

## SUPPLEMENTAL QUESTIONNAIRE

### Additional contact information

Full name: \_\_\_\_\_ Date: \_\_\_\_\_

Email address: \_\_\_\_\_

Cell phone number: \_\_\_\_\_ Alternative number: \_\_\_\_\_

Please provide names and phone numbers for **3 family members** and **1 friend** in case something happens to your SIM or you change numbers. Please include the contact details of at least one parent or guardian.

Phone numbers	Name	Relationship to you
1)		Parent/Guardian, specify:
2)		
3)		
4)		Friend

### Work History (including SPES, family business, informal)

Please list the last four jobs that you had in the past or currently have, including as a SPES beneficiary. Include any work you did to earn money, which could include working for an employer, working for your family, day labor, buying and selling, farming, or fishing.

	Job 1	Job 2	Job 3	Job 4
Employer name (Company/LGU), if any				
Type of Employer	<input type="checkbox"/> Private company <input type="checkbox"/> Government/public service <input type="checkbox"/> Non-governmental organization (NGO) <input type="checkbox"/> Personal business <input type="checkbox"/> Farming for family <input type="checkbox"/> Family business (non-farming) <input type="checkbox"/> Farming/labor for others <input type="checkbox"/> Other, specify: _____	<input type="checkbox"/> Private company <input type="checkbox"/> Government/public service <input type="checkbox"/> Non-governmental organization (NGO) <input type="checkbox"/> Personal business <input type="checkbox"/> Farming for family <input type="checkbox"/> Family business (non-farming) <input type="checkbox"/> Farming/labor for others <input type="checkbox"/> Other, specify: _____	<input type="checkbox"/> Private company <input type="checkbox"/> Government/public service <input type="checkbox"/> Non-governmental organization (NGO) <input type="checkbox"/> Personal business <input type="checkbox"/> Farming for family <input type="checkbox"/> Family business (non-farming) <input type="checkbox"/> Farming/labor for others <input type="checkbox"/> Other, specify: _____	<input type="checkbox"/> Private company <input type="checkbox"/> Government/public service <input type="checkbox"/> Non-governmental organization (NGO) <input type="checkbox"/> Personal business <input type="checkbox"/> Farming for family <input type="checkbox"/> Family business (non-farming) <input type="checkbox"/> Farming/labor for others <input type="checkbox"/> Other, specify: _____
Position				
Around how many hours did you work per typical week?	hrs/week	hrs/week	hrs/week	hrs/week
How much did you usually earn per month?	Php	Php	Php	Php
Start date (MM/YY)	____/____	____/____	____/____	____/____
End date (MM/YY, or write "N/A" if currently working)	____/____	____/____	____/____	____/____
Were you a SPES beneficiary?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please rank your TOP THREE motivations in applying for SPES by writing the number on the line. (1-most important, 2-second most important, 3-third most important)	____ To help support family ____ To save for the future	____ To pay tuition fees/schooling expenses ____ To buy personal effects ____ To pay for extra-curricular activities	____ To gain work experience/build up a résumé ____ To make connections that could lead to future employment	____ Other, specify: _____ _____
What is the level of education/training that you plan to enroll in <b>next academic year</b> ?	<input type="checkbox"/> High school	<input type="checkbox"/> Vocational education	<input type="checkbox"/> University/college	<input type="checkbox"/> Other, specify: _____
What is the highest level of education/training you expect to complete?	<input type="checkbox"/> High school	<input type="checkbox"/> Vocational education	<input type="checkbox"/> University/college	<input type="checkbox"/> Other, specify: _____

Expected graduation date (from the education level that you plan to enroll in next academic year): _____/_____/____ (MM/YY)	<b>If you are selected to be a SPES beneficiary, what is the chance that you will graduate?</b> <div> <input type="checkbox"/> 100%   <input type="checkbox"/> 50%  <input type="checkbox"/> 90%   <input type="checkbox"/> 40%  <input type="checkbox"/> 80%   <input type="checkbox"/> 30%  <input type="checkbox"/> 70%   <input type="checkbox"/> 20%  <input type="checkbox"/> 60%   <input type="checkbox"/> 10% or less </div>		<b>If you are NOT selected to be a SPES beneficiary, what is the chance that you will graduate?</b> <div> <input type="checkbox"/> 100%   <input type="checkbox"/> 50%  <input type="checkbox"/> 90%   <input type="checkbox"/> 40%  <input type="checkbox"/> 80%   <input type="checkbox"/> 30%  <input type="checkbox"/> 70%   <input type="checkbox"/> 20%  <input type="checkbox"/> 60%   <input type="checkbox"/> 10% or less </div>	
Expected tuition fees for next academic year:	Php	Other education expenses (transport, books/learning materials, stationery, etc.) for next academic year:	Php	
How do you plan to fund your education for the next academic year? (Check <b>3 answers</b> that are most applicable)	<input type="checkbox"/> Family contribution <input type="checkbox"/> Personal savings <input type="checkbox"/> Working during studies <input type="checkbox"/> SPES earnings, if accepted	<input type="checkbox"/> Loans from friends, acquaintances, relatives <input type="checkbox"/> Loans from five/six, moneylenders, etc.	<input type="checkbox"/> Loans from bank, educational institutions, MFIs, foundations, etc. <input type="checkbox"/> Other, specify: _____	
What is your plan after finishing your education/training program?	<input type="checkbox"/> Look for a job <input type="checkbox"/> Stay at home	<input type="checkbox"/> Immediately go for further education/training <input type="checkbox"/> Do not know	<input type="checkbox"/> Other, specify: _____	
Where do you plan to look for a job?	<input type="checkbox"/> Within barangay/municipality <input type="checkbox"/> Provincial capital	<input type="checkbox"/> Metro Manila <input type="checkbox"/> A major city (Cebu or Davao) <input type="checkbox"/> Abroad <input type="checkbox"/> No preference	<input type="checkbox"/> Other, specify: _____	
At the first job after graduation, how much do you expect to earn per day?	Php      per day	What is the lowest amount of money you would accept per day of work?	Php      per day	
How likely do you think you would be employed <b>within 6 months after graduation?</b>	<input type="checkbox"/> Extremely likely <input type="checkbox"/> Likely <input type="checkbox"/> Neutral <input type="checkbox"/> Unlikely <input type="checkbox"/> Extremely unlikely			
<b>How much do you think each of the following will affect your job search?</b>				
Not enough education	<input type="checkbox"/> Very much	<input type="checkbox"/> Much	<input type="checkbox"/> Somewhat	<input type="checkbox"/> A little <input type="checkbox"/> Not at all
No or limited previous work experience	<input type="checkbox"/> Very much	<input type="checkbox"/> Much	<input type="checkbox"/> Somewhat	<input type="checkbox"/> A little <input type="checkbox"/> Not at all
Few jobs available	<input type="checkbox"/> Very much	<input type="checkbox"/> Much	<input type="checkbox"/> Somewhat	<input type="checkbox"/> A little <input type="checkbox"/> Not at all
Difficult application procedures	<input type="checkbox"/> Very much	<input type="checkbox"/> Much	<input type="checkbox"/> Somewhat	<input type="checkbox"/> A little <input type="checkbox"/> Not at all
No or few relevant contacts at employers	<input type="checkbox"/> Very much	<input type="checkbox"/> Much	<input type="checkbox"/> Somewhat	<input type="checkbox"/> A little <input type="checkbox"/> Not at all
Discrimination (gender, disability, religion, race, appearance, etc.)	<input type="checkbox"/> Very much	<input type="checkbox"/> Much	<input type="checkbox"/> Somewhat	<input type="checkbox"/> A little <input type="checkbox"/> Not at all
<b>How much do you think each of the following will affect your ability to finish your education?</b>				
Cannot pay for school tuition and fees	<input type="checkbox"/> Very much	<input type="checkbox"/> Much	<input type="checkbox"/> Somewhat	<input type="checkbox"/> A little <input type="checkbox"/> Not at all
Need to care for home and family members	<input type="checkbox"/> Very much	<input type="checkbox"/> Much	<input type="checkbox"/> Somewhat	<input type="checkbox"/> A little <input type="checkbox"/> Not at all
Need to care for your own child/children	<input type="checkbox"/> Very much	<input type="checkbox"/> Much	<input type="checkbox"/> Somewhat	<input type="checkbox"/> A little <input type="checkbox"/> Not at all
Hard to commute to school	<input type="checkbox"/> Very much	<input type="checkbox"/> Much	<input type="checkbox"/> Somewhat	<input type="checkbox"/> A little <input type="checkbox"/> Not at all
Hard to pass courses/won't meet requirements to graduate	<input type="checkbox"/> Very much	<input type="checkbox"/> Much	<input type="checkbox"/> Somewhat	<input type="checkbox"/> A little <input type="checkbox"/> Not at all
<b>Choose the answer that best describes you</b>				
I am always on time and conscious about my deadlines and manage my timetable for work.	<input type="checkbox"/> All the time	<input type="checkbox"/> Most of the time	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Seldom <input type="checkbox"/> Never
I communicate and express my concerns related to work with my supervisor to get his or her opinion or advice.	<input type="checkbox"/> All the time	<input type="checkbox"/> Most of the time	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Seldom <input type="checkbox"/> Never
I listen attentively to other people and try not to interrupt them while talking.	<input type="checkbox"/> All the time	<input type="checkbox"/> Most of the time	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Seldom <input type="checkbox"/> Never
I always budget my allowance (or salary) and prioritize so I can buy things that I need rather than things that I want.	<input type="checkbox"/> All the time	<input type="checkbox"/> Most of the time	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Seldom <input type="checkbox"/> Never
I always try to save my extra money for emergencies or give it to my parents/family.	<input type="checkbox"/> All the time	<input type="checkbox"/> Most of the time	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Seldom <input type="checkbox"/> Never
I make sure that my clothes suit the occasion that I am going to or attending.	<input type="checkbox"/> All the time	<input type="checkbox"/> Most of the time	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Seldom <input type="checkbox"/> Never
I feel determined to finish my studies and immediately look for work.	<input type="checkbox"/> All the time	<input type="checkbox"/> Most of the time	<input type="checkbox"/> Sometimes	<input type="checkbox"/> Seldom <input type="checkbox"/> Never