

**Florida Atlantic University  
Masters Degree in  
Exceptional Student Education  
Exit Survey**

**Thank you for your willingness to share some information about your experience in the Department of Exceptional Student Education Department (DESE) at Florida Atlantic University (FAU). The purpose of this survey is to inquire about experiences while attending FAU in the DESE. We would like to ask some questions about what you did during the program and a bit about what you are doing now.**

**Completion of the survey is voluntary and should take no more than about 10 minutes to complete. You may skip any question you wish and you are free to withdraw from the study at any time without penalty.**

**The risks involved with participating in this study are no more than one would experience in regular daily activities. You may feel a bit uncomfortable about answering some of the questions, but again participation is voluntary and your answers have no bearing on past, present, or future participation in the DESE. We do plan to use your answers as well as others to gain a better understanding of how well we have served students and will also share this information in professional conferences and scholarly publications.**

**If you experience problems or have questions regarding your rights as a research subject, contact the Florida Atlantic University Division of Research at (561) 297-0777. For other questions about the study, you should call the co-principal investigator: Charles Dukes at (561) 297-1081. By clicking “Yes” below, you are giving consent to participate in this study.**

**Do you consent to participate in this study?**

- ☐ Yes, I consent to participate in this study.
- ☐ No, I do not consent to participate in this study.

## Program Experiences:

**How many years did it take you to complete your degree?**

- |   |    |
|---|----|
|  | 3  |
|  | 4  |
|  | 5  |
|  | 6  |
|  | 7  |
|  | 7+ |

**How would you rate the time it took to finish your degree?**

- ☐ Longer than expected
- ☐ About what I expected
- ☐ Less than what I expected

**What barrier(s) , if any, prevented you from completing your degree in the time frame that you anticipated?**

**Were you typically enrolled:**

- ☐ Full time
- ☐ Part time

**Rate your satisfaction of the following:**

[illegible]

**Rate the following statements:**

[illegible]

**During your program, on average, how many times did you do each of the following:**

	0	1-2	3-4	5-6	6+
Met with a faculty member outside of class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discussed course selection and program requirements with faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Worked with faculty members on activities other than coursework (e.g., research projects, academic clubs, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Went to the writing center or attended a writing workshop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Met with a tutor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wrote a research paper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Took a writing intensive course (wrote at least 300 words over the course of the semester)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Took a reading intensive course (read more than 40 pages per week)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**During your program, on average, how many hours in a typical week did you spend doing each of the following:**

[illegible]

**If you worked on or off campus, was your job related to your field of study?**

- ☐ Yes
- ☐ No

**If you worked on or off campus did you use any of the money to pay any tuition costs?**

- ☐ Yes
- ☐ No

**Are you currently employed?**

- ☐ Yes
- ☐ No

**Do you plan to continue your current employment or seek new employment?**

- ☐ Continue current employment
- ☐ Seek new employment

**As a result of completing your degree, do you hope to attain?**

- ☐ Position within a public school
- ☐ Position within a private school
- ☐ Administrative position within a public school
- ☐ Administrative position within a private school
- ☐ Other

**What position do you hope to attain after completing your degree?**

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**What do you hope will be your primary responsibility in your job following graduation?**

- ☐ Teaching
- ☐ Research
- ☐ Administration
- ☐ Supervision
- ☐ Consultation
- ☐ Other

**What do you hope your primary responsibility will be?**

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**How do you think your program of study has prepared you for your career?**

- ☐ Very Well
- ☐ Adequately
- ☐ Somewhat Adequately
- ☐ Somewhat Inadequately
- ☐ Inadequately
- ☐ Poorly

**If you were to start your program of study over again, would you choose the same university?**

- ☐ Yes
- ☐ No

**Why would you choose another university to complete your degree?**

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**If you were to start your program of study over again, would you choose the same field of study?**

- ☐ Yes
- ☐ No

**Which field of study would you choose?**

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**Do you plan to pursue an additional degree after graduation?**

- ☐ Yes
- ☐ No
- ☐ Unsure

**Which degree do you anticipate pursuing?**

- ☐ Specialist
- ☐ Doctorate
- ☐ Other

**Which degree do you anticipate pursuing and in which field of study?**

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**Do you plan to pursue additional certification(s) or endorsement(s)?**

- ☐ Yes
- ☐ No
- ☐ Unsure

**In what areas do you plan to pursue additional certification(s) or endorsements?**

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**What were the strongest aspects of the program at FAU?**

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**What suggestions do you have to improve the program at FAU?**

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## **Background Information:**

**What is your gender?**

- ☐ Female
- ☐ Male

**What is your age in years at the time of graduation?**

- ☐ 22-25
- ☐ 26-30
- ☐ 31-35
- ☐ 36-40
- ☐ 41-45
- ☐ 46-50
- ☐ 51-55
- ☐ 56+

**Which of the following categories best describes your racial/ethnic group?**

- ☐ American Indian
- ☐ Alaska Native
- ☐ Asian
- ☐ Black/African-American
- ☐ Hispanic
- ☐ Pacific Islander
- ☐ White (Non-Hispanic)
- ☐ Other

**Was English the primary language spoken in your home when you were growing up?**

- ☐ Yes
- ☐ No

**How many languages do you speak?**

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ More than 5

**Would you be willing to participate in an alumni survey in the future?**

- ☐ Yes
- ☐ No

**Thank you for your willingness to participate in a future alumni survey. Provide a non-FAU email address which will be used to distribute the FAU Alumni Survey.**

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**Please click the submit button to exit this survey.**

**You must consent in order to take this survey. If you do consent please click the back button below and answer "yes" to the question on the previous screen. Otherwise, click submit to exit the survey website.**