

# University of Iowa End of Year Survey, 2018-2019

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Start of Block: Default Question Block

ID# *Each year student-athletes are encouraged to reflect on their athletic experiences at the University of Iowa. Below is a brief survey used to collect such information. Your feedback is intended to help the department improve the experiences of student-athletes and better understand the students, teams, and units within Iowa Athletics. Your personally identifiable information will be separated from your responses so that your identity is not revealed to senior athletic administration during the review of your responses. However, responses to certain questions may require that your identity be determined so that a senior athletic administrator can follow up with you if necessary. [If such follow up is necessary, it will be done in a manner that maintains your confidentiality to the extent possible.] The survey will take approximately 7 minutes to complete. Please respond to each item carefully. Thank you for completing the survey.*

**University ID #**

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## Q1 Demographic Data

### Ethnicity

- |                          |                                       |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Asian American (1)                    |
| <input type="checkbox"/> | African American (2)                  |
| <input type="checkbox"/> | Caucasian (3)                         |
| <input type="checkbox"/> | Native Hawaiian (4)                   |
| <input type="checkbox"/> | Hispanic/Latino (5)                   |
| <input type="checkbox"/> | Alaska Native or American Indian (6)  |
| <input type="checkbox"/> | International Student (7)             |
| <input type="checkbox"/> | Two or More Races (Specify Below) (8) |
- 
-

**Q2 Year in School (# of credit hours earned)**

- Freshman (0 - 30) (1)
  - Sophomore (31 - 60) (2)
  - Junior (61 - 90) (3)
  - Senior (91 - 120) (4)
  - Graduate Student/5th Year (5)
  - Other (Specify Below) (6) \_\_\_\_\_
- 

**Q3 Gender**

- Male (1)
  - Female (2)
- 

**Q4 Athletic Scholarship**

- Full (1)
  - Partial (2)
  - Not on scholarship (3)
-

**Q5 Sports Team**

- Men's Basketball (1)
  - Women's Basketball (2)
  - Men's Gymnastics (3)
  - Women's Gymnastics (4)
  - Men's Swimming and Diving (5)
  - Women's Swimming and Diving (6)
  - Wrestling (7)
  - Men's Track and Field (8)
  - Women's Track and Field (9)
  - Men's Tennis (10)
  - Women's Tennis (11)
  - Men's Golf (12)
  - Women's Golf (13)
  - Rowing (14)
  - Baseball (15)
  - Softball (16)
  - Soccer (17)
  - Field Hockey (18)
  - Football (19)
  - Men's Cross Country (20)
  - Women's Cross Country (21)
  - Volleyball (22)
  - Spirit Squad (23)
-

**Q6 Section 1: Health and Wellness** A. Counseling Services Staff (if applicable)

|                           | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|---------------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Professionalism (1)    |          |                   |             |               |               |                    |
| 2. Accessibility (2)      |          |                   |             |               |               |                    |
| 3. Promptness (3)         |          |                   |             |               |               |                    |
| 4. Effectiveness (4)      |          |                   |             |               |               |                    |
| 5. Overall experience (5) |          |                   |             |               |               |                    |

**Q7 B. Strength and Conditioning Staff**

|                           | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|---------------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Professionalism (1)    |          |                   |             |               |               |                    |
| 2. Accessibility (2)      |          |                   |             |               |               |                    |
| 3. Promptness (3)         |          |                   |             |               |               |                    |
| 4. Effectiveness (4)      |          |                   |             |               |               |                    |
| 5. Overall experience (5) |          |                   |             |               |               |                    |

Q8 C. Athletic Training Staff

|                           | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|---------------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Professionalism (1)    |          |                   |             |               |               |                    |
| 2. Accessibility (2)      |          |                   |             |               |               |                    |
| 3. Promptness (3)         |          |                   |             |               |               |                    |
| 4. Effectiveness (4)      |          |                   |             |               |               |                    |
| 5. Overall experience (5) |          |                   |             |               |               |                    |

Q10 D. Sports Medicine Staff

|                           | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|---------------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Professionalism (1)    |          |                   |             |               |               |                    |
| 2. Accessibility (2)      |          |                   |             |               |               |                    |
| 3. Promptness (3)         |          |                   |             |               |               |                    |
| 4. Effectiveness (4)      |          |                   |             |               |               |                    |
| 5. Overall experience (5) |          |                   |             |               |               |                    |

Q73 D. Nutrition Staff

|                           | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|---------------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Professionalism (1)    |          |                   |             |               |               |                    |
| 2. Accessibility (2)      |          |                   |             |               |               |                    |
| 3. Promptness (3)         |          |                   |             |               |               |                    |
| 4. Effectiveness (4)      |          |                   |             |               |               |                    |
| 5. Overall experience (5) |          |                   |             |               |               |                    |

Q11

E. Nutrition- Refueling Stations

|                       | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|-----------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| a. Food quality (1)   |          |                   |             |               |               |                    |
| b. Food selection (2) |          |                   |             |               |               |                    |
| c. Locations (3)      |          |                   |             |               |               |                    |

Q12 E. Nutrition - Travel Meals

|                       | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|-----------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| a. Food quality (1)   |          |                   |             |               |               |                    |
| b. Food selection (2) |          |                   |             |               |               |                    |
| c. Locations (3)      |          |                   |             |               |               |                    |

Q13 E. Nutrition - Training Table

|                       | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|-----------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| a. Food quality (1)   |          |                   |             |               |               |                    |
| b. Food selection (2) |          |                   |             |               |               |                    |
| c. Locations (3)      |          |                   |             |               |               |                    |

Q14 E. Nutrition - Additional Meals

|                       | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|-----------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| a. Food quality (1)   |          |                   |             |               |               |                    |
| b. Food selection (2) |          |                   |             |               |               |                    |
| c. Locations (3)      |          |                   |             |               |               |                    |

Q14 F. Nutrition Staff (if applicable)

|                        | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|------------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| Professionalism (1)    |          |                   |             |               |               |                    |
| Accessibility (2)      |          |                   |             |               |               |                    |
| Promptness (3)         |          |                   |             |               |               |                    |
| Effectiveness (4)      |          |                   |             |               |               |                    |
| Overall Experience (5) |          |                   |             |               |               |                    |

Q15 General Comments about Health and Wellness:

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Q16 **Section 2: Academic Services**

A. Staff

|                           | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|---------------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Hours of operation (1) |          |                   |             |               |               |                    |
| 2. Location (2)           |          |                   |             |               |               |                    |
| 3. Professionalism (3)    |          |                   |             |               |               |                    |
| 4. Accessibility (4)      |          |                   |             |               |               |                    |
| 5. Overall experience (5) |          |                   |             |               |               |                    |



Q17 B. Advising

|  | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|--|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Quality of advising (1)   |          |                   |             |               |               |                    |
| 2. Notification about advising and priority registration (2)                 |          |                   |             |               |               |                    |
| 3. Frequency of individual meetings with your Academic Coordinator (3)       |          |                   |             |               |               |                    |
| 4. Communication about your eligibility status (4)                           |          |                   |             |               |               |                    |
| 5. Communication about different majors on campus (5)                        |          |                   |             |               |               |                    |
| 6. Frequency of team meetings with your Academic Coordinator (6)             |          |                   |             |               |               |                    |
| 7. Communication about opportunities for campus involvement (7)              |          |                   |             |               |               |                    |
| 8. Communication about opportunities for athletic department programming (8) |          |                   |             |               |               |                    |
| 9. Overall experience (9)  |          |                   |             |               |               |                    |

Q18 C. Tutoring

|  | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|--|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Overall Effectiveness (1)                                     |          |                   |             |               |               |                    |
| 2. Effectiveness for exam preparation (2)                        |          |                   |             |               |               |                    |
| 3. Effectiveness for improving study skills and organization (3) |          |                   |             |               |               |                    |
| 4. Preparedness of the Tutor (4)                                 |          |                   |             |               |               |                    |
| 5. Tutoring environment (5)                                      |          |                   |             |               |               |                    |
| 6. Overall experience (6)  |          |                   |             |               |               |                    |

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Q19 D. Student Development Programs

|  | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|--|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Amount of student programming offered (1)                     |          |                   |             |               |               |                    |
| 2. Effectiveness of student programming for you (2)              |          |                   |             |               |               |                    |
| 3. Effectiveness of programs pertaining to career counseling (3) |          |                   |             |               |               |                    |
| 4. Communication about ISAAC by your team representatives (6)    |          |                   |             |               |               |                    |
| 5. Opportunity for community service engagement (7)              |          |                   |             |               |               |                    |

Q20 E. Student Recognition

|                                      | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Did Not Attend (6) |
|--------------------------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| Polk County Banquet (1)              |          |                   |             |               |               |                    |
| PCA Banquet (2)                      |          |                   |             |               |               |                    |
| Golden Herky Awards Program (3)      |          |                   |             |               |               |                    |
| Senior Graduation Reception (4)      |          |                   |             |               |               |                    |
| Day of Caring (5)                    |          |                   |             |               |               |                    |
| Student-Athlete Kickoff (6)          |          |                   |             |               |               |                    |
| New Student-Athlete Orientation (7)  |          |                   |             |               |               |                    |
| Multicultural Focus Group Events (8) |          |                   |             |               |               |                    |
| Fuel Up to Play 60 (9)               |          |                   |             |               |               |                    |
| Hawkeye Pride (10)                   |          |                   |             |               |               |                    |
| Hawkeye Health Care Program (11)     |          |                   |             |               |               |                    |
| Hawkeye P.A.C.E. Program (12)        |          |                   |             |               |               |                    |
| Networking Night at Carver (13)      |          |                   |             |               |               |                    |

Networking  
Night at  
Carver Prep  
Night (14)

Graduate  
and  
Professional  
School Fair  
(15)

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Q21 F. Academic Tools

|   | Poor Experience (1) | Excellent Experience (2) | Does Not Apply (3) |
|---|---------------------|--------------------------|--------------------|
| Book Distribution Process (if applicable) (2)                 |                     |                          |                    |
| Availability of Laptops/Computers/Tablets (if applicable) (3) |                     |                          |                    |
| Access to Software Systems (4)                                |                     |                          |                    |

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Q22 General Comments about Academic Services:

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**Q23 Section 3: Team**

|  | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|--|----------|-------------------|-------------|---------------|---------------|--------------------|
| A. Overall athletic experience (1)               |          |                   |             |               |               |                    |
| B. Rate the culture among the coaching staff (2) |          |                   |             |               |               |                    |

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Q24 Rank the list of expectations you have for your coaches in order of importance 1= most important 10 = least important

- \_\_\_\_\_ Respect (1)
  - \_\_\_\_\_ Honesty (2)
  - \_\_\_\_\_ Character (3)
  - \_\_\_\_\_ Organization (4)
  - \_\_\_\_\_ Support for student-athlete academic needs (5)
  - \_\_\_\_\_ Winning (6)
  - \_\_\_\_\_ Overall student well-being (7)
  - \_\_\_\_\_ Effective communication (8)
  - \_\_\_\_\_ Coaching instruction (10)
  - \_\_\_\_\_ Flexibility (11)
-

Q25 B. Head Coach

|   | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|---|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Support for your academic goals (1)                      |          |                   |             |               |               |                    |
| 2. Support for your athletic goals (2)                      |          |                   |             |               |               |                    |
| 3. Sensitivity to student time demands (3)                  |          |                   |             |               |               |                    |
| 4. Accessible to student-athletes (4)                       |          |                   |             |               |               |                    |
| 5. Effectiveness when addressing team concerns (5)          |          |                   |             |               |               |                    |
| 6. Support of your declared major (6)                       |          |                   |             |               |               |                    |
| 7. Attempt to accommodate class conflicts with practice (7) |          |                   |             |               |               |                    |
| 8. Communication style with your team (8)                   |          |                   |             |               |               |                    |

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Q26 9. Are you comfortable approaching your coach if you had a personal concern?

- YES (1)
- NO (2)

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Q27 10. Would you approach your coach if you had a concern related to your team?

- YES (1)
- NO (2)



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Q28 C. If applicable position/event/assistant coach(s)

|   | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|---|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Support for your academic goals (1)                      |          |                   |             |               |               |                    |
| 2. Support for your athletic goals (2)                      |          |                   |             |               |               |                    |
| 3. Sensitivity to student time demands (3)                  |          |                   |             |               |               |                    |
| 4. Accessible to student-athletes (4)                       |          |                   |             |               |               |                    |
| 5. Effectiveness when addressing team concerns (5)          |          |                   |             |               |               |                    |
| 6. Support of your declared major (6)                       |          |                   |             |               |               |                    |
| 7. Attempt to accommodate class conflicts with practice (7) |          |                   |             |               |               |                    |
| 8. Communication style with your team (8)                   |          |                   |             |               |               |                    |

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Q29 9. Are you comfortable approaching your position/event/assistant coach(s) if you had a concern?

- YES (1)
  - NO (2)
-

Q30 10. Would you approach your position/event/assistant coach(s) if you had a concern related to your team?

- YES (1)
- NO (2)

Q31 D. Scheduling

|  | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|--|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1.<br>Conduciveness of practice time with class schedule (1)   |          |                   |             |               |               |                    |
| 2.<br>Conduciveness of travel schedule with class schedule (2) |          |                   |             |               |               |                    |

Q32 E. Equipment Room

|                                 | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|---------------------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Overall experience (1)       |          |                   |             |               |               |                    |
| 2. Professionalism of staff (2) |          |                   |             |               |               |                    |
| 3. Condition of equipment (3)   |          |                   |             |               |               |                    |

Q33 F. Practice

|                                      | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|--------------------------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Organization of practice time (1) |          |                   |             |               |               |                    |
| 2. Efficiency (2)                    |          |                   |             |               |               |                    |

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Q34 G. Teammates

|                                   | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|-----------------------------------|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Support shown by teammates (1) |          |                   |             |               |               |                    |
| 2. Interaction with teammates (2) |          |                   |             |               |               |                    |

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Q35

H. Treatment

1. Have you witnessed or been subject to bullying or hazing on your team?

YES (1)

NO (2)

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Q36 2. Have you witnessed or been subject to bullying or hazing by any member of the coaching staff?

YES (1)

NO (2)

Q37 I. Team Policies

|  | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|--|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1.<br>Communication about team policies and expectations (1) |          |                   |             |               |               |                    |

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Q38 General Comments about your Team:

\_\_\_\_\_

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**Q39 Section 4: Athletic Department**

The following questions examine the culture within Iowa Athletics. Your answers describe your experiences and interactions with department personnel as well as your understanding of departmental policies, values and principles.

A. Sports Administrator (Select your Administrator from list)

- Basketball (M) (Marcus Wilson) (2)
  - Gymnastics (M/W) (Marcus Wilson) (1)
  - Swimming (M/W) (Marcus Wilson) (8)
  - Wrestling (Barbara Burke) (19)
  - Cross Country/Track and Field (M/W) (Matt Henderson) (20)
  - Tennis (M/W) (Barbara Burke) (21)
  - Golf (M/W) (Marcus Wilson) (22)
  - Rowing (Marcus Wilson) (23)
  - Baseball (Marcus Wilson) (24)
  - Softball (Barbara Burke) (25)
  - Soccer (Marcus Wilson) (26)
  - Football (Barbara Burke) (27)
  - Volleyball (Barbara Burke) (28)
  - Field Hockey (Barbara Burke) (29)
  - Spirit Squad (Josh Berka) (30)
  - Basketball (W) (Barbara Burke) (32)
-

Q40 B. Administration

|  | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|--|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Interaction with Sports Administrator (1)         |          |                   |             |               |               |                    |
| 2. Accessibility of Sports Administrator (2)         |          |                   |             |               |               |                    |
| 3. Athletic Administration support for your team (3) |          |                   |             |               |               |                    |

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Q41 C. Hazing / Bullying Have you witnessed or experienced hazing or bullying by a member of the athletics department?(If yes, describe below)

- YES (1)
- NO (2)

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Q71 Have you ever been subject to sexual misconduct during your time as a student-athlete at Iowa?

- Yes (1)
  - No (2)
-

Q42 D. Diversity

|   | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|---|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Department commitment toward promoting an environment free from discrimination based upon religion, race, gender or sexuality. (1) |          |                   |             |               |               |                    |

Q43 2. Were you ever subject to discrimination based upon your religion, race, gender or sexuality? (If yes, describe below)

- YES (3)
- NO (4)

Q44 3. Have you ever witnessed discrimination based upon another student-athlete's religion, race, gender, or sexuality? (If yes, describe below)

- YES (1)
- NO (2)

Q45 E. Compliance Education

|   | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|---|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Communication about your athletic eligibility (1)                                  |          |                   |             |               |               |                    |
| 2. Time allocated toward athletic certification meetings (2)                          |          |                   |             |               |               |                    |
| 3. Enforcement of NCAA/Big Ten Rules (3)  |          |                   |             |               |               |                    |
| 4. Opportunities to ask for clarification or ask questions related to eligibility (4) |          |                   |             |               |               |                    |
| 5. Communication about athletic aid including books (5)                               |          |                   |             |               |               |                    |



Q46 F. Policies and Procedures

|  | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|--|----------|-------------------|-------------|---------------|---------------|--------------------|
| 1. Communication about Athletic Department policies (1)                                  |          |                   |             |               |               |                    |
| 2. Communication about Emergency Medical Protocols (2)                                   |          |                   |             |               |               |                    |
| 3. Communication about the Student-Athlete Grievance process (3)                         |          |                   |             |               |               |                    |
| 4. Communication about the Student-Athlete Code of Conduct (4)                           |          |                   |             |               |               |                    |
| 5. Communication about policies pertaining to Sexual Misconduct (5)                      |          |                   |             |               |               |                    |
| 6. Communication about Student-Athlete Rights and Responsibilities (6)                   |          |                   |             |               |               |                    |
| 7. Communication about Student-Athlete Parking (7)                                       |          |                   |             |               |               |                    |
| 8. Communication about the Student-Athlete Opportunity / Assistance Fund (8)             |          |                   |             |               |               |                    |
| 9. Opportunities to ask questions related to any of the above policies or procedures (9) |          |                   |             |               |               |                    |

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Q47 General Comments about the Athletics Department:

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Q48 **Section 5: Campus Culture** A. Diversity 1. In general, when provided the opportunity, were your interactions with individuals who were of a different race or ethnicity positive?

- YES (1)
  - NO (2)
- 

Q49 2. Were you made to feel welcome and feel like you belonged at the University of Iowa?

- YES (1)
  - NO (2)
- 

Q50 3. Did you participate in cultural activities on campus that promoted diversity?

- YES (1)
  - NO (2)
- 

Q51 4. Did you believe your experience at Iowa expanded your views on diversity and inclusion?

- YES (1)
- NO (2)

End of Block: Default Question Block

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Start of Block: Block 1

Q52 A. Housing

Did you live on campus?

- YES (1)
- NO (2)

*Skip To: Q57 If A. Housing Did you live on campus? = NO*

*Display This Question:*

*If A. Housing Did you live on campus? = YES*

Q53 1. On Campus

|  | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|--|----------|-------------------|-------------|---------------|---------------|--------------------|
| i. Describe your overall experience (1)                    |          |                   |             |               |               |                    |
| ii. Level of engagement in Living Learning Communities (2) |          |                   |             |               |               |                    |
| iii. Dining options (3)                                    |          |                   |             |               |               |                    |
| iv. Living arrangements (i.e., suite) (4)                  |          |                   |             |               |               |                    |

*Display This Question:*

*If A. Housing Did you live on campus? = YES*

Q54 v. Indicate your dorm

- Burge (1)
- Currier (2)
- Hillcrest (3)
- Petersen (4)
- Rienow (6)
- Slater (7)
- Catlett (8)
- Mayflower (9)
- Daum (10)

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*Display This Question:*

*If A. Housing Did you live on campus? = YES*

Q55 vi. General comments, feedback, concerns, etc, about your living arrangements:

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*Display This Question:*

*If A. Housing Did you live on campus? = NO*

Q56 B. Did you live off campus?

- YES (1)
- NO (2)

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*Display This Question:*

*If A. Housing Did you live on campus? = NO*

Q57 2. Off Campus

|  | Poor (1) | Below Average (2) | Average (3) | Very Good (4) | Excellent (5) | Not Applicable (6) |
|--|----------|-------------------|-------------|---------------|---------------|--------------------|
| i. Describe your experience (1)                            |          |                   |             |               |               |                    |
| ii. Living arrangements (i.e., apartment, house, etc.) (2) |          |                   |             |               |               |                    |
| iii. Affordability (3)                                     |          |                   |             |               |               |                    |

*Display This Question:*

*If A. Housing Did you live on campus? = NO*

Q58 iv. General comments, feedback, concerns, etc. about your living arrangements:

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Q59 C. Student Involvement 1. Describe your involvement in campus student organizations  
i. If you were involved with campus student organizations, list all that apply?

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Q60 2. Communication you received about campus organizations?

- Poor (1)
- Below Average (2)
- Average (3)
- Very Good (4)
- Excellent (5)
- Not Applicable (6)

Q61 3. Do you know other student-athletes who were involved in campus organizations?

- YES (1)
  - NO (2)
- 

Q62 4. Did your athletic participation prevent you from participating in campus activities?

- YES (1)
  - NO (2)
- 

Q63 General Comments about the Campus Culture:

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Q68 Did you ever conduct a research project or capstone experience with a faculty or staff member?

- Yes (1)
  - No (2)
- 

Q69 Did you participate in a study abroad or service learning program?

- Yes (1)
  - No (2)
- 

Q70 Did you participate in an internship or professional job experience within the past 9 months?

- Yes (1)
- No (2)

**End of Block: Block 1**

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