



Canadian University Survey Consortium  
 Consortium canadien de recherche sur les  
 étudiants universitaires

## 2023 Survey of Middle Years Students

This survey is being completed by middle years students at about 30 Canadian universities. We want to learn more about what our students think of their university experience and how they are developing as they move through their programs of study.

If you cannot finish the survey in one sitting, you can close it and return to it using the link in the email we sent you. You will be returned to the page you were on when you closed. All of your responses are confidential.

shading	description
No shading	Question only in the Middle Years survey
	Question in all 3 surveys
	Question in the First Year Survey and the Middle Years Survey
	Question in the Middle Years Survey and the Graduating Survey

### Academic history

- hist1 In what year did you begin your postsecondary studies? Year: \_\_\_\_\_
- hist2 In what year did you first enrol at <university name>? Year: \_\_\_\_\_
- hist3 Have you transferred to <university name> from another postsecondary institution?  
 Yes  No
- hist4 Please choose the letter grade that best reflects your overall average grade:  
 A (includes A+, A and A-)  
 B (includes B+, B and B-)  
 C (includes C+, C and C-)  
 D  
 F

Since starting your post-secondary education, have you ever interrupted your studies for one or more terms (not including inter-sessions, summer sessions or work terms)? Check all that apply.

- hist5  No
- hist6  Yes, due to illness
- hist7  Yes, for financial reasons
- hist8  Yes, to have/raise children
- hist9  Yes, required to withdraw by the university
- hist10  Yes, for employment
- hist11  Yes, for other family reasons
- hist12  Yes, to travel
- hist13  Yes, for other reasons (please specify):
- hist13txt \_\_\_\_\_

## Activities

Since last September how often have you ...		Never	Occasionally	Often	Very often
act1	attended campus social events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
act2	attended public lectures and guest speakers on campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
act3	attended campus cultural events (theatre, concerts, art exhibits, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
act4	participated in student government (excluding voting in student elections)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
act5	participated in student clubs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
act6	participated in on-campus student recreational and sports programs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
act7	attended home games of university athletic teams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
act8	participated in on-campus community service/ volunteer activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
act9	participated in off-campus community service/ volunteer activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
[If act8 or act9 <> "Never" branch to act10, otherwise branch to act11]					
act10	During an average week how many hours do you spend in community service/ volunteer activities? Hours: _____				

During an average week in the current term, about how many hours do you spend on the following academic activities?

- act11 In scheduled classes, labs, seminars and tutorials (hours per week): \_\_\_\_\_
- act12 Academic work outside of class time (hours per week): \_\_\_\_\_

## Employment

- work1 Excluding work related to a co-op program are you employed during the current academic term?
- Yes, off campus
  - Yes, on campus
  - Yes, both off campus and on campus
  - No, but I am looking for work
  - No, and I am not looking for work

[If work1= "Yes ..." branch to work2, otherwise branch to Professors section]

- work2 On average, how many hours per week are you employed in this work? \_\_\_\_\_
- work3 What impact has this employment had on your academic performance?
- Very negative
  - Somewhat negative
  - No impact
  - Somewhat positive
  - Very positive

## Professors

Please indicate your level of agreement with the following statements about your professors.

		Strongly disagree	Disagree	Agree	Strongly agree
	<b>Most of my professors ...</b>				
prof1	Are reasonably accessible outside of class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
prof2	Take a personal interest in my academic progress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
prof4	Encourage students to participate in class discussions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
prof5	Are well organized in their teaching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
prof6	Seem knowledgeable in their fields	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
prof7	Communicate well in their teaching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
prof8	Are intellectually stimulating in their teaching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
prof9	Provide useful feedback on my academic work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
prof10	Provide prompt feedback on my academic work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
prof12	Are consistent in their grading	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

		Strongly disagree	Disagree	Agree	Strongly agree	No basis for opinion
	<b>Most of my professors ...</b>					
prof13	Treat students the same regardless of gender	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
prof14	Treat students the same regardless of race	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
prof15	Look out for students' interests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Regardless of how well you think your professors did, which three statements do you think are the most important? prof18 \_\_\_\_\_ prof19 \_\_\_\_\_ prof20 \_\_\_\_\_

		Yes, all courses	Yes, most courses	Yes, some courses	No courses	Not applicable
prof16	Were you given the chance to evaluate the quality of teaching in your courses this past fall?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Considering all of your professors and courses, please indicate your level of agreement with the following statement.

		Strongly disagree	Disagree	Agree	Strongly agree
prof17	Generally, I am satisfied with the quality of teaching I have received	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Staff

Please indicate your level of agreement with the following statements.

		Strongly disagree	Disagree	Agree	Strongly agree	No basis for opinion
staff1	Most teaching assistants in my academic program are helpful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
staff2	Most university support staff (e.g., clerks, secretaries, etc.) are helpful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Inclusivity (optional module)

A person's identity may be comprised of many parts, such as gender, race or ethnicity, sexual orientation, disability/ impairment, or other aspects. When you think of your identity as a whole, to what extent do you feel comfortable being yourself in the following situations or environments?

		Not at all	Some	Quite a bit	Very much
incl1	Attending class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
incl2	Participating in class activities, e.g. discussions, group projects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
incl3	Interacting with instructors or professors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
incl4	Interacting with university staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
incl5	Interacting with students on campus who you don't know well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
incl6	Interacting with friends on campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
incl7	Participating in extracurricular activities, e.g. clubs, sports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
incl8	Attending campus social events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
incl9	Actively participating in campus social activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Growth and development

How much has your experience at <university name> contributed to your growth and development in the following areas?

		None	Very little	Some	Much	Very much
dvl1	Thinking logically and analytically	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl2	Mathematical skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl3	Dealing successfully with obstacles to achieve an objective	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl4	Thinking creatively to find ways to achieve an objective	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl5	Understanding abstract concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl6	Speaking to small groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl7	Speaking to a class or audience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl8	Writing clearly and correctly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl9	Reading to absorb information accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl10	Listening to others to absorb information accurately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl11	Ability to find and use information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl12	Second or third language skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl13	Skills for planning and completing projects	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl14	Effective study and learning skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl15	Working independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl16	Cooperative interaction in groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl17	Computer literacy skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl18	Persistence with difficult tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl19	Entrepreneurial skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl20	Skills and knowledge for employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl21	Ability to lead a group to achieve an objective	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl22	Knowledge of career options	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl23	Self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl24	Ability to evaluate your own strengths and weaknesses	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl25	Ability to interact with people from backgrounds different from your own	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl26	Appreciation of the arts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl27	Spirituality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl28	Time management skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl29	Moral and ethical judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
dvl30	Understanding Indigenous worldviews, experiences, issues, and peoples of Canada	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Regardless of how well you think your university did, which three do you think are the most important?

dvl1st \_\_\_\_\_ dvl2nd \_\_\_\_\_ dvl3rd \_\_\_\_\_

## Commitment to completion

Please indicate your level of agreement with the following statements.

		Strongly disagree	Disagree	Agree	Strongly agree	Don't know
cmt1	I have the financial resources to complete my program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt2	I had adequate information about my program from the university before I enrolled	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt3	I am in the right program for me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt4	Most of my courses are interesting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt5	My course load is manageable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt6	I normally go to all of my classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt7	I am willing to put a lot of effort into being successful at university	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt8	I can deal with stress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt9	I have good study habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt10	I plan to come back to this university next year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt11	I plan to transfer to another university next year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt12	I plan to go to college/CEGEP next year	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt13	I plan to complete my degree at this university	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
cmt14	A university degree is worth the cost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Expectations and experience

		Exceeded	Met	Fallen short
exp18	Has <university name> exceeded, met or fallen short of your expectations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## Overall evaluation

Please indicate your level of satisfaction with <university name> in the following areas.

		Very dissatisfied	Dissatisfied	Satisfied	Very satisfied
eval3	Concern shown by the university for you as an individual	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
eval9	Your decision to attend this university	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

eval14 How likely is it that you would recommend <university name> to a friend or family member?  
 0 Not at all likely  1  2  3  4  5  6  7  8  9  10 Extremely likely  
 [If eval14 =< 6 branch to eval14txt, otherwise branch to Goal development goal1]

eval14txt Please explain why you gave a rating of <EVAL14> out of 10 for recommending this university.

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## Goal development

- goal1** Have you chosen a major or discipline?  
 Yes  No

After you have completed your undergraduate studies do you intend to:

- goal3** Apply to a professional program (e.g., Medicine, Law, etc.)  
 Yes  No  Unsure

- goal4** Apply to graduate school  
 Yes  No  Unsure

- goal5** Which of the following best describes your career plans?  
 I have a specific career in mind  
 I have several possible careers in mind  
 I have some general ideas but I need to clarify them  
 I am unsure, but I want to develop a career plan  
 I am not thinking about a career at this stage of my studies

- goal6** How well do you know the career options your program or intended program could open for you?  
 Very well  Fairly well  Only a little  Not at all

Please indicate what steps, if any, you have taken to prepare for employment/ your career after graduation. Please choose all that apply.

- goal7**  Talked with professors about employment/ career  
**goal8**  Talked with parents/ family about employment/ career  
**goal9**  Talked with friends about employment/ career  
**goal10**  Created resume, CV, e-portfolio, or online profile (e.g. LinkedIn)  
**goal12**  Attended an employment fair  
**goal13**  Met with a career counsellor  
**goal14**  Worked in my chosen field of employment  
**goal15**  Volunteered in my chosen field of employment  
**goal16**  I have a career mentor  
**goal17**  None of the above

## Services

Please indicate which of the following services you have used since last September and how satisfied you are with the ones you have used.

		Satisfaction if service used					
		Used	Very				
			dissatisfied	Dissatisfied	Satisfied	Very Satisfied	
srv1	Services for Indigenous students	<input type="checkbox"/>	srv1sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv2	Services for international students	<input type="checkbox"/>	srv2sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv3	Services for students with disabilities	<input type="checkbox"/>	srv3sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv4	University libraries: physical books, magazines, stacks	<input type="checkbox"/>	srv4sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv5	University libraries: electronic resources	<input type="checkbox"/>	srv5sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv6	Employment services	<input type="checkbox"/>	srv6sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv7	Career counselling	<input type="checkbox"/>	srv7sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv8	Personal counselling	<input type="checkbox"/>	srv8sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv9	Academic advising	<input type="checkbox"/>	srv9sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv10	Tutoring	<input type="checkbox"/>	srv10sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv11	Study skills and learning supports	<input type="checkbox"/>	srv11sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv12	Writing skills	<input type="checkbox"/>	srv12sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv13	University residences	<input type="checkbox"/>	srv13sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv14	Advising for students who need financial aid	<input type="checkbox"/>	srv14sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv15	Financial aid	<input type="checkbox"/>	srv15sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv16	Athletic facilities	<input type="checkbox"/>	srv16sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv17	Other recreational facilities	<input type="checkbox"/>	srv17sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv18	University bookstores: physical stores	<input type="checkbox"/>	srv18sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv19	University bookstores: online inventory check, ordering, etc.	<input type="checkbox"/>	srv19sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv20	Campus medical services	<input type="checkbox"/>	srv20sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv21	Co-op offices and supports	<input type="checkbox"/>	srv21sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv22	Facilities for university-based social activities	<input type="checkbox"/>	srv22sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv23	Facilities for student associations	<input type="checkbox"/>	srv23sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv24	Computing services help desk	<input type="checkbox"/>	srv24sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv25	Food services	<input type="checkbox"/>	srv25sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
srv26	Parking	<input type="checkbox"/>	srv26at	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



## Finances

The following questions about credit cards are used to better understand the ways in which students help pay for and finance their education. The information collected is confidential.

**fin1** How many credit cards do you have?

- 0  1  2  3  4  5  6  7  8  9  10  11 or more  
 I prefer not to answer

[If fin1 = 0 branch to debt, otherwise fin2]

**fin2** Do you usually pay off the whole balance every month?  Yes  No

**fin3** What is the total unpaid balance on all of your cards? \$ \_\_\_\_\_  Don't know

## Debt

**debt** Have you acquired repayable debt to finance your university education? By repayable debt, we mean money you owe and have to pay back. We are interested in repayable debt that is directly helping to finance your university education, such as tuition, fees, books, but also might include basic living expenses that are incurred while attending university.

- Yes  No

[If debt = "Yes" branch to debt1, otherwise branch to the Income section]

Please enter the approximate amount of debt from each source, in Canadian dollars.

Repayable debt from government student loans: **debt1**  **debt1amt** \$ \_\_\_\_\_

Repayable debt from loans from financial institutions: **debt2**  **debt2amt** \$ \_\_\_\_\_

Repayable debt from loans from parents/family: **debt3**  **debt3amt** \$ \_\_\_\_\_

Repayable debt from other sources: **debt4**  **debt4amt** \$ \_\_\_\_\_

## Income

Thinking about the current academic year, please indicate which of the following sources of income you are using to help pay for your university education. For each source please provide the approximate amount in Canadian dollars you expect to receive for the current academic year.

Government loan or bursary **inc1**  **inc1amt** \$ \_\_\_\_\_

University scholarship, financial award, or bursary **inc2**  **inc2amt** \$ \_\_\_\_\_

Parents, family, or spouse **inc3**  **inc3amt** \$ \_\_\_\_\_

Loans from financial institution(s) **inc4**  **inc4amt** \$ \_\_\_\_\_

Co-op program, internship, etc. related to your program **inc5**  **inc5amt** \$ \_\_\_\_\_

Earnings from current employment on campus **inc6**  **inc6amt** \$ \_\_\_\_\_

Earnings from current employment off campus **inc7**  **inc7amt** \$ \_\_\_\_\_

Earnings from summer work **inc8**  **inc8amt** \$ \_\_\_\_\_

Investment income (bonds, dividends, interest, etc.) **inc9**  **inc9amt** \$ \_\_\_\_\_

Registered Education Savings Plan (RESP) **inc10**  **inc10amt** \$ \_\_\_\_\_

Other (please specify) **inc11**  **inc11amt** \$ \_\_\_\_\_

**inctxt**

## Living arrangements

- live1** Where are you currently living?
- In on-campus housing (university residence, dorm, etc.)
  - With parents, guardians or relatives
  - In rented off-campus housing shared with others
  - In rented off-campus housing on your own
  - In a home you own
- livetxt**  Other (please specify) \_\_\_\_\_

[If live1 <> "In on-campus housing" branch to live2, otherwise branch to live3]

- live2** Would you prefer to live in on-campus housing if you had the choice?
- Yes  No

- live3** What is your marital status?
- Single
  - Married or common law
  - In a relationship other than married or common law
  - I prefer not to answer

- live4** Do you have children?  Yes  No

[If live4 = "Yes" branch to live5, otherwise branch to Disabilities/ Impairments dis11]

**live5** How many up to age 5? \_\_\_\_\_

**live6** How many age 5 to 11? \_\_\_\_\_

**live7** How many 12 or older? \_\_\_\_\_

## Commuting

- comm1** At present, what method of transportation do you use most often to get to campus?
- Vehicle (alone)
  - Vehicle (with others or in a car pool)
  - Public transportation
  - Walk
  - Bicycle
- commtxt**  Other (please specify): \_\_\_\_\_
- Don't attend the campus

## Disabilities/ Impairments

Do you have any of the following disabilities/ impairments? Select all that apply.

dis11  I do not have a disability/ impairment

		How often are your daily activities limited by this disability/ impairment?		
		Sometimes	Often	Always
dis1	<input type="checkbox"/> Mobility/ Dexterity	disf1	<input type="checkbox"/>	<input type="checkbox"/>
dis2	<input type="checkbox"/> Hearing	disf2	<input type="checkbox"/>	<input type="checkbox"/>
dis3	<input type="checkbox"/> Speech	disf3	<input type="checkbox"/>	<input type="checkbox"/>
dis4	<input type="checkbox"/> Vision (e.g., blindness, low vision)	disf4	<input type="checkbox"/>	<input type="checkbox"/>
dis5	<input type="checkbox"/> Learning/ Memory (e.g., learning disability)	disf5	<input type="checkbox"/>	<input type="checkbox"/>
dis7	<input type="checkbox"/> Other physical disability	disf7	<input type="checkbox"/>	<input type="checkbox"/>
dis8	<input type="checkbox"/> Neurodivergence (e.g., autism spectrum, attention deficit disorder)	disf8	<input type="checkbox"/>	<input type="checkbox"/>
dis9	<input type="checkbox"/> Mental health condition	disf9	<input type="checkbox"/>	<input type="checkbox"/>
dis12	<input type="checkbox"/> Chronic conditions (e.g., Multiple Sclerosis, Crohn's, Autoimmune)	disf12	<input type="checkbox"/>	<input type="checkbox"/>
dis10	<input type="checkbox"/> Other (please specify)	disf10	<input type="checkbox"/>	<input type="checkbox"/>
distxt	_____			
dis13	<input type="checkbox"/> I prefer not to answer			

## Parental educational attainment

What is the highest level of education your parent(s)/guardian(s) have completed?

	meduc	peduc
	Parent/Guardian1	Parent/Guardian2
Less than high school	<input type="checkbox"/>	<input type="checkbox"/>
High school graduate	<input type="checkbox"/>	<input type="checkbox"/>
Some college, CEGEP or technical school (no certificate or diploma)	<input type="checkbox"/>	<input type="checkbox"/>
College, CEGEP or technical school graduate	<input type="checkbox"/>	<input type="checkbox"/>
Some university (no degree or diploma)	<input type="checkbox"/>	<input type="checkbox"/>
Undergraduate university degree (e.g. BA, BSc, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Professional degree (e.g. law, medicine, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
Graduate degree (e.g. Master's, PhD)	<input type="checkbox"/>	<input type="checkbox"/>
Other Parent/Guardian 1 (please specify) meductxt	_____	
Other Parent/Guardian 2 (please specify) peductxt		_____
Don't know/Not applicable	<input type="checkbox"/>	<input type="checkbox"/>

## Ethnicity

Are you ... (check all that apply)

- eth1  Indigenous person of Canada (e.g., status, non-status, Métis, Inuit)
- eth2  Arab (e.g., Saudi, Egyptian, etc.)
- eth3  Black
- eth4  Chinese
- eth5  Filipino
- eth6  Japanese
- eth7  Korean
- eth8  Latin American
- eth9  South Asian (e.g., East Indian, Pakistani, Sri Lankan, etc.)
- eth10  Southeast Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese, etc.)
- eth11  West Asian (e.g., Afghan, Iranian, etc.)
- eth12  White/ Caucasian
- eth13  Other (please specify)
- ethtxt \_\_\_\_\_
- eth14  I prefer not to answer

[If eth1 is checked branch to ab1, otherwise branch to Comments negativ]

Which of the following describes your Indigenous background? (check all that apply)

- ab1  First Nations status
- ab2  First Nations non-status
- ab3  Métis
- ab4  Inuit/ Inuk
- ab5  Other
- ab6  I prefer not to answer

## Gender identity (optional module)

Please select the gender identity/ identities with which you identify. Select all that apply.

- gendi1  Woman (includes cis woman, trans woman, and everyone else who identifies as a woman)
- gendi2  Man (includes cis man, trans man, and everyone else who identifies as a man)
- gendi3  Gender non-conforming
- gendi4  Non-binary
- gendi5  Agender
- gendi6  Questioning
- gendi7  Trans
- gendi8  Two Spirit
- gendi9  Another gender identity (please specify): \_\_\_\_\_
- gendi10  I prefer not to answer

## Sexual orientation (optional module)

Please select the sexual orientation(s) with which you identify. Select all that apply.

- sexo1  Asexual
- sexo2  Bisexual
- sexo3  Gay
- sexo4  Heterosexual/ straight
- sexo5  Lesbian
- sexo6  Pansexual
- sexo7  Queer
- sexo8  Questioning
- sexo9  Two Spirit
- sexo10  Another sexual orientation (please specify): \_\_\_\_\_
- sexo11  I prefer not to answer

## Comments

Please take this opportunity to comment fully about your overall university experience. Your remarks will provide valuable information to the institution.

**negativ** Looking back on your experiences as a student, what aspects of your experience at <university name> have been most negative? How could we have helped or done a better job?

Comments (specify) \_\_\_\_\_  Don't know

**positiv** Looking back on your experiences as a student, what aspects of your experience at <university name> have been most positive?

Comments (specify) \_\_\_\_\_  Don't know