Please help UCF better serve students and alumni by taking a few minutes to complete this brief, voluntary, survey of your plans after graduation. The information is completely confidential and will help us improve career-planning services and opportunities for UCF students and alumni. THANK YOU AND CONGRATULATIONS!

Using the pencil provided, please completely fill-in the oval corresponding to your response. EXAMPLE: ○ ○ ■ ○ ○

1. What degree(s) are you earning today? (Mark ALL THAT APPLY)
   ○ B.A. - Bachelor of Arts
   ○ B.S. - Bachelor of Science
   ○ M.B.A. - Master of Business Administration
   ○ M.Ed. - Master of Education
   ○ M.A. - Master of Arts
   ○ M.S. - Master of Science
   ○ Ph.D. - Doctorate
   ○ Specialist
   ○ Other

2. If you are earning a Master's Degree, did you do a thesis? ○ Yes ○ No ○ Not applicable

3. What is your primary major? (Select ONE from the list provided)

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>4</td>
<td>4</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>5</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>6</td>
<td>6</td>
<td>6</td>
<td>6</td>
</tr>
<tr>
<td>7</td>
<td>7</td>
<td>7</td>
<td>7</td>
</tr>
<tr>
<td>8</td>
<td>8</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td>9</td>
<td>9</td>
<td>9</td>
<td>9</td>
</tr>
</tbody>
</table>

4. Do you plan to continue your studies in Graduate or Professional (e.g., medical, law) School? [Mark ONE response]
   ○ No, I have no plans to attend graduate school, or to continue further in graduate studies
   ○ Yes, I plan to attend in the future, probably UCF
   ○ Yes, I plan to attend in the future, probably NOT UCF
   ○ Yes, I am currently applying or waiting for acceptance
   ○ Yes, I am currently considering offer(s) or have accepted an offer for admission
   4a. If you have accepted an offer for admission, where? School Name:
   City, State:
   4b. What amount of, if any, financial support (assistantship, fellowship, etc.) will you be receiving per semester? $ __________

5. Are you currently employed? [Mark ONE response]
   ○ No
   ○ Yes, part-time in an area related to my field of study
   ○ Yes, part-time in an area NOT related to my field of study
   ○ Yes, full-time in an area related to my field of study
   ○ Yes, full-time in an area NOT related to my field of study

6. Are you applying or do you plan to apply for work (a NEW job) in the near future? [Mark ALL THAT APPLY]
   ○ No
   ○ Yes, part-time in an area related to my field of study
   ○ Yes, part-time in an area NOT related to my field of study
   ○ Yes, full-time in an area related to my field of study
   ○ Yes, full-time in an area NOT related to my field of study

CONTINUE ON BACK

Survey Number:
7. Are you considering or have you accepted a job offer (for a NEW job)? [Mark ONE response]
   ☐ No
   ☐ Yes, part-time in an area related to my field of study
   ☐ Yes, part-time in an area NOT related to my field of study
   ☐ Yes, full-time in an area related to my field of study
   ☐ Yes, full-time in an area NOT related to my field of study

8. IF you plan to continue in your current job or have accepted an offer, where? Company Name: ______________________
   City, State: ______________________

9. IF you plan to continue in your current job or have accepted an offer, what is your annual salary?
   ☐ Under $20,000 a year ☐ $30,000 - $34,999 ☐ $45,000 - $49,999 ☐ $60,000 - $64,999
   ☐ $20,000 - $24,999 ☐ $35,000 - $39,999 ☐ $50,000 - $54,999 ☐ $65,000 - $69,999
   ☐ $25,000 - $29,999 ☐ $40,000 - $44,999 ☐ $55,000 - $59,999 ☐ $70,000 a year or more

10. If you are earning a B.A. or a B.S. degree today, what was your status when you first entered UCF?
    ☐ First-time in college (including with AP or Dual Enrollment credits)
    ☐ Undergraduate Transfer with A.A. or A.S.
    ☐ Undergraduate Transfer without A.A. or A.S.
    ☐ Other
    ☐ Not applicable

11. What is your gender?
    ☐ Male ☐ Female

12. Please indicate those racial or ethnic group(s) that apply to you. (MARK ALL THAT APPLY)
    ☐ White
    ☐ Hispanic or Latino
    ☐ Black or African-American
    ☐ Asian
    ☐ Native Hawaiian or Other Pacific Islander
    ☐ American Indian or Alaskan Native
    ☐ Other

13. PID:

    | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T | U | V | W | X | Y | Z |
    | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 