

Senior SA Exit Questions

Name: _____

1. How was your experience at the U...
 - a. Athletically-

 - b. Academically-

 - c. Socially-

2. Is there anything you wanted to do as a student at the U that you couldn't or didn't because you were a student-athlete?

3. How would you rate the support staff who worked directly with your team? Who was outstanding and who has opportunities for improvement?
 - a. MAC-
 - b. EQ-
 - c. Communications-
 - d. Athletic Training-
 - e. Physicians-
 - f. Operations-

4. Is there any support that you did not receive while you were here (academics, travel, equipment, etc.) that if you had would have benefited you and improved your experience?

5. As a department (collectively the program and administration) what do we need to change or continue to do to ensure we maintain the positive trajectory of the program/improve the program?

6. What do you appreciate most about each member of the coaching staff and what do you believe each one's greatest opportunity for improvement is?

a. HC

b. Asst.

c. Asst.

7. If you could do it all over again would you change anything?

8. Do you have any other thoughts, feedback or ideas you would like to share?

Senior SA Exit Questions

1. How was your experience at the U...
 - a. Athletically-
 - b. Academically-
 - c. Socially-
2. Is there anything you wanted to do as a student at the U that you couldn't or didn't because you were a student-athlete?
3. How would you rate the support staff who worked directly with your team? Who was outstanding and who has opportunities for improvement?
 - a. MAC-
 - b. EQ-
 - c. Communications-
 - d. Athletic Training-
 - e. Physicians-
 - f. Operations-
4. Is there any support that you did not receive while you were here (academics, travel, equipment, etc.) that if you had would have benefited you and improved your experience?
5. What do you appreciate most about each member of the coaching staff and what do you believe each one's greatest opportunity for improvement is?
6. As a department (collectively the program and administration) what do we need to change or continue to do to ensure we maintain the positive trajectory of the program/improve the program?
7. If you could do it all over again would you change anything?
8. Do you have any other thoughts, feedback or ideas you would like to share?



**Senior Student-Athlete Exit Interview
2018-2019**

Student-Athlete Information

Sport: _____ Gender: Select One

Did you receive an Athletic Scholarship from the University of Minnesota? Select One

What type of institution did you attend before U of M? Select One

Ethnicity

Please indicate if you are any of the following (check all that are applicable):

- American Indian
- Black/African American
- Hispanic
- Native Hawaiian/Pacific Islander
- Asian
- White
- International

Future Plans

Which best describes your future plans?

- Accepted to graduate school. School: _____ Program: _____
- Applied to graduate schools but have not been accepted yet.
- I have a job! Company: _____ Position: _____
- Looking for a job/internship.
- I have an internship! Company: _____ Position: _____
- I have no idea.
- Other (please specify) _____

Staff and Administrative Support Services

1. Based on your personal experiences at the University of Minnesota, how would you rate the quality of the following support services in terms of **commitment to your development** as an individual, a student, and an athlete?

Please check:	Excellent	Good	Average	Fair	Poor	N/A
Athletic Administration	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MAC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Athletic Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Compliance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sports Administrator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M Club	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sports Psychologists	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strength & Conditioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Student-Athlete Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments:

2. Please rate the following programs and events you experienced at University of Minnesota.

Please check:	Excellent	Good	Average	Fair	Poor	N/A
New Student-Athlete Orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hope Day Festival	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Team Banquets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Golden Goldys Awards Gala	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Beginning of Year Team Meetings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M.A.G.I.C. Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pro Day: Career & Internship Fair	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SAAC	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relationship Violence Education	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
M Club/Letter Winner Celebrations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional Comments:

Athletic Experience

Please rate the following according to your personal experience at University of Minnesota.

Please check:	Excellent	Good	Average	Fair	Poor	N/A
Your Overall Athletic Experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Your Overall Academic Experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Quality of the Head Coaching You Received	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The Quality of the Assistant Coaching You Received	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- To what extent did you achieve your ATHLETIC goals?
- Please rate the following areas about the COACHING STAFF:

Please check:	Excellent	Good	Average	Fair	Poor
Knowledge of Sport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teaching Methods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Motivate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Organization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recruiting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Values Sportsmanship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ethical Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interest in Student Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Comments about Coaching Staff:

- Please rate the following facilities:

Please check:	Excellent	Good	Average	Fair	Poor
Practice Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Playing Facility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Learning Center/Tutor Rooms	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Athletic Training Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Weight Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Equipment (Cage in Bierman)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Computer Lab	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Locker Room	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other Comments about Facilities:

Academic Experience/Student-Athlete Development

1. To what extent did you achieve your ACADEMIC goals?

Please explain:

2. Was your coaching staff supportive of your academic commitments?

Please explain:

3. Did Athletics staff support you along your academic success?

Please explain:

4. Did you feel integrated in the campus community?

Please explain:

5. Did you feel that Student-Athlete Development met your broader needs as a student-athlete?

Please explain:

6. Did you feel that the on-campus housing options met your needs as a student-athlete?

Please explain:

7. Did you feel that the U of M campus and community provided the services you needed?

Please explain:

8. Other comments about your experience:

Gender, Diversity & Inclusion

1. Did you witness or experience any sexual harassment of student-athletes at U of M?

If yes, please describe:

2. Did you witness or experience any gender discrimination in the athletic department or by coaches?

If yes, please describe:

3. Did you witness or experience any racial discrimination by any coach, staff member, or student-athlete?

If yes, please describe:

4. Do you feel that the issues of gender and ethnic diversity are appropriately addressed by the U of M?

If no, please describe shortcomings:

Closing Thoughts

How do you plan on staying involved with the University after graduation?

- Athletic Events
- Alumni Events
- Other Campus Functions

If you were being recruited today, would you choose U of M again?

If you could change one thing about your specific sports program within Golden Gopher Athletics, what would it be?

**Thank you for your time and commitment to the University of Minnesota!
Go Gophers!**

