YOUR INPUT IS VALUABLE!

Barton Community College

# Employer Survey

*Our records indicate that you have employed a graduate of Barton Community College in your organization. As an element of the College’s ongoing assessment process, this survey assists in evaluating the effectiveness of our programs in preparing students for the workforce, and your response is of critical importance. Thank You in advance for participating!*

Person Completing Survey: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Job Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**GRADUATE INFORMATION:**

1. Name of Graduate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Name of Employing Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Graduate’s Current Job Title/Description:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Length of employment: \_\_\_\_\_\_\_\_
2. In your opinion did the graduate’s educational qualification from Barton Community College qualify him/her for the position?
   1. Yes
   2. No
3. How well do you think Barton Community College prepared the graduate for the position?
   1. Extremely well
   2. More than adequately
   3. Sufficiently
   4. Less than sufficiently
   5. Very poorly
4. Overall, how would you rate your level of satisfaction with the work and performance of the Barton graduate in your organization?
   1. Very good
   2. Good
   3. Poor

**(Continued on back)**

**Please rate Barton Community College graduates’ skills, values, and knowledge in the following areas:**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Please check the appropriate response box. | Excellent | Good | Average | Poor | Not  Applicable | | GENERAL EDUCATION |  |  |  |  |  | | Math Computational Skills and Reasoning |  |  |  |  |  | | Oral Communication Skills |  |  |  |  |  | | Written Communication Skills |  |  |  |  |  | | Computer Skills |  |  |  |  |  | | Problem Solving Skills |  |  |  |  |  | | Critical Thinking Skills |  |  |  |  |  | | TECHNICAL EDUCATION |  |  |  |  |  | | Knowledge/skills Related To Employment Position |  |  |  |  |  | | Operating job-related tools, instruments & equipment |  |  |  |  |  | | Professionalism |  |  |  |  |  | | Organizational/Time-Management Skills |  |  |  |  |  | | Quantity/Quality Of Work Accomplished |  |  |  |  |  | | Following Directions |  |  |  |  |  | | Working Independently |  |  |  |  |  | | Working Cooperatively With Others (Team Work) |  |  |  |  |  | | Leadership/Promotion Potential |  |  |  |  |  | | Attitude (initiative, cooperation, loyalty, attendance, personal appearance, etc) |  |  |  |  |  | | Ability/willingness to learn (not on nursing survey) |  |  |  |  |  | | Understands the need for continuing education (nursing survey only) |  |  |  |  |  | | Accepts advice, supervision and constructive criticism |  |  |  |  |  | | Seeks to continuously improve performance |  |  |  |  |  | | Work Ethics (reliability, punctuality, integrity, judgment, maturity, politeness, dependability, confidentiality etc) |  |  |  |  |  | | Maintains Confidentiality |  |  |  |  |  | | Customer Focused |  |  |  |  |  | |

**Additional Comments:** Please use the space below to add any additional comments or suggestions. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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***Thank you for completing this survey. Your participation is greatly appreciated. Please use the enclosed postage-paid envelope and return promptly.***