About You Questionnaire **Name _____**

These questions are purely voluntary - you do not have to answer any of them, if you do not wish to - but are designed to give me a better sense of how to support you as a student. All answers will be kept confidential.

Are you enrolled in school part time or full time? _____

Do you have a job or internship other than school? If so, how many hours a week do you work, and what is the job? _____

Do you have a working computer at home? _____ A working printer? _____

What kind of transportation do you usually use? (circle as many as relevant)

Walk Bike Scooter Bus Share a car Own Car Other _____

Do you have any children at home? If so, how old are they? _____

If you do have children at home, does someone help you in caring for them? _____

Are you a caretaker for anyone other than your children (parents, grandparents, etc.)? If so, who?

_____

Do you speak any other languages? If so, what are they, and which language do you speak at home?

_____

Have you had any major life changes recently that you would like to share with me? (If you would like to talk about these in person instead of writing them, let me know that here.)

_____

_____

_____

Is there anything that you would like to share with me about your needs as a learner? (If you would like to talk about these in person instead of writing them, let me know that here.)

_____

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_____

Anything else you would like to share?

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