



Student Success Questionnaire

YES		NO		COLLEGE READINESS SKILLS AND ABILITIES	
<input type="checkbox"/>	<input type="checkbox"/>	1.	Do you have a career goal?		
<input type="checkbox"/>	<input type="checkbox"/>	2.	Have you declared a major? If YES, what major? _____		
<input type="checkbox"/>	<input type="checkbox"/>	3.	Are you planning to transfer to a four year university?		
<input type="checkbox"/>	<input type="checkbox"/>	4.	Do you have an education plan?		
<input type="checkbox"/>	<input type="checkbox"/>	5.	Are you repeating this course?		
<input type="checkbox"/>	<input type="checkbox"/>	6.	Have you attended a new student orientation?		
<input type="checkbox"/>	<input type="checkbox"/>	7.	Have you taken a personal growth class?		
<input type="checkbox"/>	<input type="checkbox"/>	8.	Do you have trouble doing well on tests because you become nervous or anxious?		
<input type="checkbox"/>	<input type="checkbox"/>	9.	Do you need help with time management?		
<input type="checkbox"/>	<input type="checkbox"/>	10.	Is it easy for you to "ask for help" when you need help?		
<input type="checkbox"/>	<input type="checkbox"/>	11.	Do you need help with your reading skills?		
<input type="checkbox"/>	<input type="checkbox"/>	12.	Do you need help with your writing skills?		
<input type="checkbox"/>	<input type="checkbox"/>	13.	Do you need help with your math skills?		
<input type="checkbox"/>	<input type="checkbox"/>	14.	Do you need help with your computer skills?		
<input type="checkbox"/>	<input type="checkbox"/>	15.	Do you need to improve your verbal communication skills?		
<input type="checkbox"/>	<input type="checkbox"/>	16.	Do you need help with your study skills?		
<input type="checkbox"/>	<input type="checkbox"/>	17.	Is English your second language?		
<input type="checkbox"/>	<input type="checkbox"/>	18.	Do you need any other special learning services and/or support to be successful in your classes?		

YES		NO		BACKGROUND FACTORS AND LIFE EXPERIENCES	
<input type="checkbox"/>	<input type="checkbox"/>	19.	Are you the first in your family to attend college?		
<input type="checkbox"/>	<input type="checkbox"/>	20.	Are you a full-time student (12 or more units)?		
<input type="checkbox"/>	<input type="checkbox"/>	21.	Do you work more than 20 hours per week?		
<input type="checkbox"/>	<input type="checkbox"/>	22.	Do you have financial aid problems or don't know about financial aid?		
<input type="checkbox"/>	<input type="checkbox"/>	23.	Do you need help with books?		
<input type="checkbox"/>	<input type="checkbox"/>	24.	Do you need help with transportation?		
<input type="checkbox"/>	<input type="checkbox"/>	25.	Does your family situation conflict with your studies?		
<input type="checkbox"/>	<input type="checkbox"/>	26.	Do you need help with daycare for children?		

YES		NO		NONTRADITIONAL STUDENT SELF-CONCEPT	
<input type="checkbox"/>	<input type="checkbox"/>	27.	Do you consider yourself "a college student"?		
<input type="checkbox"/>	<input type="checkbox"/>	28.	Are you comfortable with other college students? (do you feel like you "fit in"?)		
<input type="checkbox"/>	<input type="checkbox"/>	29.	Do you understand the expectations of being a college student?		
<input type="checkbox"/>	<input type="checkbox"/>	30.	Do you understand how the "college system" works?		
<input type="checkbox"/>	<input type="checkbox"/>	31.	Are you aware of the "values and culture" of City College?		

OTHER FACTORS

Need help with other factors to succeed at City College? Please explain. Thank you.