

# Ontario Colleges of Applied Arts and Technology

## KPI

### Student Satisfaction Survey

Please do not mark in this area.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The information asked for in this survey is collected under the legal authority of subsection 8(2) of Ontario Regulation 34/03 made under the Ontario Colleges of Applied Arts and Technology Act, 2002. The information is used for the administrative and statistical purposes of the college and the ministry. Only collective information will be reported - individual responses will be kept confidential.

This survey provides you with an opportunity to give feedback about your program and your college. It is not an evaluation of this specific course, subject or teacher.

#### SECTION A:

1. Please mark the alphanumeric code identifying your program and campus in the following selection box. A list of codes has been printed on the back of the instruction sheet provided to you.

Alphanumeric program code:

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
0	1	2	3	4	5	6	7	8	9																
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																

2. In which semester/term are you currently enrolled?

1     2     3     4     5     6     7     8     Other

SECTION B: Please think about how the learning experiences in THIS PROGRAM relate to YOUR future, and then rate the importance of, and YOUR satisfaction with the following:

(If you choose 'NOT APPLICABLE', move to the next question. Do not complete the IMPORTANCE or SATISFACTION questions.)

This program...

#### IMPORTANCE

#### SATISFACTION

NOT APPLICABLE     Not Important     Important     Very Dissatisfied     Neither Satisfied nor Dissatisfied     Satisfied     Very Satisfied

This program...	IMPORTANCE			SATISFACTION				
	NOT APPLICABLE	Not Important	Important	Very Dissatisfied	Neither Satisfied nor Dissatisfied	Satisfied	Very Satisfied	
3. Provides you with skills and abilities specific to your chosen career. ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Includes topics relevant to your future success. ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Has teachers who help you to understand your chosen career. ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Develops your writing skills. ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Develops your speaking skills. ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Develops your ability to solve problems using math techniques. ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Develops your ability to work with others. ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Develops your ability to solve problems. ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Develops your computer skills. ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Provides you with opportunities to further your education after graduation. ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Provides you with experience that will be useful to your future life outside of work. ....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. OVERALL, your program is giving you knowledge and skills that will be useful in your <u>future career</u> . ....		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



SECTION D (continued):	USAGE			IMPORTANCE		SATISFACTION				
	Did Not Use/ Not Available	Low Use	High Use	Not Important	Important	Very Dissatisfied	Neither Satisfied nor Dissatisfied		Satisfied	Very Satisfied
40. Financial Aid Services (i.e. please comment on the service provided, not the amount of money received).	1	2	3	1	2	1	2	3	4	5
41. Co-op/Field Placement Services.	1	2	3	1	2	1	2	3	4	5
42. Employment/Placement/Career Services.	1	2	3	1	2	1	2	3	4	5
43. Comfort/Cleanliness/Accessibility of college facilities.				1	2	1	2	3	4	5
44. The OVERALL quality of the facilities/resources in the college.				1	2	1	2	3	4	5
45. The OVERALL quality of the services in the college.				1	2	1	2	3	4	5
<b>SECTION E: Please rate the importance of, and your satisfaction with:</b>										
46. The concern of people at this college for your success.				1	2	1	2	3	4	5
47. Your overall college experience.				1	2	1	2	3	4	5
<b>SECTION F: Please think IN GENERAL about all your courses and experiences at this college.</b>						<b>Strongly Disagree</b>	Neither Agree nor Disagree	<b>Strongly Agree</b>		
<i>This college...</i>										
48. Encourages you to spend time on your coursework.						1	2	3	4	5
49. Provides support to deal with your coursework.						1	2	3	4	5
50. Provides support to deal with your non-academic responsibilities (e.g., work, family, etc.).						1	2	3	4	5
51. Provides information on social opportunities.						1	2	3	4	5
52. Provides information on student financial aid services.						1	2	3	4	5
53. Has at least one person you can rely on for useful information (e.g., teacher, counsellor, other staff, student).						1	2	3	4	5
54. Provides you with challenging courses.						1	2	3	4	5
<b>SECTION G: Please think IN GENERAL about all your courses and experiences at this college.</b>						<b>Never</b>	<b>Occasionally</b>	<b>Sometimes</b>	<b>Usually</b>	<b>Always</b>
<i>How often do you...</i>										
55. Participate in class discussions.						1	2	3	4	5
56. Ask questions in class.						1	2	3	4	5
57. Present information to your class.						1	2	3	4	5
58. Work with other students on assignments/projects.						1	2	3	4	5
59. Review an assignment/project before submitting it.						1	2	3	4	5
60. Select and organize information from different sources to complete an assignment/project.						1	2	3	4	5
61. Complete homework assignments/projects on time.						1	2	3	4	5
62. Skip classes.						1	2	3	4	5
63. Discuss your course performance with a teacher.						1	2	3	4	5
64. Discuss ideas from your courses with a teacher.						1	2	3	4	5
65. Work hard to meet the demands of your courses.						1	2	3	4	5

**SECTION H: The college is interested in understanding demands on students' time.**

Estimate to the nearest hour, how many hours you spend in a typical 7-day week doing each of the following:

	None	1-5 hours	6-10 hours	11-15 hours	16-20 hours	21-25 hours	More than 25 hours
66. Traveling to and from the college. ....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
67. Coursework outside of class. ....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
68. Participating in college activities other than attending classes or labs. ....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
69. Participating in volunteer activities. ....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
70. Working for pay. ....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7
71. Providing care for dependents ( <i>e.g., children, spouse/partner, relatives, etc.</i> ). ....	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> 6	<input type="checkbox"/> 7

**SECTION I: To help us group responses, please provide the following information about yourself: (No information which could identify an individual will be reported.)**

72. You are:

- 1 Female  
 2 Male

73. Your age is (in years):

- 1 Less than 21  
 2 21-25  
 3 26-30  
 4 31-35  
 5 More than 35

74. Your first language is:

- 1 English  
 2 French  
 3 Other

75. The education you completed before entering this program includes: (*Select all that apply.*)

- 1 High school diploma  
 2 College upgrading  
 3 Some previous college  
 4 College diploma  
 5 Some university  
 6 University degree  
 7 Other  
 8 None of the above

76. Your main goal in enrolling in this program is: (*Select only one.*)

- 1 To prepare for employment/career  
 2 To prepare for further college or university study  
 3 To pursue an interest or for personal development  
 4 Other

77. You are registered as a:

- 1 Full-time student  
 2 Part-time student

**SECTION J: College-Specific Questions**

78. How satisfied are you with your overall experience of taking a course via video conferencing, audio conferencing and/or Centra?

- 1 Very Satisfied  
 2 Satisfied  
 3 Neutral  
 4 Dissatisfied  
 5 Very Dissatisfied  
 6 Not Applicable

79. Based on your experiences to date, would you recommend Northern College to someone else?

- 1 Yes  
 2 No  
 3 Not Sure

80. What is the main reason you chose Northern College? (*Select only ONE response*)

- 1 Location of campus/college  
 2 Offered the program I wanted  
 3 Reputation of the program  
 4 Reputation of the college  
 5 Smaller college benefits (*known by name, personal attention, small class size, etc.*)

81. What would you consider to be Northern College's greatest strength? (*Select only ONE response*)

- 1 Faculty Members (*professors, teachers*)  
 2 Quality of program  
 3 Facilities  
 4 Student Support Services (*i.e. student services, student success centre, counselling services, etc.*)  
 5 Friendly and caring atmosphere

82. What is your preferred method of communication with the Northern College Student Association (NCSA)? (*Select only ONE response*)

- 1 Class Representatives  
 2 E-mail  
 3 Facebook, Twitter, etc.  
 4 Flyers  
 5 Posters  
 6 TV monitors  
 7 Website  
 8 Word of mouth

**Thank you for your participation.**