

Graduate Student Exit Survey
Summer and Fall 2010, Spring 2011

Congratulations on your impending graduation from George Mason University! Your feedback is important to us and will be used in educational planning. If you have questions, please do not hesitate to contact the Office of Institutional Assessment by phone at 703-993-8834 or by email at assessment@gmu.edu. Thank you for your participation.

Directions: For each question, select or mark the most appropriate response. Return the completed survey to the Office of Institutional Assessment, George Mason University - MS 3D2, 4400 University Drive, Fairfax, VA 22030.

I. Background Information

1. When did you officially begin enrollment in your degree program? (Do NOT include non-degree status.)

- | | | |
|--|-------------------------------|-------------------------------|
| <input type="checkbox"/> 2002 or earlier | <input type="checkbox"/> 2005 | <input type="checkbox"/> 2008 |
| <input type="checkbox"/> 2003 | <input type="checkbox"/> 2006 | <input type="checkbox"/> 2009 |
| <input type="checkbox"/> 2004 | <input type="checkbox"/> 2007 | <input type="checkbox"/> 2010 |

2. Among the graduate schools that you considered, was George Mason University your:

- First choice Second choice Third choice or lower

3. Did you pursue your graduate degree at Mason primarily part-time or full-time?

- Part-time Full-time

II. Financial Support

4. While enrolled in your graduate studies, did you receive financial support (assistantship/fellowship/scholarship) from Mason?

- Yes (go to 5) No, I did NOT apply (go to 6) No, I applied but did NOT obtain (go to 6)

5. Please indicate the approximate **number of SEMESTERS** you received each type of financial support. (Mark all that apply)

	None	1-2	3-4	5-6	7 or more
Teaching assistantship FROM MASON	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Research assistantship FROM MASON	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fellowship/scholarship FROM MASON	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

6. While enrolled in graduate studies at Mason, how often did you **WORK FOR PAY**? (Mark all that apply)

		Every semester	50% or more of semesters	Less than 50% of semesters	Not at all
Assistantship/Fellowship:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On-campus (other than an assistantship):	Part-time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Full-time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Off-campus:	Part-time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Full-time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. What were your **primary sources of funding** for your graduate studies at Mason? (Mark up to THREE)

- | | |
|--|--|
| <input type="checkbox"/> Assistantship, Fellowship, or Scholarship | <input type="checkbox"/> Student loans |
| <input type="checkbox"/> Financial Aid (need-based) | <input type="checkbox"/> Mason employee tuition waiver (not an assistantship) |
| <input type="checkbox"/> Personal/Family funding | <input type="checkbox"/> Employer tuition support/benefit (outside of Mason) |
| <input type="checkbox"/> Off-campus employment | <input type="checkbox"/> Other, please specify: |

8. What is your approximate level of indebtedness related to your graduate studies at Mason?

- | | |
|--|---|
| <input type="checkbox"/> None | <input type="checkbox"/> \$15,001-20,000 |
| <input type="checkbox"/> \$5,000 or less | <input type="checkbox"/> \$20,001-25,000 |
| <input type="checkbox"/> \$5,001-10,000 | <input type="checkbox"/> \$25,001-30,000 |
| <input type="checkbox"/> \$10,001-15,000 | <input type="checkbox"/> More than \$30,000 |

III. Academic Program

9. To what extent do you agree/disagree with the following statements about **faculty** in your graduate program:

	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A or Don't Know
The courses I took were taught well.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There is good communication between faculty and students regarding student needs, concerns, and suggestions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
There are many opportunities outside the classroom for interaction between students and faculty.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Faculty in my department are interested in the professional development of graduate students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Faculty in my department are helpful and supportive in my search for professional employment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Faculty in my department are well qualified to teach their courses.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Faculty in my department were willing to meet with me to discuss my academic performance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. To what extent do you agree/disagree with the following statements about **students** in your graduate program:

	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A or Don't Know
The intellectual caliber of students in my program is high.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My program encourages student collaboration and teamwork.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. To what extent do you agree/disagree with the following statements about **academics** in your graduate program:

	Strongly Agree	Agree	Disagree	Strongly Disagree	N/A or Don't Know
My program has high academic standards.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My program integrates current developments in my field.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My program prepared me well for my profession.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My program was intellectually challenging and stimulating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I would recommend my graduate program to prospective students.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If I were starting over, I would enroll in this program again.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

IV. Time to Degree

12. Was the amount of time needed for you to graduate:

Less than originally expected

More than originally expected (answer 12.1-12.3)

About the same as originally expected

Unsure

If you answered "**More** than originally expected" in question 12, answer 12.1-12.3

12.1 To what extent did the following **academic reasons** prevent you from progressing in your degree program as expected?

	A great deal	A fair amount	A little	Not at all
a. Lack of course availability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Inadequate advising	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Difficulty in completing comprehensive/qualifying exams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Difficulty in my project, thesis, or dissertation research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Difficulty in completing coursework	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Difficulty in fulfilling other degree requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Other academic reasons, please specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12.2 To what extent did the following **personal/family reasons** prevent you from progressing in your degree program as expected?

	A great deal	A fair amount	A little	Not at all
h. Family obligations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Finances	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Demands of my employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Health of self or family member(s)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l. Lack of motivation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m. Military deployment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n. Other personal reasons , please specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12.3 Of the reasons (a-n) selected in 12.1 and/or 12.2, what was the **most important reason** that prevented you from progressing in your degree program as expected: _____

V. Student Support/Resources

13. How satisfied are you with the following aspects of your graduate program

	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied	N/A or Don't Know
Academic advising (e.g., assistance with course planning and meeting degree requirements)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Career counseling (e.g., assistance with career planning, job search, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mentoring (e.g., support of professional growth)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work/lab space on campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social space on campus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discipline specific software and equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diversity of student population	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

VI. Final Comments

14. Overall, how satisfied are you with your Mason experience? Please elaborate in the comments section below.

- Very satisfied Satisfied Dissatisfied Very dissatisfied

15. Please select one or more of the following categories and comment regarding your Mason experiences in the space provided.

- | | |
|--|--|
| <input type="checkbox"/> Academic environment | <input type="checkbox"/> Quality of instruction |
| <input type="checkbox"/> Campus environment | <input type="checkbox"/> Research experiences |
| <input type="checkbox"/> Curriculum | <input type="checkbox"/> Resources (lab, Internet, library, bookstore, etc.) |
| <input type="checkbox"/> Faculty, general | <input type="checkbox"/> Staff |
| <input type="checkbox"/> Faculty–student communication | <input type="checkbox"/> Students |
| <input type="checkbox"/> General comments | <input type="checkbox"/> University management (food, gym, parking, etc.) |
| <input type="checkbox"/> Quality of advising/mentoring | <input type="checkbox"/> Other: _____ |

Comments: _____

Please enter your GMU student identification number which begins with the letter “G.”
Student identification number: G _____
GMU email address: _____@gmu.edu
Preferred email address after graduation: _____

*Your G-number and email address are necessary for us to verify that only
graduating students have completed the survey.
All individual responses are confidential and no report will identify you as an individual.*

Thank you for your participation!