

Student Technology Intake Survey

If you have filled out this survey already, you do not have to fill it out again.

1. What school are you going to? *

2. What is your first and last name? *

First *

Last *

3. If you attended our school in the past, what was your teacher's name?

4. What classes or programs are you interested in? (Check all that apply) *

Basic Skills

High School

High School Equivalency (GED, HiSet, TASC)

English as a Second Language

Citizenship Preparation

Career Technical Education

Workforce Preparation

5. What are your career, employment, or educational interests or goals?

6. Do you use email at home or at school? *

Yes

No

7. If you use email at home or at school, what is your email address?

8. What is a cell phone number where you can be reached?

9. Is your cell phone a smart phone? *

Yes

No

10. Have you ever taken a class online? *

Yes

No

* Indicates required field

Student Technology Intake Survey

If you have filled out this survey already, you do not have to fill it out again.

11. What is your feeling about learning online? *

I will continue to learn online.
I don't think I can learn online right now.

12. Which device(s) do you or can you use for online learning? (Check all that apply)

Cell phone Tablet Laptop or computer
None (I don't have a device) Other

13. Do you share this computer, laptop, or other device with others at home? *

Yes No

14. How do you connect to the internet? *

Through my phone Personal Hotspot WiFi in the community
WiFi / internet connection in my home Other

15. Do you have data limits at home or on your phone that would keep you from learning? *

Yes No I don't know

16. Do you have a quiet place to study at home? *

Yes No

17. Please mark items below that would help you study online. (Check all that apply) *

I do not need additional help Help to get on the internet like a mobile hotspot
A device to help me study online Technical help fixing or using online stuff
Help getting into my online textbooks and / or classes
Flexible study times Other

18. How did you hear about our school?

Website Catalogue Family or friend Advertisement
Other

* Indicates required field