

Ohio State University Graduate Student Survey Academic Year 2002-2003

with this important project.

On behalf of the **Ohio State University**, The Higher Education Data Sharing Consortium is soliciting your responses on several issues related to graduate education at **Ohio State**. This survey has been designed in a collaborative effort to assist **Ohio State** to learn more about the experiences of its graduate students. Your answers will be used by **Ohio State** to evaluate existing services and programs, to design new ones, and to advise current and future students. In all cases, all information on this survey will be kept confidential. The survey should take approximately 20 minutes to complete. Please remember to answer any supplemental questions provided by **Ohio State**. Thank you in advance for your help

| [. | Educational status |
|------------|---|
| Ι. | What is your current degree program? Bachelors/Master's Master's Ph.D. Master's/Ph.D. |
| 2. | In what department or field are you pursuing your degree? Please select a field from the list below ▼ |
| 3. | What was your age when you began this graduate program? Please select the range from the list below ▼ |
| 1. | What was your primary activity immediately prior to this program? Undergraduate student Graduate student Volunteer/Community Service Cared for a family Employed in a field related to that of current study Employed in a field unrelated to that of current study None of the above |
| 5. | What is your current status in your graduate program (CHECK ALL THAT APPLY): I am still taking courses I have completed coursework I have passed qualifying exams/paper I have had my dissertation/thesis proposal accepted I have defended my dissertation/thesis |
| 5. | What is your current official enrollment status: Full-time Part-time |
| 7. | What is your best estimate of how many years TOTAL it will take to obtain your degree, from the time you started your current program until you complete it? Please select the range from the list below Total it will take to obtain your degree, from the time you started your current program until you complete it? |
| 3.). | Name, and state or country, of your undergraduate institution: Institution name ▼ Input here if not found in list to left: Location ▼ Input here if not found in list to left: |
| I. | Academic Program |
| | Rate the following dimensions of <u>academic quality</u> . Very Excellent Good Good Fair Poor |
| l. 2. | Academic standards in my program Integration of current developments in my field |

| 8/16/2 | 017 HEDS | S Graduate Stu | dent Survey | | | |
|----------|--|----------------------|----------------|---------------------|-----------------------|-------------------|
| 3. 4. | Program space and facilities Overall program quality | 0 | 0 | 0 | | 0 |
| | Rate the following dimensions of the <u>intellectual environment</u> in | your graduate | program. | | | |
| | | | Very | | | _ |
| _ | | Excellent | Good | Good | Fair | Poor |
| 5. | The intellectual quality of the faculty | 0 | 0 | 0 | 0 | 0 |
| 6. 7. | The intellectual quality of your fellow graduate students The relationship between faculty and graduate students | 0 | 0 | 0 | 0 | 0 |
| 7. | The relationship between faculty and graduate students | | | \circ | | |
| | Rate the extent to which you agree or disagree with the following | statements cor | cerning your | graduate program | | Strongly |
| | | Agree | Agree | Ambivalent | Disagree | Disagree Disagree |
| 8. | Program activities foster a sense of intellectual | Agree | Agree | Ambivaient | Disagree | Disagree |
| 0. | community | | | | 0 | |
| 9. | Program content supports my research or professional | | | | | |
| | goals | 0 | 0 | 0 | 0 | 0 |
| 10. | Program structure encourages student collaboration or | | | | | |
| | teamwork | | | | | |
| 11. | Program structure provides opportunities to take | | | | | |
| | coursework outside my own department | | | | | |
| 12. | Program structure provides opportunities to engage in | | | | | |
| | interdisciplinary work | | | | | |
| 13. | Amount of coursework required seems appropriate to | | | | | |
| | the degree | | | | | |
| | Detection (1997) 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | | .4. 4 | 1 IC 1 | | |
| | Rate the extent to which the following academic facilities and services in direct this | vices are adequ | ate to your ne | eeds. If you have r | not used the facility | or service, |
| | please indicate this. | More than | | | Vow | Did not |
| | | Adequate | Adequate | Inadequate | Very Inadequate | Use |
| 14. | Library facilities/buildings/space | | | | | Ose |
| 15. | Library hours | 0 | 0 | 0 | | |
| 16. | Library holdings | 0 | | | 0 | 0 |
| 17. | Other library services (interlibrary loan, databases, etc.) | 0 | | | | |
| 18. | Laboratory facilities | | | | | |
| 19. | On-campus computer facilities | | | | | |
| 20. | Ease of accessing on-campus computer facilities | | | | 0 | |
| 21. | Web-based campus computer services (e.g., for | | | | | |
| 21. | registration) | | | | | |
| 22. | Ease of accessing web-based campus computer | | | | | |
| | facilities from on campus | 0 | | 0 | 0 | 0 |
| 23. | Ease of accessing web-based campus computer | | | | | |
| | facilities from off campus | | 0 | 0 | 0 | 0 |
| 24. | Availability of help with campus computer facilities | | | | | |
| 25. | Services of the Office of Graduate affairs/studies/dean | | | | 0 | |
| 26. | Dissertation Office (if separate office) | | | | | |
| 27. | Registrar | Ö | Ö | Ö | Ö | Ö |
| | | | | | | |
| III. | Support for Professional Development | | | | | |
| A | Teaching experience | | | | | |
| 1. | Check here if you have held a teaching appointment while in g | raduate school | | | | |
| | If yes: (if NO then please skip to question 4) | | | | | |
| 2. | For how many quarters/semesters have you assisted in a faculty | V Planca cal | act the ennror | oriate value from t | ha list balany | |
| ۷. | member's course? | y Please ser | ect the approp | oriale value from t | ile list below 🔻 | |
| 3. | For how many quarters/semesters have you been the primary | Please sel | ect the annror | riate value from t | he list helow ▼ | |
| ٥. | course instructor yourself? | 1 lease ser | cet the approp | mate value mom t | ile list below • | |
| | course instructor yourself. | | | | | |
| 4. | Does your department or program provide training in teaching skill | ls? | O YES | O NO | NOT SURE | |
| | 2 oct your department of program provide training in teaching simi | | O IES | 0 110 | NOI SUKE | |
| | | | | | | Received |
| | | | Very | | | no |
| | | Excellent | • | Good | Fair Poor | Training |
| 5 | How useful have you found your training in basic teaching skills? | | 0000 | O | | |
| ٠. | (e.g., syllabus development, lecturing, leading discussions, creating | 2 | | 0 | | |
| | and/or grading assignments, writing examinations) | , | | | | |
| 6. | Check here if you have taught any courses that you developed | yourself. | | | | |
| -• | | <i>,</i> | | | | |
| | | Inc | reased | Made n | 0 D | ecreased |
| | | | interest | differen | | y interest |

| - - | TIEDO GIAGGIE | | | | |
|--|---|-------------------------|---|------------------|------------------------------------|
| 7. | How has your overall experience affected your interest in teaching? | | | | |
| B. 8. | Research experience Check here if you have conducted independent research since starting your graduate progratif yes: | am. (If no , go | to Part C) | | |
| 10. 11. 12. 13. 14. 15. | Do you feel you received adequate training before beginning your own research? Have you received adequate faculty guidance in formulating a research topic? Have you conducted your research in collaboration with one or more faculty members? Have you at any time received research funding from a faculty grant? Have you assisted in writing a grant proposal? Have you published one or more research papers as sole author? As co-author? Have you attended a professional conference? Have you presented a paper or poster session at a professional conference? | | Yes | No | Not applicable/ No opinion |
| C. | Career counseling and job search | | | | Not |
| 19. 20. | | | Yes | No O | applicable/ No opinion |
| IV | . Advising | | | | |
| 1 4 | . Auvising | | | | • • |
| | | Usually | Sometimes | Seldom/ never | Not applicable/No opinion |
| 1 | A. All graduate students | | | | |
| 2. 3. | Is information on degree requirements available? Is information on degree requirements clear? Are faculty and staff well-informed about degree requirements? Have you had input into the design of your individual program of study? | 0 | 0 | | 0 |
| | B. Doctoral students only | | | | |
| 6. 7. 8. 9. | Have you received adequate advice on preparing for oral examinations? Have you received adequate advice on preparing for written examinations? Have you received adequate advice on developing your thesis proposal? Was the process required to select a thesis advisor clear? Have you received adequate feedback on your research from your thesis advisor? Have you received adequate advice on the standards for academic writing in your field? Have you received adequate advice on how to avoid plagiarism and other violations of the | | 0 0 0 0 | | |
| 12. | standards of academic integrity? . Have you received adequate feedback on your thesis drafts? | | | | |
| | Have you received adequate advice on preparing for your final defense? | Ö | Ö | \circ | \circ |
| | | more times (at least | One to three times (at least once/month) | | Not applicable/ 1 No opinion |
| 1.4 | On average, how often per month do you meet or communicate with your thesis advisor about: | | | | • |
| 14. 15. | | 0 | 0 | | |
| V. | Student Life | | | | |
| | A. UNIVERSITY RESOURCES | | | | |
| | Please rate the following university resources based on the two scales provided: first, your level have experienced in using them. Please answer regarding your most recent year's experience in | | | | e quality you |

https://oaa.osu.edu/irp/2003gss.html

Usage Rare

Never

Frequent

N/A

Quality

Poor

Average

Excellent

| 1. 2. 3. 4. 5. | Health care services Health insurance Child care services Financial Aid Office Career and Placement | | | | | 0 | | 0 0 0 0 | 0 0 0 | 0 0 0 |
|----------------------------|---|--|--|------------|-------------|-------------------|---------------|--------------------------|----------------------|-------------------|
| 6. | Services Student Counseling & | 0 0 | | | | | | | | |
| 7. | Resource Center Bursar or student | 0 0 | | | | 0 | | | | \circ |
| 8. | accounts University | 0 0 | (| | | 0 | | | | |
| 9. | Police/Security Athletic Facilities | 0 0 | | | | 0 | | 0 | 0 | 0 |
| | Office of International Students | 0 0 | | | | 0 | | 0 | 0 | 0 |
| | Housing Assistance Student Activities Office | | - | | | 0 | | 0 | 0 | 0 |
| 13. | Ombudsperson's Office (if applicable) | 0 0 | | | | | | | | |
| 14. | Availability of parking for students | 0 0 | | | | | | | | |
| | Shuttle bus service Dining Services | | | | | 0 | | 0 | 0 | |
| | Bookstore | 0 0 | | | | 0 | | 0 | 0 | 0 |
| | B. QUALITY OF LIFE | | | | | | | | | |
| | Please indicate your level of sa | atisfaction with each | of the follow | ing. Cho | ose "Not A | applicable" w | when appropr | iate. | | |
| | | | | | | Very Satisfied | | Somewhat Dissatisfied | Very Dissatisfied | Not Applicable |
| 18. 19. 20. 21. | General Availability of child care Cost of child care Availability of transportati Graduate student office | on to campus | | | | | 0 | 0 | 0 | |
| | Social Activities How often do the following so | cial activities occur o | on campus, a | nd how o | often do yo | u attend then | n (mark one | in each colum | ın)? | |
| | G | | | | | ently occur? | | | n do you atte | nd them? |
| 23. | Organized university-wide soc Organized social activities with Organized social activities with group | hin your department | Frequence of the second | | Rarely | Never | | Frequently | Rarely | Never |
| | If your campus has a graduate If your campus does NOT | | | | nk one sho | uld be create | d (check if y | Frequently es)? | Rarely | Never |
| | Housing | _ | | | | | | | | |
| 27. | Availability of housing | | | | | Very Satisfied | | Somewhat Dissatisfied | Very Dissatisfied | Not Applicable |
| 28. | Cost of housing | | | | | \circ | \circ | \bigcirc | \bigcirc | |
| 29. | Which of these housing situation On-campus student housin On-campus student housin Off-campus housing owne Off-campus housing not o | g (no dorm responsible g (with dorm responsed by this university | oilities) sibilities) | IT resider | nce? | | | | | |
| | Safety How safe do you feel under ea | ch of the following c | ircumstances | s? | | | | | | |
| | said do you foot diffeot ou | or the following c | _ J | | | | Very | Reasonably | | Unage |
| 30. 31. 32. | Walking alone by day on c Walking alone at night on Walking alone by day off c | campus | | | | | Safe | Safe O | Unsafe O | Unsafe O |

HEDS Graduate Student Survey

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Please select the range from the list below... ▼

| 3. | ☐ Do you have dependent children (Check if yes)? | | | | | |
|-----|--|----------------------------------|-------------------|------------------|-----------------------|----------------------|
| 1 | If YES: | | | | | |
| 4. | number of dependent children: Please select the value from the list below ▼ | | | | | |
| | Ticuse select the value from the fist below | | | | | |
| 5. | Age of youngest child: | | | | | |
| _ | Please select the approximate value from the list l | oelow ▼ | | | | |
| 6. | Age of oldest child: | 1 | | | | |
| | Please select the approximate value from the list l | below ▼ | | | | |
| 7. | Your status: | | | | | |
| | single | | | | | |
| | marriedwith domestic partner | | | | | |
| | with domestic partier | | | | | |
| 8. | Does your partner/spouse live <u>full time</u> in the same | e residence as you (| Check if yes)? | | | |
| 9. | Citizenship status: | | | | | |
| | U.S. citizen | tizan of another cou | es terr : | | | |
| | U.S. permanent resident (green card holder) and ciCitizen of another country with a student visa or o | | | | | |
| 1.0 | 10 110 110 | | | | | |
| 10. | If you are a U.S. citizen or U.S. permanent resident, w American Indian/Alaska Native | hat is your ethnicity | (check all that | apply): | | |
| | Asian | | | | | |
| | Black/African American | | | | | |
| | Hispanic/Latino | | | | | |
| | Native Hawaiian/Other Pacific Islander | | | | | |
| | WhiteOther (specify) | | | | | |
| | Other (specify) | | | | | |
| | | | | | | |
| Op | otional Local Questions (institution-provided) | | | | | |
| 1. | Do you live in the University District? The University | District is defined a | s the area east o | of High Street t | to the railroad track | ks and 5th Avenue to |
| | Arcadia. | | | | | |
| | O Yes | | | | | |
| | ○ No | | | | | |
| 2. | How interested are you in having apartment-style grad | uate housing on can | nnus? | | | |
| ۷. | ○ Very interested ○ Interested | · · | ipus. | Not Intere | ested | |
| | 1110105100 | = 1111017 W. C. I. | | - 1100 1110 | | |
| 3. | How familiar are you with service-learning or commun | nity based research? | | | | |
| | ○ Very familiar ○ Somewhat familiar | Not at all far | niliar | | | |
| | | | | | | |
| НС | www.important.do.you believe it is to have the opportunity | to engage in the io. Very | nowing: | Not | | |
| | | Important | Important | Important | | |
| 4. | Departmental/University Service | | | | | |
| | Community Service | | | | | |
| | Interdisciplinary/multidisciplinary learning | | | | | |
| | Community Based Research | 0 | 0 | 0 | | |
| | Co-author papers with faculty Assist faculty in writing papers | | | | | |
| | Non-academic career exploration | | | | | |
| | | | | | | |
| Но | w satisfied are you with your opportunity to engage in | _ | | | | |
| | | Very | Ca4!afia J | A 4 | Diameticfied | Very |
| 11 | Departmental/University Service | Satisfied | Satisfied | Ambivalent | Dissatisfied | Dissatisfied |
| | . Community Service | | | | | |
| | . Interdisciplinary/multidisciplinary learning | 0 | 0 | | 0 | 0 |
| 14 | . Community Based Research | 0 | | | | |
| 15. | Co-author papers with faculty Assist faculty in writing papers | | | | | |
| | | | | | | |

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|---|--------------------------------|-----------------------|------------------------|-------------|----|--|--|--|--|--|
| 17. Non-academic caree | 0 | 0 0 | | | | | | | | |
| 18. How many papers h | ave you co-authored with a fac | culty member in your | department? | | | | | | | |
| O None | One | O Two | Three | Four or mor | re | | | | | |
| 19. How many papers have you assisted a faculty member with in your department? | | | | | | | | | | |
| O None | One | O Two | Three | Four or mor | re | | | | | |
| 20. The quality of classi | room instruction in your depar | tment has generally b | een: | | | | | | | |
| Excellent | Very Good | Good | Fair | O Poor | | | | | | |
| 21. The quality of classr | room instruction outside your | department has genera | ally been: | | | | | | | |
| Excellent | Very Good | Good | Fair | O Poor | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| Thank you for your assistance! | | | | | | | | | | |
| | | | | | | | | | | |
| - | | | | | | | | | | |

Reset

Submit