-SPONSORED WORK**

NLTS

T1a. In the past 12 months, have you taken part in any school-sponsored work activities, like a work-study job, an internship, or a school-based business?

	YES	1
GO TO CHECK POINT BEFORE T2a	NO	2
	DON'T KNOW	-1
	REFUSED	-2

T1b. Did you get credit for that work?

	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

NLTS

T1c. Did you get paid for that work?

	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

NLTS

T1d. What kind of work have you done for your school-sponsored job? (IF TYPE OF WORK IS UNCLEAR, PROBE: Can you tell me a little about the place (NAME) did this work? DO NOT READ CATEGORIES. CODE ONE. IF MORE THAN ONE WORK-STUDY JOB CODE MOST RECENT JOB, IF MORE THAN ONE CURRENT WORK-STUDY JOB, CODE JOB WHERE YOUTH SPENDS THE MOST TIME.

ASSEMBLY WORK, SORTING, STUFFING	1
ANIMAL CARE – E.G., DOG WALKING, VETERINARY HELPER	2
CAMP COUNSELOR	3
CASHIER – AT GROCERY, FAST FOOD PLACE, ETC.	4
CHILD CARE, INCLUDING BABYSITTING, MOTHER’S HELPER	5
CLEANING – E.G., JANITOR, MAID	6
CLERICAL – E.G., FILING, RECEPTIONIST, SECRETARY, TYPIST (INCLUDES: WORKING IN SCHOOL OFFICE)	7
COMPUTER SUPPORT – E.G., DATA ENTRY, PROGRAMMING, WEB PAGE DEVELOPMENT	8
DELIVERY – E.G., OF FOOD, PRESCRIPTIONS, NEWSPAPERS	9
FARM LABORER – ANIMALS AND FIELDS	10
FINANCIAL SERVICES- BANKTELLER	11
FOOD SERVICE – BUSBOY, WAITER, BAKER, COOK	12
GARDENING AND GROUNDS MAINTENANCE – LAWN MOWING, GROUNDSKEEPING, HORTICULTURE	13
GAS STATION ATTENDANT	14
HEALTH CARE – PERSONAL CARE ATTENDANT, NURSE’S AIDE	15
MARKETING ADVERTISING	16
MECHANIC (AUTO REPAIR)	17
RETAIL SALES	18
SKILLED LABOR APPRENTICE – PLUMBER, CARPENTER, ELECTRICIAN	19
SORTING, STUFFING	21
SPORTS RELATED – CADDY, UMPIRE, REFEREE, COACH, LIFEGUARD, TEACHING A SPORT	22
STOCK CLERKS – GROCERY STORE, DRUG STORE	23
USHER – MOVIE THEATER	24
OTHER, SPECIFY _____	25
DON’T KNOW	-1
REFUSED	-2

**IN-SCHOOL YOUTH, ANY JOB OTHER THAN SCHOOL-SPONSORED WORK**

CHECKPOINT: IF YOUTH HAS A SCHOOL-SPONSORED JOB (T1a=1), SAY: My next questions are about paid work other than school-sponsored jobs. GO TO T2a.

NLTS

T2a. At any time in the past 2 years, did you do any work for pay, other than work around the house [IF T1a=1: or a school-sponsored job]? That could include being a babysitter or working for a neighbor. CODE ONE.

GO TO SECTION U	YES	1
	NO	2
	DON’T KNOW	-1
	REFUSED	-2

T2b. Did you do this work only during the summer, during the school year, or both? IF ASKED, SCHOOL YEAR IS FROM SEPTEMBER TO MAY. CODE ONE RESPONSE.

GO TO T2c	ONLY DURING THE SUMMER	1
GO TO T2d	ONLY DURING THE SCHOOL YEAR	2
GO TO T2b	BOTH	3
GO TO T3a	DON'T KNOW	-1
	REFUSED	-2

T2c. About how many hours a week have you usually worked during the summer?  
IF MORE THAN ONE JOB, COMBINE ALL JOBS. IF ASKED, IF YOUTH IS WORKING THIS SUMMER AND WORKED LAST SUMMER, CODE THIS SUMMER. IF WORKED LESS THAN 1 HOUR PER WEEK, CODE AS 1 HOUR. ENTER NUMBER AND/OR CODE.

IF T2c=1 GO TO T3a IF T2c=3 GO TO T2d	_____	HOURS PER WEEK	1
	NUMBER OF	HOURS PER MONTH	2
		DON'T KNOW	-1
		REFUSED	-2

T2d. About how many hours a week have you usually worked during the school year?  
IF MORE THAN ONE JOB, COMBINE ALL JOBS. IF IS NO LONGER IN SCHOOL, IF ASKED, WE MEAN DURING SEPTEMBER TO MAY. IF WORKED DIFFERENT HOURS IN 2 SCHOOL YEARS, CODE MOST RECENT SCHOOL YEAR. IF WORKED LESS THAN 1 HOUR PER WEEK, CODE AS 1 HOUR. ENTER NUMBER AND/OR CODE.

_____	NUMBER OF	HOURS PER WEEK	1
		HOURS PER MONTH	2
		DON'T KNOW	-1
		REFUSED	-2

**IN-SCHOOL YOUTH, HAS CURRENT JOB OTHER THAN SCHOOL-SPONSORED WORK**

NLTS

T3a. Do you have a paid job now, other than work around the house [IF T1a=1: or a school-sponsored job]?

GO TO T3b	YES	1
GO TO T4a	NO	2
	DON'T KNOW	-1
	REFUSED	-2

T3b. How many different paid jobs do you have now?

_____	
NUMBER OF JOBS	
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF T3b  $\leq$  1, GO TO T3e. ELSE, GO TO T3c.

T3c. Thinking about all the jobs you have now, [IF T1a=1, not counting your work study job] about how many hours a week do you usually work?

GO TO CHECKPOINT	NUMBER OF HOURS A WEEK	
GO TO T3d	DON'T KNOW	-1
	REFUSED	-2

T3d. Taking all your jobs together, [IF T1a=1, not counting your work study job] do you usually work full time or part time? IF ASKED, FULL TIME IS 35 HOURS OR MORE PER WEEK.

FULL TIME	1
PART TIME	2
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF T37b >1, SAY: Please think of the job where you spend the most time.

T3e. What kind work do you do at this job? DO NOT READ CATEGORIES. IF MORE THAN ONE JOB, CODE JOB WHERE YOUTH SPENDS THE MOST TIME. RECORD ONLY ONE CODE. IF TYPE OF WORK IS UNCLEAR, PROBE: Can you tell me a little about the place you have done this work? What kinds of things have you done there?

ASSEMBLY WORK, SORTING, STUFFING	1
ANIMAL CARE – E.G., DOG WALKING, VETERINARY HELPER	2
CAMP COUNSELOR	3
CASHIER – AT GROCERY, FAST FOOD PLACE, ETC.	4
CHILD CARE, INCLUDING BABYSITTING, MOTHER'S HELPER	5
CLEANING – E.G., JANITOR, MAID	6
CLERICAL – E.G., FILING, RECEPTIONIST, SECRETARY, TYPIST (INCLUDES: WORKING IN SCHOOL OFFICE)	7
COMPUTER SUPPORT – E.G., DATA ENTRY, PROGRAMMING, WEB PAGE DEVELOPMENT	8
DELIVERY – E.G., OF FOOD, PRESCRIPTIONS, NEWSPAPERS	9
FARM LABORER – ANIMALS AND FIELDS	10
FINANCIAL SERVICES- BANKTELLER	11
FOOD SERVICE – BUSBOY, WAITER, BAKER, COOK	12
GARDENING AND GROUNDS MAINTENANCE – LAWN MOWING, GROUNDSKEEPING, HORTICULTURE	13
GAS STATION ATTENDANT	14
HEALTH CARE – PERSONAL CARE ATTENDANT, NURSE'S AIDE	15
MARKETING ADVERTISING	16
MECHANIC (AUTO REPAIR)	17
RETAIL SALES	18
SKILLED LABOR APPRENTICE – PLUMBER, CARPENTER, ELECTRICIAN	19
SORTING, STUFFING	21
SPORTS RELATED – CADDY, UMPIRE, REFEREE, COACH, LIFEGUARD, TEACHING A SPORT	22
STOCK CLERKS – GROCERY STORE, DRUG STORE	23
USHER – MOVIE THEATER	24
OTHER, SPECIFY _____	25
DON'T KNOW	-1
REFUSED	-2

NLTS

T3f. About how much are you paid for this job? PROBE: Is that per hour? IF ASKED, WE WANT PAY BEFORE TAXES OR DEDUCTIONS. ENTER NUMBER AND/OR CODE ONE.

\$ _____ PAY PER:	HOUR	1
	WEEK	2
	MONTH	3
	YEAR	4
	MINIMUM WAGE	0
	DON'T KNOW	-1
	REFUSED	-2

T3g. How do you usually get to this job? CODE ONE RESPONSE. IF MENTIONS MORE THAN ONE, PROBE FOR MOST COMMON MODE OF TRANSPORTATION TO WORK.

GO TO T5	WALKS OR RIDES A BIKE	1
	DRIVES HIM/HERSELF	2
	GETS RIDE FROM FAMILY MEMBER	3
	GETS RIDE FROM FRIEND/COWORKER	4
	CARPools	5
	TAKES PUBLIC TRANSPORTATION, E.G., BUS, TRAIN, SUBWAY, TAXI	6
	SERVICE AGENCY PROVIDES TRANSPORTATION	7
	USES DIAL-A-VAN SERVICE	8
	OTHER. SPECIFY: _____	9
	DON'T KNOW	-1
	REFUSED	-2

**MOST RECENT JOB OF IN-SCHOOL YOUTH NOT WORKING NOW**

CHECKPOINT. ASK THIS SECTION IF T2a=1 AND T3a NE1

T4a. Please think of the last job you had—the one you had most recently [IF T1=1, other than your school-sponsored job]. What kind work did you do at this job? **DO NOT READ CATEGORIES. RECORD ONLY ONE CODE. IF TYPE OF WORK IS UNCLEAR, PROBE:** Can you tell me a little about the place you did this work? What kinds of things did you do there? **IF YOUTH HAD MORE THAN ONE JOB AT THE SAME TIME OF HIS/HER MOST RECENT JOB, SAY:** Please tell me about the job where you spent the most time.

ASSEMBLY WORK, SORTING, STUFFING	1
ANIMAL CARE – E.G., DOG WALKING, VETERINARY HELPER	2
CAMP COUNSELOR	3
CASHIER – AT GROCERY, FAST FOOD PLACE, ETC.	4
CHILD CARE, INCLUDING BABYSITTING, MOTHER’S HELPER	5
CLEANING – E.G., JANITOR, MAID	6
CLERICAL – E.G., FILING, RECEPTIONIST, SECRETARY, TYPIST (INCLUDES: WORKING IN SCHOOL OFFICE)	7
COMPUTER SUPPORT – E.G., DATA ENTRY, PROGRAMMING, WEB PAGE DEVELOPMENT	8
DELIVERY – E.G., OF FOOD, PRESCRIPTIONS, NEWSPAPERS	9
FARM LABORER – ANIMALS AND FIELDS	10
FINANCIAL SERVICES- BANKTELLER	11
FOOD SERVICE – BUSBOY, WAITER, BAKER, COOK	12
GARDENING AND GROUNDS MAINTENANCE – LAWN MOWING, GROUNDSKEEPING, HORTICULTURE	13
GAS STATION ATTENDANT	14
HEALTH CARE – PERSONAL CARE ATTENDANT, NURSE’S AIDE	15
MARKETING ADVERTISING	16
MECHANIC (AUTO REPAIR)	17
RETAIL SALES	18
SKILLED LABOR APPRENTICE – PLUMBER, CARPENTER, ELECTRICIAN	19
SORTING, STUFFING	21
SPORTS RELATED – CADDY, UMPIRE, REFEREE, COACH, LIFEGUARD, TEACHING A SPORT	22
STOCK CLERKS – GROCERY STORE, DRUG STORE	23
USHER – MOVIE THEATER	24
OTHER, SPECIFY _____	25
DON’T KNOW	-1
REFUSED	-2

NLTS

T4b. About how much were you paid for that job? **PROBE:** Is that per hour? **IF ASKED, WE WANT PAY BEFORE TAXES OR DEDUCTIONS. ENTER NUMBER AND/OR CODE ONE.**

\$ _____ PAY PER:	HOUR	1
	WEEK	2
	MONTH	3
	YEAR	4
	MINIMUM WAGE	0
	DON’T KNOW	-1
	REFUSED	-2

T4c. How did you usually get to that job? CODE ONE RESPONSE. IF MENTIONS MORE THAN ONE, PROBE FOR MOST COMMON MODE OF TRANSPORTATION TO WORK.

GO TO T5	WALKED OR RODE A BIKE	1
	DROVE HIM/HERSELF	2
	GOT RIDE FROM FAMILY MEMBER	3
	GOT RIDE FROM FRIEND/COWORKER	4
	CARPOOLED	5
	TOOK PUBLIC TRANSPORTATION, E.G., BUS, TRAIN, SUBWAY, TAXI	6
	SERVICE AGENCY PROVIDED TRANSPORTATION	7
	USED DIAL-A-VAN SERVICE	8
	OTHER. SPECIFY: _____	9
	DON'T KNOW	-1
	REFUSED	-2

T4d. About how many hours did you work per week when you had that job, including any other jobs you might have had at the same time?

NUMBER OF HOURS A WEEK	
DON'T KNOW	-1
REFUSED	-2

T5. Have you been fired from a job at any time in the past 2 years?

GO TO SECTION U	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

**OUT OF SCHOOL YOUTH WORK STATUS—2 YEARS**

CHECKPOINT. ASK THIS SECTION IF P2b NE 1 OR YOUTH WAS OUT OF SECONDARY SCHOOL IN A PRECEDING WAVE.

T6a. At any time during the past 2 years, did you do any work for pay, other than work around the house? CODE ONE.

GO TO SECTION U	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

T6b. How many paid jobs have you had altogether in the past 2 years? IF RESPONDENT INDICATES JOB WAS HELD "OFF AND ON," WE WANT THE LONGEST SINGLE PERIOD OF CONTINUOUS WORK.

NUMBER	
DON'T KNOW	-1
REFUSED	-2

T6c. What is the longest time you have worked at a particular job in the past 2 years? ENTER NUMBER AND CODE METRIC.

NUMBER	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	MINIMUM WAGE	0
	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF STILL IN HIGH SCHOOL IN PRIOR WAVE BUT NOT NOW OR (P2a = 1 AND P2b NE 1), GO TO T6d. ELSE GO TO T7a.

NLTS

T6d. How many paid jobs have you had since leaving high school?

NUMBER	
DON'T KNOW	-1
REFUSED	-2

NLTS

T6e. What is the longest amount of time you have worked at a particular job since leaving high school?

NUMBER	
DON'T KNOW	-1
REFUSED	-2

**ALL CURRENT JOBS**

NLTS

T7a. Do you have a paid job **now**, other than work around the house?

GO TO T11a	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

NLTS

T7b. How many different paid jobs do you have now?

_____	
NUMBER	
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF T7b=1 [HAS ONE JOB] GO TO T8a.

NLTS

T7c. Thinking about all the jobs you have, about how many hours a week do you usually work?

GO CHECKPOINT BEFORE T8a	_____	
	HOURS	
GO TO T7d	DON'T KNOW	-1
	REFUSED	-2

NLTS

T7d. Taking all your jobs together, do you usually work full time or part time? IF ASKED, FULL TIME IS 35 HOURS OR MORE PER WEEK.

FULL TIME	1
PART TIME	2
DON'T KNOW	-1
REFUSED	-2

**OUT OF SCHOOL YOUTH, CURRENT JOB**

CHECKPOINT: IF T4a >1: My next questions are about the job where you spend the most time.

NLTS

T8a. What kind of work do you do for this job? DO NOT READ CATEGORIES. IF TYPE OF WORK IS UNCLEAR, PROBE: Can you tell me a little about the place you do this work? What kinds of things do you do there?

RECORD VERBATIM ANSWER: \_\_\_\_\_

OR:

DON'T KNOW	-1
REFUSED	-2

NLTS

T8b. About how many hours a week do you usually work at this job? IF RESPONDENT SAYS HOURS VARY, ASK FOR HOURS IN A TYPICAL WEEK. IF RESPONDENT CAN'T ANSWER IN GENERAL, ASK FOR HOURS IN THE MOST RECENT WEEK HE/SHE WORKED AT THIS JOB.

GO TO CHECKPOINT	_____	
	HOURS	
GO TO T8c	DON'T KNOW	-1
	REFUSED	-2

NLTS

T8c. Do you usually work full time or part time? IF ASKED, FULL TIME IS 35 HOURS OR MORE PER WEEK.

	FULL TIME	1
	PART TIME	2
GO TO T8e	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF T8b <35 OR T8c =2, GO TO T8d. ELSE, GO TO T8e.

NLTS

T8d. Are you working part time because you want to, or would you rather work full time?

WANT TO WORK PART TIME	1
RATHER WORK FULL TIME	2
DON'T KNOW	-1
REFUSED	-2

NLTS

T8e. About how long have you had this job?

NUMBER OF	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

NLTS

T8f. About how much are you paid at this job? PROBE IF IN DOUBT: Is that per hour? IF ASKED, WE WANT PAY BEFORE TAXES OR DEDUCTIONS. ENTER NUMBER AND/OR CODE ONE.

\$ _____ PAY PER:	HOUR	1
	WEEK	2
	MONTH	3
	YEAR	4
	MINIMUM WAGE	0
	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF WORKED LESS THAN 6 MOS. [T8e<6 MOS.] GO TO T8h. ELSE GO TO T8g.

T8g. At this job .... READ EACH ITEM. CODE ONE RESPONSE FOR EACH ITEM.

		YES	NO	DK	REF
a.	Are you paid more than when you started the job?	1	2	-1	-2
b.	Have you been promoted or taken on more responsibility since you started the job?	1	2	-1	-2

NLTS

T8h. As part of this job, do you get... READ LIST. CODE ONE CATEGORY PER ITEM.

	YES	NO	REF	DK
a. Paid vacation or sick leave?	1	2	-1	-2
b. Health insurance?	1	2	-1	-2
c. Retirement benefits, like a 401k?	1	2	-1	-2

CHECKPOINT: IF YOUTH ASSERTS NO DISABILITY [Q5 NE 1], GO TO T8n.  
 IF YOUTH'S DISABILITY ON SAMPLE FILE IS ONLY LD OR SPEECH IMPAIRED, GO TO T8j.  
 ELSE, GO TO T8i.

T8i. At your job, do most of the other workers have disabilities?

GO TO T8k	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

T8j. Did you tell your employer that you have a disability... READ CATEGORIES. CODE ONE RESPONSE.

GO TO T8k	Before you got your job	1
	After you started the job, or	2
GO TO T8n	Have you not told them at all?	3
DON'T READ	DON'T KNOW	-1
GO TO T8k	REFUSED	-2

T8k. Have you received any accommodations or other help from your employer because you have any kind of learning problem, disability, or other special need?

GO TO T8m	YES	1
	NO	2
GO TO T8l	DON'T KNOW	-1
	REFUSED	-2

T8l. Have you asked or applied for any accommodations, or other help from your employer?

GO TO T8p	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

T8m. What accommodations or other help have you received?

	<b>NONE</b>	0
<b>1</b>	<b>MATERIALS/TECHNOLOGY ADAPTATIONS</b>	
	LARGE PRINT OR BRAILLE MATERIALS OR LARGE PRINT COMPUTER	1
	WRITTEN MATERIALS ON TAPE	2
	COMPUTER HARDWARE ADAPTED FOR YOUTH'S NEEDS (E.G., ALTERNATIVE KEYBOARD, SWITCH INTERFACE, SPEECH RECOGNITION SOFTWARE, COMPUTER PERIPHERALS)	3
	HEADSETS TO ALLOW HANDSFREE PHONE USE OR TO MAGNIFY SOUND	4
	DIFFERENT EQUIPMENT (OTHER THAN COMPUTER) OR CHANGES TO EQUIPMENT USED ON THE JOB	5
	TTY OR TTD AVAILABLE	6
	ALTERED WORK STATION	7
<b>2</b>	<b>HUMAN AIDES</b>	
	A READER OR INTERPRETER	8
	JOB COACH—HELPS MONITOR PROGRESS, OFFERS ADVICE TO IMPROVE PERFORMANCE	9
	A PERSONAL AIDE OR ASSISTANT TO HELP ON THE JOB	10
<b>3</b>	<b>ACCOMMODATIONS IN ASSIGNMENT OR SUPERVISION</b>	
	MORE TRAINING, TRAINING TAILORED TO INDIVIDUAL NEEDS	11
	MORE OR DIFFERENT SUPERVISION OR MENTORING	12
	DIFFERENT EXPECTATIONS FOR PRODUCTIVITY OR PERFORMANCE	13
	INSTRUCTIONS ARE MODIFIED IN FORM OR IN THE WAY THEY ARE COMMUNICATED (E.G., PICTORIAL INSTRUCTIONS, VERBAL INSTRUCTIONS INSTEAD OF/IN ADDITION TO WRITTEN)	14
<b>4</b>	<b>SCHEDULING ACCOMMODATIONS</b>	
	FLEXIBLE TIMES FOR ARRIVING AT AND LEAVING WORK	15
	SLOWER PACE FOR GETTING THE JOB DONE	16
	MORE BREAKS, LONGER BREAKS	17
	MORE PAID SICK LEAVE OR PAID TIME OFF FOR MEDICAL NEEDS, THERAPY APPOINTMENTS, ETC.	18
<b>5</b>	<b>PHYSICAL ADAPTATIONS</b>	
	REARRANGED EQUIPMENT OR FURNITURE TO IMPROVE ACCESSIBILITY	19
	MADE CHANGES TO THE BUILDING (E.G., WIDENED DOORS, MADE RESTROOMS ACCESSIBLE)	20
<b>6</b>	<b>OTHER SUPPORTS</b>	
	TRANSPORTATION ASSISTANCE (E.G., TO GET BETWEEN BUILDINGS AT THE WORK SITE)	21
	PARKING ACCOMMODATIONS	22
	EMERGENCY PLAN ACCOUNTS FOR DISABLED WORKER (E.G., EVACUATION PLAN)	23
	OTHER. SPECIFY: _____	24
	<b>DON'T KNOW</b>	-1
	<b>REFUSED</b>	-2

NOTE: THE FOLLOWING PROBES ARE IMPLEMENTED SO AS NOT TO DUPLICATE PROBES FOR YOUTH WITH MORE THAN ONE TYPE OF DISABILITY.

**CHECKPOINT:**

IF NO RESPONSES IN CATEGORY 3: Have there been any accommodations in the training or supervision you receive or in your work assignments?

IF NO RESPONSES IN CATEGORY 4: Have there been any accommodations in your work schedule, like getting to arrive or leave work at flexible times, or getting more time to get your work done?

**CHECKPOINT: IF DISABILITY IS ORTHOPEDIC, OHI, MULTIPLE, VISUAL, OR DEAF/BLIND, PROBE:**

IF NO RESPONSES IN CATEGORY 2: Has there been any person assigned to help you, like a person who helps you get around your work site or reads materials to you?

IF NO RESPONSES IN CATEGORY 1: Have there been any adaptations to the equipment you use, like giving you a special workstation or different computers or other equipment, because of your disability?

IF NO RESPONSES IN CATEGORY 5: Have there been any adaptations to your workplace, like rearranging furniture to changing doorways or restrooms because of your disability?

IF NO RESPONSES IN CATEGORY 6: Have you had any services or supports to help you get around at work, like help with transportation or parking?

**CHECKPOINT: IF DISABILITY IS HEARING IMPAIRED, PROBE:**

IF NO RESPONSES IN CATEGORY 2. Has there been any person assigned to help you, like a sign language interpreter?

T8n. How useful have/has this/these been in helping you keep your job and do your best there? Would you say... READ CATEGORIES. CODE ONE RESPONSE.

	Very useful	4
	Somewhat useful	3
	Not very useful, or	2
	Not at all useful?	1
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

T8o. Do you think you are getting enough accommodation or other help at your job?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

T8p. Do you think... READ LIST. CODE ONE CATEGORY PER ITEM.

	YES	NO	REF	DK
a. You are pretty well paid for your work.	1	2	-1	-2
b. You are treated pretty well by others at your job.	1	2	-1	-2
c. In your job, you have lots of chances to work your way up.				
d. Your education and training is put to good use	1	2	-1	-2

NLTS

T8q. How well do you get along with... READ FIRST CATEGORY. Would you say very well, pretty well, not very well, or not at all well? READ REMAINING CATEGORIES AND RESONSES. CODE ONE RESPONSE FOR EACH ITEM.

	VERY WELL	PRETTY WELL	NOT VERY WELL	NOT AT ALL WELL	MIXED	DK	REF
a. Your co-workers?	1	2	3	4	0	-1	-2
b. Your boss?	1	2	3	4	0	-1	-2

NLTS

T8r. Do you usually like this job... READ CATEGORIES. CODE ONE.

	Very much,	4
	Like it fairly well,	3
	Not like it much, or	2
	Not like it at all?	1
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

NLTS

T8s. How do you usually get to work? IF RESPONSE IS PROPER NAME, E.G., "WITH JIM" OR "ON BART", PROBE: Who is that? OR What is that? CODE ONE RESPONSE.

WALKS OR RIDES A BIKE	1
DRIVES HIM/HERSELF	2
GETS RIDE FROM FAMILY MEMBER	3
GETS RIDE FROM FRIEND/COWORKER	4
CARPOOLS	5
TAKES PUBLIC TRANSPORTATION, E.G., BUS, TRAIN, SUBWAY, TAXI	6
SERVICE AGENCY PROVIDES TRANSPORTATION	7
USES DIAL-A-VAN SERVICE	8
OTHER. SPECIFY: _____	9
DON'T KNOW	-1
REFUSED	-2

**OUT OF SCHOOL YOUTH LOOKING FOR JOB BEFORE CURRENT JOB**

NLTS

T9a. About how long did you look for a job before you found the one you have now?

NUMBER OF	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DIDN'T REALLY LOOK FOR THE JOB	5
	DON'T KNOW	-1
	REFUSED	-2

NLTS

T9b. Did you find this job yourself, or did you have help—like from a temporary agency or someone you know?

GO TO CHECKPOINT BEFORE T10a	FOUND HIM/HERSELF	1
GO TO T9c	HAD HELP	2
GO TO CHECKPOINT BEFORE 10e	DON'T KNOW	-1
	REFUSED	-2

NLTS

T9c. Who helped you? Was it.... READ CATEGORIES. CODE ALL THAT APPLY.

GO TO T9d	Someone in an employment agency or other program,	1
GO TO CHECKPOINT BEFORE T10a	A teacher or someone at school,	2
	A family member,	3
	A friend or someone else you know?	4
DON'T READ GO TO CHECKPOINT BEFORE T10a	DON'T KNOW	-1
	REFUSED	-2

NLTS

T9d. Has someone from the agency or program stayed in touch with you to check on how you are doing on the job?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF T6b=1 (ONLY ONE JOB IN PREVIOUS 2 YEARS), GO TO SECTION U.

**PREVIOUS JOB FOR THOSE WORKING NOW**

NLTS

T10a. Did you have a paid job **before** the one you have now, other than work around the house [IF T1=1, or a school-sponsored job]? IF THE YOUTH HAD MORE THAN ONE PAID JOB AT THE SAME TIME BEFORE THE CURRENT JOB, WE WANT THE JOB AT WHICH HE/SHE SPENT THE MOST TIME.

GO TO SECTION U	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

T10b. In the job you had before, did you usually work more hours a week than the job you have now, about the same number of hours a week as now, or fewer hours a week than the job you have now? IF STILL HAS THE JOB THAT STARTED BEFORE CURRENT JOB THAT WAS REPORTED IN T8, GO BACK TO T10a, CODE 2, AND GO TO SECTION U.

MORE HOURS THAN NOW	3
SAME HOURS AS NOW	2
FEWER HOURS THAN NOW	1
DON'T KNOW	-1
REFUSED	-2

T10c. When you left that job was your pay ...READ CATEGORIES. CODE ONE RESPONSE.

DON'T READ	More,	1
	Less, or	2
	About the same as you get paid now?	3
	DON'T KNOW	-1
	REFUSED	-2

NLTS

T10d. As part of that job, did you get ... READ LIST. CODE ONE CATEGORY PER ITEM.

	YES	NO	REF	DK
a. Paid vacation or sick leave?	1	2	-1	-2
b. Health insurance?	1	2	-1	-2
c. Retirement benefits, like a 401k?	1	2	-1	-2

CHECKPOINT: IF YOUTH ASSERTS NO DISABILITY [Q5 NE 1], GO TO T10f.  
 IF YOUTH'S DISABILITY ON SAMPLE FILE IS ONLY LD OR SPEECH IMPAIRED, GO TO T10f.  
 ELSE, GO TO T10e.

T10e. At that job, did most of the other workers have disabilities?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

T10f. When you left that job...READ CATEGORIES. CODE ONE RESPONSE

GO TO T10g	Did you quit,	1
GO TO SECTION U	Were you fired,	2
GO TO T14a	Were you laid off, or	3
	Was it a temporary job that ended?	4
DON'T READ GO TO T14a	DON'T KNOW	-1
	REFUSED	-2

NLTS

T10g. What was the main reason you quit? CODE ONE CODE.

FOUND A BETTER JOB	1
WANTED TO LOOK FOR A BETTER JOB	2
WANTED TO START OWN BUSINESS/WORK FOR SELF	3
DIDN'T LIKE THE HOURS OR KIND OF WORK OR WORKING CONDITIONS	4
WAGES TOO LOW	5
DIDN'T GET ALONG WITH COWORKERS OR BOSS	6
WENT BACK TO SCHOOL	7
JOB INTERFERED WITH SCHOOL	8
ILLNESS OR DISABILITY INTERFERED WITH JOB	9
EMPLOYER WOULDN'T PROVIDE ACCOMMODATIONS NEEDED TO SUCCEED AT THE JOB.	10
PARENTS DIDN'T WANT YOUTH TO WORK	11
FAMILY REASONS (E.G., PREGNANCY, HAD TO CARE FOR FAMILY MEMBER)	12
MOVED	13
TRANSPORTATION PROBLEMS, TOO HARD TO GET TO THE JOB	14
CAN MAKE MORE MONEY ON DISABILITY	15
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: GO TO T14a.

**MOST RECENT JOB**

NLTS

T11a. Please think about the last job you had. What kind of work did you do in that job? DO NOT READ CATEGORIES. IF TYPE OF WORK IS UNCLEAR, PROBE: Can you tell me a little about the place you did this work? What kinds of things did you do there?

RECORD VERBATIM ANSWER: \_\_\_\_\_

OR:

DON'T KNOW	-1
REFUSED	-2

NLTS

T11b. About how many hours a week did you usually work at that job? IF RESPONDENT SAYS HOURS VARIED OR CHANGED OVER THE TIME HE/SHE HAD THE JOB, ASK FOR HOUR WORKED IN A TYPICAL WEEK AT THE TIME HE/SHE LEFT THE JOB.

GO TO CHECKPOINT	_____ HOURS	
GO TO T11c	DON'T KNOW	-1
	REFUSED	-2

NLTS

T11c. Did you usually work full time or part time? IF ASKED, FULL TIME IS 35 HOURS OR MORE PER WEEK.

FULL TIME	1
PART TIME	2
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF T11b <35 OR T11c =2, GO TO T11d. ELSE, GO TO T11e.

NLTS

T11d. Did you work part time because you wanted to, or would you rather have worked full time?

WANT TO WORK PART TIME	1
RATHER WORK FULL TIME	2
DON'T KNOW	-1
REFUSED	-2

T11e. About how long did you have that job?

NUMBER OF _____	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

NLTS

T11f. When you left that job, about how much were you paid? PROBE IF NEEDED: Is that per hour? IF ASKED, WE WANT PAY BEFORE TAXES OR DEDUCTIONS. ENTER NUMBER AND/OR CODE ONE.

\$ _____ PAY PER:	HOUR	1
	WEEK	2
	MONTH	3
	YEAR	4
	MINIMUM WAGE	0
	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF WORKED LESS THAN 6 MOS. [T11e<6 MOS.] GO TO T11h. ELSE GO TO T11g.

T11g. At that job .... READ EACH ITEM. CODE ONE RESPONSE FOR EACH ITEM.

		YES	NO	DK	REF
a.	Were you paid more when you left the job than when you started it?	1	2	-1	-2
b.	Were you promoted or did you take on more responsibility since you started the job?	1	2	-1	-2

NLTS

T11h. As part of that job, did you get... READ LIST. CODE ONE CATEGORY PER ITEM.

		YES	NO	REF	DK
a.	Paid vacation or sick leave?	1	2	-1	-2
b.	Health insurance?	1	2	-1	-2
c.	Retirement benefits, like a 401k?	1	2	-1	-2

CHECKPOINT: IF YOUTH ASSERTS NO DISABILITY [Q5 NE 1], GO TO T11n. IF YOUTH'S DISABILITY ON SAMPLE FILE IS ONLY LD OR SPEECH IMPAIRED, GO TO T11j. ELSE, GO TO T11i.

T11i. At that job, did most of the other workers have disabilities?

GO TO T11k	YES	1
	NO	2
GO TO T11j	DON'T KNOW	-1
	REFUSED	-2

T11j. At that job, did you tell your employer that you have a disability ... READ CATEGORIES. CODE ONE RESPONSE.

GO TO T11k	Before you got the job	1
	After you started the job, or	2
GO TO T11n	Did you not told them at all?	3
DON'T READ	DON'T KNOW	-1
GO TO T11k	REFUSED	-2

T11k. Did you receive any accommodations or other help from your employer because you had any kind of learning problem, disability, or other special need?

GO TO T11m	YES	1
	NO	2
GO TO T11l	DON'T KNOW	-1
	REFUSED	-2

T11l. Did you ask or apply for any accommodations or other help from your employer at your last job?

GO TO T11p	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

T11m. What accommodations or other help did you receive? IF HAS ATTENDED MORE THAN ONE 2-YEAR, JUNIOR, OR COMMUNITY COLLEGE, WE WANT TO KNOW ABOUT SERVICES FROM ANY OF THEM.

	<b>NONE</b>	0
<b>1</b>	<b>MATERIALS/TECHNOLOGY ADAPTATIONS</b>	
	LARGE PRINT OR BRAILLE MATERIALS OR LARGE PRINT COMPUTER	1
	WRITTEN MATERIALS ON TAPE	2
	COMPUTER HARDWARE ADAPTED FOR YOUTH'S NEEDS (E.G., ALTERNATIVE KEYBOARD, SWITCH INTERFACE, SPEECH RECOGNITION SOFTWARE, COMPUTER PERIPHERALS)	3
	HEADSETS TO ALLOW HANDSFREE PHONE USE OR TO MAGNIFY SOUND	4
	DIFFERENT EQUIPMENT (OTHER THAN COMPUTER) OR CHANGES TO EQUIPMENT USED ON THE JOB	5
	TTY OR TTD AVAILABLE	6
	ALTERED WORK STATION	7
<b>2</b>	<b>HUMAN AIDES</b>	
	A READER OR INTERPRETER	8
	JOB COACH—HELPS MONITOR PROGRESS, OFFERS ADVICE TO IMPROVE PERFORMANCE	9
	A PERSONAL AIDE OR ASSISTANT TO HELP ON THE JOB	10
<b>3</b>	<b>ACCOMMODATIONS IN ASSIGNMENT OR SUPERVISION</b>	
	MORE TRAINING, TRAINING TAILORED TO INDIVIDUAL NEEDS	11
	MORE OR DIFFERENT SUPERVISION OR MENTORING	12
	DIFFERENT EXPECTATIONS FOR PRODUCTIVITY OR PERFORMANCE	13
	INSTRUCTIONS ARE MODIFIED IN FORM OR IN THE WAY THEY ARE COMMUNICATED (E.G., PICTORIAL INSTRUCTIONS, VERBAL INSTRUCTIONS INSTEAD OF/IN ADDITION TO WRITTEN)	14
<b>4</b>	<b>SCHEDULING ACCOMMODATIONS</b>	
	FLEXIBLE TIMES FOR ARRIVING AT AND LEAVING WORK	15
	SLOWER PACE FOR GETTING THE JOB DONE	16
	MORE BREAKS, LONGER BREAKS	17
	MORE PAID SICK LEAVE OR PAID TIME OFF FOR MEDICAL NEEDS, THERAPY APPOINTMENTS, ETC.	18
<b>5</b>	<b>PHYSICAL ADAPTATIONS</b>	
	REARRANGED EQUIPMENT OR FURNITURE TO IMPROVE ACCESSIBILITY	19
	MADE CHANGES TO THE BUILDING (E.G., WIDENED DOORS, MADE RESTROOMS ACCESSIBLE)	20
<b>6</b>	<b>OTHER SUPPORTS</b>	
	TRANSPORTATION ASSISTANCE (E.G., TO GET BETWEEN BUILDINGS AT THE WORK SITE)	21
	PARKING ACCOMMODATIONS	22
	EMERGENCY PLAN ACCOUNTS FOR DISABLED WORKER (E.G., EVACUATION PLAN)	23
	OTHER. SPECIFY: _____	24
	<b>DON'T KNOW</b>	-1
	<b>REFUSED</b>	-2

NOTE: THE FOLLOWING PROBES ARE IMPLEMENTED SO AS NOT TO DUPLICATE PROBES FOR YOUTH WITH MORE THAN ONE TYPE OF DISABILITY.

**CHECKPOINT:**

IF NO RESPONSES IN CATEGORY 3: Have there been any accommodations in the training or supervision you receive or in your work assignments?

IF NO RESPONSES IN CATEGORY 4: Have there been any accommodations in your work schedule, like getting to arrive or leave work at flexible times, or getting more time to get your work done?

**CHECKPOINT: IF DISABILITY IS ORTHOPEDIC, OHI, MULTIPLE, VISUAL, OR DEAF/BLIND, PROBE:**

IF NO RESPONSES IN CATEGORY 2: Has there been any person assigned to help you, like a person who helps you get around your work site or reads materials to you?

IF NO RESPONSES IN CATEGORY 1: Have there been any adaptations to the equipment you use, like giving you a special workstation or different computers or other equipment, because of your disability?

IF NO RESPONSES IN CATEGORY 5: Have there been any adaptations to your workplace, like rearranging furniture to changing doorways or restrooms because of your disability?

IF NO RESPONSES IN CATEGORY 6: Have you had any services or supports to help you get around at work, like help with transportation or parking?

**CHECKPOINT: IF DISABILITY IS HEARING IMPAIRED, PROBE:**

IF NO RESPONSES IN CATEGORY 2. Has there been any person assigned to help you, like a sign language interpreter?

T11n. How useful have/has this/these been in helping you keep your job and do your best there? Would you say... READ CATEGORIES. CODE ONE RESPONSE.

	Very useful	4
	Somewhat useful	3
	Not very useful, or	2
	Not at all useful?	1
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

T11o. Do you think you are getting enough accommodation or other help at your job?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

T11p. At that job, did you think ... READ LIST. CODE ONE CATEGORY PER ITEM.

	YES	NO	REF	DK
a. You were pretty well paid for your work?	1	2	-1	-2
b. You were treated pretty well by others at your job?	1	2	-1	-2
c. You had lots of chances to work your way up?	1	2	-1	-2
d. Your education and training was put to good use?				

NLTS

T11q. How well do you get along with ... READ FIRST CATEGORY. Would you say very well, pretty well, not very well, or not at all well? READ REMAINING CATEGORIES AND RESONSES. CODE ONE RESPONSE FOR EACH ITEM.

	VERY WELL	PRETTY WELL	NOT VERY WELL	NOT AT ALL WELL	MIXED	DK	REF
a. Your co-workers?	1	2	3	4	0	-1	-2
b. Your boss?	1	2	3	4	0	-1	-2

NLTS

T11R. Did you usually like that job ... READ CATEGORIES. CODE ONE.

	Very much,	4
	Like it fairly well,	3
	Not like it much, or	2
	Not like it at all?	1
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

NLTS

T11S. How did you usually get to work then? IF RESPONSE IS PROPER NAME, E.G., "WITH JIM" OR "ON BART", PROBE: Who was that? OR What was that? CODE ONE RESPONSE.

WALKED OR RODE A BIKE	1
DROVE HIM/HERSELF	2
GOT RIDE FROM FAMILY MEMBER	3
GOT RIDE FROM FRIEND/COWORKER	4
CARPOOLED	5
TOOK PUBLIC TRANSPORTATION, E.G., BUS, TRAIN, SUBWAY, TAXI	6
SERVICE AGENCY PROVIDED TRANSPORTATION	7
USED DIAL-A-VAN SERVICE	8
OTHER. SPECIFY: _____	9
DON'T KNOW	-1
REFUSED	-2

**LOOKING FOR WORK BEFORE MOST RECENT JOB—OUT OF SCHOOL YOUTH**

NLTS

T12a. Did you find that job yourself, or did you have help, like from a temporary agency or someone you know?

GO TO T12d	FOUND HIM/HERSELF	1
GO TO T12b	HAD HELP	2
GO TO T12d	DON'T KNOW	-1
	REFUSED	-2

NLTS

T12b. Who helped you? Was it ... READ CATEGORIES. CODE ALL THAT APPLY.

GO TO T12c	Someone in an employment agency or other program,	1
GO TO T12d	A teacher or someone at school,	2
	A family member,	3
	A friend or someone else you know?	4
DON'T READ	DON'T KNOW	-1
GO TO T12d	REFUSED	-2

NLTS

T12c. Did someone from the agency or program stay in touch with you to check on how you are doing on the job?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

T12d. When you left that job ... READ CATEGORIES. CODE ONE RESPONSE

GO TO T12e	Did you quit,	1
GO TO T13a	Were you fired,	2
	Were you laid off, or	3
	Was it a temporary job that ended?	4
DON'T READ	DON'T KNOW	-1
GO TO T13a	REFUSED	-2

NLTS

T12e. What was the main reason you quit? CODE ONE CODE.

GO TO T13a	FOUND A BETTER JOB	1
	WANTED TO LOOK FOR A BETTER JOB	2
	WANTED TO START OWN BUSINESS/WORK FOR SELF	3
	DIDN'T LIKE THE HOURS OR KIND OF WORK OR WORKING CONDITIONS	4
	WAGES TOO LOW	5
	DIDN'T GET ALONG WITH COWORKERS OR BOSS	6
	WENT BACK TO SCHOOL	7
	JOB INTERFERED WITH SCHOOL	8
	ILLNESS OR DISABILITY INTERFERED WITH JOB	9
	EMPLOYER WOULDN'T PROVIDE ACCOMMODATIONS NEEDED TO SUCCEED AT THE JOB.	10
	PARENTS DIDN'T WANT YOUTH TO WORK	11
	FAMILY REASONS (E.G., PREGNANCY, HAD TO CARE FOR FAMILY MEMBER)	12
	MOVED	13
	TRANSPORTATION PROBLEMS, TOO HARD TO GET TO THE JOB	14
	CAN MAKE MORE MONEY ON DISABILITY	15
DON'T KNOW	-1	
REFUSED	-2	

**NOT WORKING NOW—LOOKING FOR WORK**

NLTS

T13a. Are you looking for a paid job now?

GO TO T13b	YES	1
GO TO T13d	NO	2
GO TO T13c	DON'T KNOW	-1
	REFUSED	-2

NLTS

T13b. About how long have you been looking for work?

NUMBER OF	DAYS	1
	WEEKS	2
	MONTHS	3
	YEARS	4
	DON'T KNOW	-1
	REFUSED	-2

NLTS

T13c. What have you done in the past month to find a job?

GO TO CHECK-POINT BEFORE T14	NOTHING IN THE PAST MONTH	0
	CHECKED WITH A STATE OR PRIVATE EMPLOYMENT AGENCY	1
	CHECKED WITH A MILITARY RECRUITER	2
	CHECKED WITH AN EMPLOYER DIRECTOR	3
	CHECKED WITH FAMILY MEMBER	4
	CHECKED WITH FRIENDS OR ACQUAINTANCES	5
	PLACE OR ANSWERED ADS	6
	LOOKED IN THE NEWSPAPER	7
	CHECKED ON THE WEB OR COMPUTER JOB LISTINGS	8
	USED A SCHOOL EMPLOYMENT AGENCY	9
	APPLIED FOR JOBS	10
	OTHER. SPECIFY: _____	11
	DON'T KNOW	-1
REFUSED	-2	

NLTS

T13d. Why have you decided not to look for work? CODE ALL THAT APPLY

YOUTH DIDN'T WANT TO LOOK/IT WAS TOO HARD TO LOOK	1
YOUTH IS HOMEMAKER, RAISING A FAMILY/WORKING IN THE HOME	2
GOING TO SCHOOL/IN A TRAINING PROGRAM	3
DOESN'T WANT TO WORK/DOESN'T NEED THE MONEY	4
DOESN'T KNOW HOW TO FIND A JOB	5
AVAILABLE JOBS AREN'T WORTH HAVING/DON'T INTEREST YOU	6
TRIED TO GET A JOB AND COUNDLN'T/NO ONE WILL HIRE YOUTH	7
AREN'T ANY JOBS AVAILABLE	8
PARENTS DON'T WANT YOUTH TO WORK	9
JOBS TOO HARD TO GET TO/TRANSPORATION PROBLEMS	10
WOULD LOSE SSI/DISABILITY/UNEMPLOYMENT OR OTHER BENEFITS	11
HAS A JOB THAT HASN'T STARTED YET/IS WAITING TO HEAR ABOUT A JOB/PROGRAM FOR WHICH HE/SHE HAS APPLIED	12
OTHER. SPECIFY: _____	13
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF T12d = 2, GO TO SECTION U. ELSE, GO TO T14.

**WORKED AT ALL IN PAST 2 YEARS, NOT FIRED FROM JOBS DESCRIBED**

T14. Have you been fired from a job any time in the past 2 years?

GO TO SECTION U	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

## U. YOUTH BEHAVIORS

YRBS, AHW1

Now I'm going to ask you about things some young people do. All of your answers will be private; nothing you say will be told to anyone else. My questions are about smoking, drinking, drug use, sexual activity, some kinds of violence, and trouble with the law. You don't have to answer any question you don't want to answer. If you don't want to answer a question, just say, "skip that one."

U1a. During the last 30 days, on how many days did you smoke cigarettes? Would you say ...  
READ CATEGORIES.

	Never	1
	1 or 2 days	2
	3 to 5 days	3
	6 to 9 days	4
	10 to 19 days	5
	20 to 29 days, or	6
	All 30 days?	7
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF RESPONDENT ANSWERS U1a IN TERMS OF PACKS SMOKED DURING THE PERIOD GO TO U1b. ELSE GO TO U2,

U1b. On the days you smoke, about how many cigarettes do you smoke in a day? ENTER NUMBER.

NUMBER: _____	
DON'T KNOW	-1
REFUSED	-2

YRBS

U2. During the last 30 days, on how many days did you have at least one drink of alcohol? Would you say ... READ CATEGORIES.

	Never	1
	1 or 2 days	2
	3 to 5 days	3
	6 to 9 days	4
	10 to 19 days	5
	20 to 29 days, or	6
	All 30 days?	7
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

YRBS, AHW1

U3a. Have you ever had sexual intercourse?

GO TO V3b	YES	1
GO TO V4	NO	2
	DON'T KNOW	-1
	REFUSED	-2

U3b. Have you had sexual intercourse in the past 3 months?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

U3c. The last time you had sexual intercourse, did [IF MALE: you] [IF FEMALE: your partner] use a condom?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

U3d. The last time, did you or your partner use or do anything else to keep from getting pregnant?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

U4. During the last 30 days, on how many days did you carry a weapon, such as a gun, knife, or club (IF IN SCHOOL NOW, ADD: at school)? Would you say ... READ CATEGORIES.

	Never	1
	1 day	2
	2 or 3 days	3
	4 or 5 days, or	4
	6 days or more?	5
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

YRBS, AHW1

U5a. My next questions are about taking drugs. If you don't want to answer a question, just say "skip that one." During the last 30 days, how many times did you use marijuana? Would you say... READ CATEGORIES.

	Never	1
	1 or 2 times	2
	3 to 9 times	3
	10 to 19 times	4
	20 to 39 times, or	5
	40 times or more?	6
DON'T READ GO TO U6	NEVER USES ANY DRUGS	7
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

YRBS, AHW1(mod.)

U5b. During the last 30 days, how many times did you use any form of cocaine, including powder, crack, or freebase? Would you say... READ CATEGORIES.

	Never	1
	1 or 2 times	2
	3 to 9 times	3
	10 to 19 times	4
	20 to 39 times, or	5
	40 times or more?	6
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

AHW1(mod.)

U5c. During the last 30 days how many times did you use any other kind of illegal drugs, such as LSD, PCP, ecstasy, mushrooms, speed, ice, heroin, or pills that you took without a doctor's prescription?

NO TIMES	0
NUMBER: _____	
DON'T KNOW	-1
REFUSED	-2

U6. Do you belong to a gang?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

AH W1

U7. In the past 12 months, have you gotten in a physical fight?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

NLTS

U8a. Have you been arrested at any time in the past 2 years? CODE ONE.

GO TO V9b	YES	1
GO TO V9d	NO	2
	DON'T KNOW	-1
	REFUSED	-2

U8b. In the past 2 years, have you been in jail overnight? CODE ONE.

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

U8c. In the past 2 years, have you been on probation or parole? CODE ONE.

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

U8d. In the past 2 years, have you been stopped and questioned by the police [IF P15=1, HAS A DRIVER'S LICENSE OR PERMIT, ADD: except for a traffic violation]? CODE ONE.

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF YOUTH IS 18 YEARS OLD OR OLDER, GO TO U10. ELSE, GO TO U11.

NLTS

U9. Are you registered to vote?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

SHELL POLL

U10. Let me read you a list of some kinds of people that someone might turn to when making important decisions or facing problems. Please tell me whether you personally rely on this type of person a lot, a fair amount, just some, or not too much.

		A LOT	A FAIR AMOUNT	JUST SOME	NOT TOO MUCH	NA (VOL)	DK	REF
a.	Friends	4	3	2	1	0	-1	-2
b.	Parents or guardians	4	3	2	1	0	-1	-2
c.	A girlfriend or boyfriend	4	3	2	1	0	-1	-2
d.	Brothers or sisters	4	3	2	1	0	-1	-2
e.	A priest, minister, or rabbi	4	3	2	1	0	-1	-2
IF NOT IN SECONDARY SCHOOL (P2b NE 1), GO TO CHECKPOINT BEFORE U10h.								
f.	Guidance counselors	4	3	2	1	0	-1	-2
g.	Teachers	4	3	2	1	0	-1	-2
IF NOT EMPLOYED (NEITHER T3a NOR T7a = 1), GO TO U10j.								
h.	Coworkers (IF ASKED, WE MEAN FRIENDS AT WORK)	4	3	2	1	0	-1	-2
i.	Your boss or supervisor	4	3	2	1	0	-1	-2
j.	Some other adult	4	3	2	1	0	-1	-2

## V. YOUTH BELIEFS AND EXPECTATIONS

CHECKPOINT. IF INTERVIEW IS WAVE 3 THROUGH GO TO V2.

V1. People have a variety of strengths and interests. How good would you say you are at...  
 READ FIRST ITEM. Would you say very good, pretty good, not very good, or not good at all? CODE ONE RESPONSE. READ REMAINING ITEMS, CODING ONE RESPONSE FOR EACH ITEM.

		VERY GOOD	PRETTY GOOD	NOT VERY GOOD	NOT GOOD AT ALL	DK	REF
a.	Being well organized	4	3	2	1	-1	-2
b.	A performing art, like music, theater, or dance	4	3	2	1	-1	-2
c.	A creative art, like drawing or writing poetry	4	3	2	1	-1	-2
d.	Being sensitive to other people's feelings	4	3	2	1	-1	-2
e.	A mechanical skill, like building or fixing things	4	3	2	1	-1	-2
f.	Using the computer	4	3	2	1	-1	-2
g.	A physical or athletic activity	4	3	2	1	-1	-2
h.	Having a sense of humor	4	3	2	1	-1	-2

AHW1

V2. **During the last week**, how often did you feel ....? READ FIRST ITEM. Would you say never or rarely, sometimes, a lot of the time, or most or all of the time? CODE ONE RESPONSE. READ REMAINING ITEMS. CODE ONE RESPONSE FOR EACH ITEM.

		NEVER OR RARELY	SOME-TIMES	A LOT OF THE TIME	MOST OR ALL OF THE TIME	DK	REF
a.	That you enjoyed life.	1	2	3	4	-1	-2
b.	Depressed.	1	2	3	4	-1	-2
c.	That people disliked you.	1	2	3	4	-1	-2
d.	Hopeful about the future.	1	2	3	4	-1	-2
e.	Lonely.	1	2	3	4	-1	-2

SHELLa-d/QOLe-h

V3. Please tell me how much each of the following it is like you. READ FIRST ITEM. Would you say this is not at all like you, somewhat like you, or very much like you?

		NOT AT ALL LIKE YOU	A LITTLE LIKE YOU	VERY MUCH LIKE YOU	DK	REF
a.	You am proud of who you are.	1	2	3	-1	-2
b.	You are a nice person.	1	2	3	-1	-2
c.	You can make friends easily.	1	2	3	-1	-2
d.	You can tell other people your age how you feel when they upset you or hurt your feelings.	1	2	3	-1	-2
e.	You feel useful and important.	1	2	3	-1	-2
f.	You feel your life is full of interesting things to do.	1	2	3	-1	-2
g.	You can handle most things that come your way.	1	2	3	-1	-2
h.	You know how to get the information you need.	1	2	3	-1	-2
l	You can get school staff and other adults to listen to you.	1	2	3	-1	-2

AHW1

V4. My next questions are about the support you get from people around you. How much do you feel that... READ FIRST ITEM. Would you say not at all, very little, some, quite a bit, or very much? CODE RESPONSE, READ REMAINING ITEMS. CODE ONE RESPONSE PER ITEM. CODE "0" IF HAS NO PARENTS, NO FRIENDS, OR NO FAMILY.

		NOT AT ALL	VERY LITTLE	SOME	QUITE A BIT	VERY MUCH	NA	DK	REF
a.	Adults care about you.	1	2	3	4	5		-1	-2
b.	Your parents care about you.	1	2	3	4	5	0	-1	-2
c.	Your friends care about you.	1	2	3	4	5	0	-1	-2
d.	Your family pays attention to you.	1	2	3	4	5	0	-1	-2

YRBS, AHW1

V5. Do you usually feel safe in your neighborhood?

Yes	1
No	2
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF INTERVIEW IS WAVE 3 AND YOUTH IS > 18, GO TO SECTION W.  
 IF INTERVIEW IS WAVE 4 OR 5, GO TO SECTION W.  
 IF GRADUATED FROM HIGH SCHOOL, AGED OUT, OR TESTED OUT [S1a = 1 OR 3 OR 6]  
 OR GOT A GED [S2C=1], GO TO CHECKPOINT BEFORE V7.

My next questions are about what you expect for your future.

NLTS, NHES 93 similar

- V6. How likely do you think it is that you will graduate from high school and get a regular high school diploma? Do you think you ... READ CATEGORIES. CODE ONE.  
IF ASKED, A REGULAR HIGH SCHOOL DIPLOMA INCLUDES A GED BUT DOES NOT INCLUDE A CERTIFICATE OF COMPLETION OR A SPECIAL DIPLOMA FOR STUDENTS IN SPECIAL EDUCATION.

	Definitely will,	1
	Probably will,	2
	Probably won't, or	3
	Definitely won't?	4
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF ATTENDED SCHOOL AFTER HIGH SCHOOL [S2a=1] OR DID IN PREVIOUS WAVE, GO TO CHECKPOINT BEFORE V8.

NHES 96

- V7. How likely do you think it is that you will go to school after high school? Do you think you ... READ CATEGORIES. CODE ONE. IF ASKED, CAN INCLUDE TECHNICAL OR TRADE SCHOOL.

	Definitely will,	1
	Probably will,	2
GO TO CHECKPOINT BEFORE V11	Probably won't, or	3
	Definitely won't?	4
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF HAS CERTIFICATE, DEGREE, OR LICENSE FROM A TECHNICAL, BUSINESS OR TRADE SCHOOL [S4o=1] GO TO CHECKPOINT BEFORE V9.

- V8. How likely do you think it is that you will get a license, certificate, or diploma from a technical, business, or trade school? Do you think you ... READ CATEGORIES. CODE ONE.

	Definitely will,	1
	Probably will,	2
	Probably won't, or	3
	Definitely won't?	4
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF HAS 2-YEAR COLLEGE DEGREE [S3q=1] GO TO CHECKPOINT BEFORE V10.

NLTS

V9. How likely do you think it is that you will graduate from a 2-year or junior college? Do you think you ... READ CATEGORIES. CODE ONE.

	Definitely will,	1
	Probably will,	2
	Probably won't, or	3
	Definitely won't?	4
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

NLTS, NHES 96, NHES 93

V10. How likely do you think it is that you will graduate from a 4-year college? Do you think you ... READ CATEGORIES. CODE ONE.

GO TO CHECKPOINT BEFORE V11	Definitely will,	1
	Probably will,	2
	Probably won't, or	3
	Definitely won't?	4
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF SAMPLE FILE INDICATED DISABILITY IS VISUAL IMPAIRMENT OR WAVE 1 PARENT INTERVIEW INDICATES B1a=09 (BLINDNESS) OR 43 (QUADRIPLÉGIA), GO TO V12a. IF HAS DRIVERS' LICENSE OR PERMIT [P15=1], GO TO W12a. ELSE ASK V11.

V11. How likely do you think it is that you will get a driver's license? Do you think you ... READ CATEGORIES. CODE ONE.

	Definitely will,	1
	Probably will,	2
	Probably won't, or	3
	Definitely won't?	4
DON'T READ	YOUTH ALREADY HAS DRIVER'S LICENSE	5
	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF PARENT PART 1 INDICATES YOUTH IS LIVING ON HIS/HER OWN, IN COLLEGE DORM, IN MILITARY HOUSING OR YOUTH HAS LIVED THERE IN PREVIOUS WAVE, GO TO V13. IF YOUTH HAS NOT LIVED ON HIS/HER OWN, IN COLLEGE DORM, IN MILITARY HOUSING OR YOUTH HAS LIVED THERE IN PREVIOUS WAVE, AND THERE IS NO PARENT PART 1, GO TO V12a.

NLTS

V12a. How likely do you think it is that you eventually will live away from home on your own **without** supervision? Do you think you ... READ CATEGORIES. CODE ONE.

GO TO V13	Definitely will,	1
	Probably will,	2
GO TO V12b	Probably won't, or	3
	Definitely won't?	4
DON'T READ	DON'T KNOW	-1
GO TO V12b	REFUSED	-2

V12b. How likely do you think it is that you eventually will live away from home on your own **with** supervision? Do you think you ... READ CATEGORIES. CODE ONE.

	Definitely will,	1
	Probably will,	2
	Probably won't, or	3
	Definitely won't?	4
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF HAS HAD A PAID JOB [T1c OR T2a OR T6a =1 ] OR DID IN ANY PREVIOUS WAVE, GO TO V14. ELSE GO TO V13.

NLTS

V13. How likely do you think it is that you eventually will get a paid job? Do you think you ... READ CATEGORIES. CODE ONE. IF ASKED: MEANS ANY PAID JOB, DOES NOT +NEED TO MAKE ENOUGH TO SUPPORT SELF.

	Definitely will,	1
	Probably will,	2
	Probably won't, or	3
	Definitely won't?	4
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

V14. How likely do you think it is that you eventually will earn enough to support yourself without financial help from your family or government benefit programs? Do you think you ... READ CATEGORIES. CODE ONE. IF ASKED: MEANS ANY PAID JOB, DOES NOT +NEED TO MAKE ENOUGH TO SUPPORT SELF.

	Definitely will,	1
	Probably will,	2
	Probably won't, or	3
	Definitely won't?	4
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

**W. HOUSEHOLD CHARACTERISTICS**

My next questions are about your household.

CHECKPOINT: IF YOUTH'S AGE IS <16, GO TO W2a. IF IN HIGH SCHOOL [P2B=2] GO TO W1B. ELSE, GO TO W1a.

W1a. Do you now have a partner or spouse living with you now?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

W1b. Are you ... READ CATEGORIES. CODE ALL THAT APPLY.

	Engaged;	1
	Single, never married,	2
	Married,	3
	In a marriage-like relationship,	4
	Divorced,	5
	Separated, or	6
	Widowed?	7
DO NOT READ	DON'T KNOW	-1
	REFUSED	-2

CHECKPOINT: IF W1a=1, GO TO W1c. ELSE GO TO W2a.

NLTS W1

W1c. Does your spouse or partner now have a paid job?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

W2a. In the past 2 years, have you [IF FEMALE: had] [IF MALE: fathered] any children?

	YES	1
	NO	2
GO TO W3	DON'T KNOW	-1
	REFUSED	-2

W2b. How many children have you [IF FEMALE: had] [IF MALE: fathered] in the past two years?

1	1
2	2
More than 2	3
DON'T KNOW	-1
REFUSED	-2

W2c. [IF W2b=1, Does this child] [IF W2b >1, Do any of these children] have a disability, developmental delay, or other special need?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF W2a NE 1 [HAS NO CHILDREN] OR LIVING WITH PARENT [P1a=1] GO TO CHECKPOINT BEFORE W4a. ELSE, GO TO W3a.

W3a. My next questions are about government benefits you may have received. Have you received money from TANF (Temporary Assistance to Needy Families) or the state welfare program any time in the past 2 years?

GO TO W3b	YES	1
	NO	2
GO TO W4a	DON'T KNOW	-1
	REFUSED	-2

W3b. Do you receive money from TANF (Temporary Assistance to Needy Families) or the state welfare program **now**?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF LIVES ALONE OR WITH SPOUSE OR ROOMMATE ON IN MILITARY HOUSING [P1a=2 OR 3 OR 8] GO TO W4a. ELSE, GO TO CHECKPOINT BEFORE W5a.

W4a. Did you receive Food Stamps any time in the past 2 years?

GO TO W4b	YES	1
	NO	2
GO TO W5a	DON'T KNOW	-1
	REFUSED	-2

W4b. Do you receive Food Stamps **now**?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF YOUTH HAS INSURANCE AS PART OF JOB [T8h(b) =1], GO TO W5C.  
 IF YOUTH IS 18 OR OLDER, LIVES ALONE OR WITH A SPOUSE OR ROOMMATE OR IN  
 MILITARY HOUSING [P1a = 2 OR 3 OR 8] GO TO W5a.  
 ELSE, GO TO CHECKPOINT BEFORE W6a.

W5a. Are you now covered by any private health insurance that you or a family member buys or gets as a benefit from a job?

GO TO W5c	YES	1
	NO	2
GO TO W5b	DON'T KNOW	-1
	REFUSED	-2

W5b. Are you covered by government-assisted or public health insurance, such as \_\_\_\_\_ (FILL IN STATE NAMES FOR MEDICAID AND OTHER LOW-INCOME INSURANCE PROGRAMS)?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

CHECKPOINT: IF W5a OR W5b =1 (HAS INSURANCE), ASK W5c. ELSE, GO TO W6a.

W5c. Is your health insurance with an HMO (Health Maintenance Organization)? IF ASKED, AT AN HMO YOU MUST GENERALLY RECEIVE CARE FROM HMO DOCTORS; OTHERWISE THE EXPENSE IS NOT COVERED UNLESS YOU WERE REFERRED BY THE HMO.

GO TO W5e	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

W5d. Is your health insurance coverage managed care?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

W5e. Does your health insurance cover any of the costs of ... READ CATEGORIES. CODE ONE RESPONSE FOR EACH.

		YES	NO	DON'T KNOW	REFUSED
a.	Dental care?	1	2	-1	-2
b.	Vision care?	1	2	-1	-2
c.	Prescription medicines?	1	2	-1	-2

CHECKPOINT: IF YOUTH IS MARRIED [X1b=3] AND LIVES WITH SPOUSE [W1a=1] GO TO W6b. ELSE, GO TO W6a.

NLTS, NHIS similar

W6a. Studies like these often group people according to income. Please tell me which group best describes your total income in the last tax year, including salaries or other earnings, money from public assistance, retirement, and so on, for all household members, before taxes. Was your income in the past year ...

GO TO W6c	\$25,000 or less, or	1
GO TO W6d	More than \$25,000?	2
DON'T READ, GO TO W12	DON'T KNOW	-1
	REFUSED	-2

W6b. In studies like these, households are sometimes grouped according to income. Please tell me which group best describes the total income of you and your spouse in the last tax year, including salaries or other earnings, money from public assistance, retirement, and so on, for all household members, before taxes. Was your household income in the past year ...

GO TO W6c	\$25,000 or less, or	1
GO TO W6d	More than \$25,000?	2
DON'T READ, GO TO W7	DON'T KNOW	-1
	REFUSED	-2

W6c. Was it... READ CATEGORIES. CODE ONE CATEGORY.

GO TO W7	\$5,000 or less,	1
	\$5,001 to \$10,000,	3
	\$10,001 to \$15,000,	3
	\$15,001 to \$20,000, or	4
	\$20,001 to \$25,000?	5
DON'T READ GO TO W7	DON'T KNOW	-1
	REFUSED	-2

W6d. Was it ... READ CATEGORIES. CODE ONE CATEGORY.

GO TO W6e	\$50,000 or less, or	1
GO TO W6f	More than \$50,000?	2
DON'T READ, GO TO W7	DON'T KNOW	-1
	REFUSED	-2

W6e. Was it... READ CATEGORIES. CODE ONE CATEGORY.

GO TO W7	\$25,001 to \$30,000,	1
	\$30,001 to \$35,000,	2
	\$35,001 to \$40,000,	3
	\$40,001 to \$45,000, or	4
	\$45,001 to \$50,000?	5
DON'T READ GO TO W7	DON'T KNOW	-1
	REFUSED	-2

W6f. Was it ... READ CATEGORIES. CODE ONE CATEGORY.

	\$50,001 to \$55,000,	1
	\$55,001 to \$60,000,	2
	\$60,001 to \$65,000,	3
	\$65,001 to \$70,000,	4
	\$70,001 to \$75,000, or	5
	Over \$75,000?	6
DON'T READ	DON'T KNOW	-1
	REFUSED	-2

W7. My next question is about household transportation. How well does your available transportation get you where you need to go? Would you say it meets your needs ...  
READ CATEGORIES. CODE ONE.

	Very well,	1
	Well,	2
	Not so well, or	3
	Not at all well?	4
	DON'T READ	DON'T KNOW
	REFUSED	-2

CHECKPOINT: IF YOUTH LIVES WITH PARENT [P1a=1] GO TO SECTION X. ELSE GO TO W8.

W8. Has there been any time in the past 12 months that you didn't have phone service at home for more than a few days?

YES	1
NO	2
DON'T KNOW	-1
REFUSED	-2

### X. CLOSING

**CHECKPOINT: FOR WAVES 2 THROUGH 4, GO TO X1. WAVE 5, GO TO END.**

X1. We'll be eager to talk with you again in 2 years to see how you are doing then. We want to be sure we don't lose track of you. Do you have an e-mail address?

GO TO X2a	YES	1
GO TO	NO	2
CHECKPOINT	DON'T KNOW	-1
BEFORE X2b	REFUSED	-2

X2a. What is your e-mail address? ENTER E-MAIL ADDRESS OR CODE.

\_\_\_\_\_ EMAIL ADDRESS

DON'T KNOW	-1
REFUSED	-2

**CHECKPOINT: IF YOUTH LIVES WITH PARENT [W1a=1] AND PARENT ADDRESS IS IN FILE, GO TO X3. IF NO ADDRESS IN FILE, GO TO X2b.**

X2b. IF NO ADDRESS IN FILE OR IF ADDRESS IS NOT CORRECT: What is your address?

Address: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DON'T KNOW	-1
REFUSED	-2

X3. Could you please tell me the name of someone who is likely to know where you are if you move? RECORD NAME OR INDICATE REFUSAL: What is their address? RECORD ADDRESS. What is their phone number? RECORD PHONE NUMBER. What is their e-mail address? RECORD E-MAIL ADDRESS.

GO TO END	DON'T KNOW/IS NO ONE	-1
	REFUSED	-2

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

DON'T KNOW	-1
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Phone: \_\_\_\_\_

DON'T KNOW	-1
NOT APPLICABLE, NO PHONE	0

E-MAIL: \_\_\_\_\_

DON'T KNOW	-1
NOT APPLICABLE, NO E-MAIL	0

X4. What is this person's relationship to you?

MOTHER	1
ADOPTIVE MOTHER	2
STEPMOTHER	3
FOSTER MOTHER	4
LEGAL GUARDIAN	5
SISTER/STEPSISTER	6
AUNT	7
GRANDMOTHER	8
FATHER	9
ADOPTIVE FATHER	10
STEPFATHER	11
FOSTER FATHER	12
LEGAL GUARDIAN	13
BROTHER/STEPBROTHER	14
UNCLE	15
GRANDFATHER	16
COUSIN	17
FAMILY FRIEND/NEIGHBOR	18
OTHER (SPECIFY)	19
_____	

X5a. Is there someone else who also would know where you are if you move?

GO TO END	YES	1
	NO	2
	DON'T KNOW	-1
	REFUSED	-2

X5b. What is their name and address? RECORD NAME AND ADDRESS. What is their phone number? RECORD PHONE NUMBER. What is their email address? RECORD E-MAIL ADDRESS.

GO TO END	REFUSED	-2
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Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

DON'T KNOW	-1
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Phone: \_\_\_\_\_

DON'T KNOW	-1
NOT APPLICABLE, NO PHONE	0

E-MAIL: \_\_\_\_\_

DON'T KNOW	-1
NOT APPLICABLE, NO E-MAIL	0

X5c. What is this person's relationship to you ? CODE ONE.

MOTHER	1
ADOPTIVE MOTHER	2
STEPMOTHER	3
FOSTER MOTHER	4
LEGAL GUARDIAN	5
SISTER/STEP SISTER	6
AUNT	7
GRANDMOTHER	8
FATHER	9
ADOPTIVE FATHER	10
STEPFATHER	11
FOSTER FATHER	12
LEGAL GUARDIAN	13
BROTHER/STEP BROTHER	14
UNCLE	15
GRANDFATHER	16
COUSIN	17
FAMILY FRIEND/NEIGHBOR	18
OTHER (SPECIFY) _____	19

END: That's all my questions. Thank you very much for taking time to help us with this important study .