

# Graduating Senior 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](mailto: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. Enrollment History

1. Did you begin college at Mason or elsewhere?

- Started here (go to question 2)       Started elsewhere and then transferred to Mason

1.1 If you transferred to Mason, how many credit hours were **ACCEPTED** by Mason?

- 14 or less       15-29       30-44       45-59       60 or more

### II. Employment History

2. While enrolled at Mason, how often did you **WORK FOR PAY** during the fall and spring semesters: (Mark all that apply)

	Every semester	50% or more of semesters	Less than 50% of semesters	Not at all
<b>ON-CAMPUS:</b> <u>LESS THAN</u> 10 hours per week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 to 20 hours per week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>MORE THAN</u> 20 hours per week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>OFF-CAMPUS:</b> <u>LESS THAN</u> 10 hours per week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11 to 20 hours per week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>MORE THAN</u> 20 hours per week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### III. Education in Your Major

3. To what extent did courses in your major contribute to your competence in the following areas:

	A great deal	A fair amount	A little	Not at all
a. Critical thinking and analysis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Connecting concepts across disciplines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Conducting research within your field/major	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Writing within your field/major	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Identifying, locating, evaluating and managing information resources within your field/major	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Applying the ideas of your field/major outside of the classroom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Applying ethics within your field/major	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Identifying and assessing the validity of assumptions within your field/major	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### IV. Writing Experiences in your Major

4. In how many courses in your major, 300-level or above (**EXCLUDING English 302**), did you have the opportunity to revise your writing after receiving feedback from your instructor on an earlier draft? (This might include essays, projects, lab reports, case studies, reviews, etc.)

- None (go to question 5)    1 course    2 courses    3 courses    4 courses    5 or more courses

4.1 To what extent did the feedback and revision process in these courses help you to improve your writing?

- A great deal    A fair amount    A little    Not at all

4.2 To what extent did the writing assignments in these courses increase your understanding of your field/major?

- A great deal    A fair amount    A little    Not at all

#### V. Scholarly and Creative Activities

5. Which of the following have you done at Mason or do you plan to do **before graduating** from Mason?

	Have done/ Currently doing	Plan to do	Have NOT done/ Do NOT plan to do	6. Primary reason for NOT doing (Use letters provided below)
a. Work on a paper or creative project involving <b>independent research</b> as part of a course or program requirement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Work on a paper or creative project involving <b>research with other students</b> as part of a course or program requirement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Work on a research or creative project with a Mason <b>faculty member OUTSIDE</b> of a course or program requirement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Work on a research or creative project with a Mason <b>staff member OUTSIDE</b> of a course or program requirement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Work on a scholarly or creative project with an individual or group <b>outside of the university</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Publically present your scholarly or creative work <b>outside of class</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

6. If you indicated that you “**Do NOT plan to do**” any of the items listed above, please indicate the **primary reason why** by writing the appropriate letter in the above column to the right.

- |                                  |  |
|----------------------------------|--|
| A. No opportunity                | F. My health/the health of a family member prevents it |
| B. No interest                   | G. Financial obligations prevent it                    |
| C. No time                       | H. Academic obligations prevent it                     |
| D. Work obligations prevent it   | I. Other _____   |
| E. Family obligations prevent it |  |

7. If you marked “**Have done/Currently doing**” for any of the items listed above, please describe if and how you believe the experience(s) contributed to the quality of your undergraduate education \_\_\_\_\_

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## VI. Interactions

8. In your experience at Mason, how often have you done each of the following:	Very Often	Often	Sometimes	Never
a. Discussed grades or assignments with an instructor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Talked about career plans with a <b>faculty member</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Talked about career plans with a <b>staff member</b>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Discussed ideas from readings or classes with a faculty member outside of class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Worked with a <b>faculty member</b> on non-academic activities (e.g., committees, orientation, student life activities)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Worked with a <b>staff member</b> on non-academic activities (e.g., committees, orientation, student life activities)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## VII. Enriching Educational Experiences

9. Which of the following have you done at Mason or do you plan to do <b>before graduating</b> from Mason?	Have done/ Currently doing	Plan to do	Have NOT done/ Do NOT plan to do	10. Primary reason for NOT doing (Use letters provided below)
a. Participate in a practicum, internship, field experience, co-op experience, or clinical assignment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Participate in an independent study/ self-designed major	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
c. Participate in community service or volunteer work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
d. Participate in a residential or academic learning community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
e. Participate in a study abroad program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
f. Develop or improve proficiency in a foreign language	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
g. Participate in a cultural learning experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
h. Participate in a culminating senior experience (capstone course, senior project or thesis, or comprehensive exam)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

10. If you indicated that you “**Do NOT plan to do**” any of the items listed above, please indicate the **primary reason why** by writing the appropriate letter above in the column to the right.

- |                                  |  |
|----------------------------------|--|
| A. No opportunity                | F. My health/the health of a family member prevents it |
| B. No interest                   | G. Financial obligations prevent it                    |
| C. No time                       | H. Academic obligations prevent it                     |
| D. Work obligations prevent it   | I. Other _____   |
| E. Family obligations prevent it |  |

11. If you marked “**Have done/Currently doing**” for any of the items listed above, please describe if and how you believe the experience(s) contributed to the quality of your undergraduate education: \_\_\_\_\_

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### VIII. Global Knowledge

12. Please indicate your level of agreement with the following statements:	Strongly Agree	Agree	Disagree	Strongly Disagree
a. I am able to identify causes of some significant global issues better than I could before I came to Mason	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I have a better understanding of a specific global problem or issue than I did before I came to Mason	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. I have a better understanding of a specific country or region outside my home country or region than I did before I came to Mason	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I think about the global impact of U.S. policies now more than I did before I came to Mason	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### IX. Satisfaction

13. How <b>satisfied</b> are you with the following aspects of your Mason experience?	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied
a. <b>Sense of belonging</b> at Mason	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. <b>Overall</b> Mason experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. If you were to do it all over again, would you attend George Mason? (Select one)

- Definitely Yes     
  Probably Yes     
  Probably Not     
  Definitely Not

### X. Overall comments/recommendations/observations on your experiences at Mason:

15. Please select those areas on which you wish to comment and use the space below to make comments/recommendations/observations about your experience at Mason: *(Add additional pages if necessary and attach and return with survey.)*

- |   |  |
|---|--|
| <input type="checkbox"/> Academic advising                        | <input type="checkbox"/> Financial aid                                       |
| <input type="checkbox"/> Admissions and tuition                   | <input type="checkbox"/> Location  |
| <input type="checkbox"/> Career services and counseling           | <input type="checkbox"/> Resources (lab, Internet, library, bookstore, etc.) |
| <input type="checkbox"/> Diversity at Mason                       | <input type="checkbox"/> Staff, general                                      |
| <input type="checkbox"/> Education in major                       | <input type="checkbox"/> Student life and residence halls                    |
| <input type="checkbox"/> Facilities, academic and/or non-academic | <input type="checkbox"/> University management (food, gym, parking, etc.)    |
| <input type="checkbox"/> Faculty, general                         | <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 senior students have completed the survey. All individual responses are confidential and no report will identify you as an individual.

**Thank you for your participation!**