

HCTC STUDENT TOTAL WITHDRAWAL SURVEY

HCTC IR:alp

HCTC would like to ensure that you, as a student, were satisfied with your educational experience. We recognize that there may be other obstacles that may have caused you to withdraw or leave early. Please complete this questionnaire to the best of your ability. *Thank you.*

1. Please select the HCTC campus you have been attending.

- | | |
|--|--|
| <input type="radio"/> Hazard Campus | <input type="radio"/> Technical Campus |
| <input type="radio"/> Allied Health Center | <input type="radio"/> Lees College Campus |
| <input type="radio"/> Knott County Branch | <input type="radio"/> Leslie County Center |
| <input type="radio"/> OnLine | |

2. Please select the semester you are withdrawing from.

- | | | |
|-----------------------------------|---------------------------------|-----------------------------------|
| <input type="radio"/> Summer 2012 | <input type="radio"/> Fall 2012 | <input type="radio"/> Spring 2013 |
|-----------------------------------|---------------------------------|-----------------------------------|

3. Why are you leaving HCTC? Please check all that apply.

- | | |
|--|--|
| <input type="checkbox"/> employment | <input type="checkbox"/> gas expenses |
| <input type="checkbox"/> personal financial difficulty | <input type="checkbox"/> death in my family |
| <input type="checkbox"/> financial changes within my family | <input type="checkbox"/> not academically prepared |
| <input type="checkbox"/> job transfer | <input type="checkbox"/> temporary break from school |
| <input type="checkbox"/> illness | <input type="checkbox"/> student/instructor personality issues |
| <input type="checkbox"/> academic difficulty with coursework | <input type="checkbox"/> family issues |
| <input type="checkbox"/> lost interest | <input type="checkbox"/> advising issues |
| <input type="checkbox"/> marriage | <input type="checkbox"/> lack of information or direction |
| <input type="checkbox"/> moving away | <input type="checkbox"/> transferring to another community college |
| <input type="checkbox"/> poor grades | <input type="checkbox"/> transferring to a 4-year college |
| <input type="checkbox"/> child care issues | <input type="checkbox"/> Other |
| <input type="checkbox"/> transportation issues | |

4. If you selected Other in Question 3, please explain your reason for leaving.

5. How would you rate your educational experience?

- | | | |
|--------------------------------------|------------------------------------|---|
| <input type="radio"/> Very Satisfied | <input type="radio"/> Neutral | <input type="radio"/> Very Dissatisfied |
| <input type="radio"/> Satisfied | <input type="radio"/> Dissatisfied | |

6. In what ways could we have been more helpful to you concerning your HCTC experience?
