

ECED About Me Questionnaire DE Fall 2021

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. As a department, we are committed to serving all of our students. Your answers will be shared between the instructors of the classes that you are enrolled in. (NOTE - you only need to fill this out once per semester!)

* Required

1. Email *

2. What name would you like to be called? Please let me know if this is different than your legal name. (Note - if you would like support changing your name on your UH email please let me know!) *

3. What are your pronouns (ex. she/her, he/him, they/them)? *

4. What is your educational goal at HCC?

Mark only one oval.

☐ CDA Certification (the 3 courses needed for work qualification)

☐ Associates Degree in ECED

☐ Associates Degree, other major

☐ Other: _____

5. Is this your first semester taking college courses?

Mark only one oval.

- ☐ Yes
- ☐ No
- ☐ No - but I have been away from college for more than one semester
- ☐ Other: _____

6. How many other classes are you taking this semester?

Mark only one oval.

- ☐ This is my only course this semester
- ☐ 1 other class
- ☐ 2 other classes
- ☐ 3 other classes
- ☐ 4 or more other classes

7. Which ECED courses are you enrolled in this semester? (Check all that apply)

Check all that apply.

- ☐ ECED 105
- ☐ ECED 110
- ☐ ECED 131
- ☐ ECED 140
- ☐ ECED 151
- ☐ ECED 245
- ☐ ECED 263
- ☐ ECED 274
- ☐ ECED 275
- ☐ ECED 296

8. What is your career goal? (Check as many as you'd like!)

Check all that apply.

- ☐ To become a preschool teacher
- ☐ To work for the DOE/upper grades
- ☐ To work with young children: not necessarily in a school setting
- ☐ To open my own family childcare
- ☐ To become a childcare administrator/director
- ☐ To work in a different field (I'm taking this course as an elective)
- ☐ I have no idea!

Other: ☐ _____

9. Do you have a job/internship other than school? If so, who is your employer(s) and what is your job title(s)? How many hours a week do you work, appx?

10. Do you have a working computer at home?

Mark only one oval.

☐ Yes

☐ No

☐ Other: _____

11. If you answered "No" above, how do you plan to access a computer/internet so you can participate in this course? What supports do you need so you can have regular access to a computer and/or internet?

12. How comfortable are you with technology? 1 represents "not at all comfortable" and 5 is "very comfortable."

Mark only one oval.

1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

13. How comfortable are you taking a course entirely online this semester? 1 represents "not at all comfortable" and 5 is "very comfortable."

Mark only one oval.

1	2	3	4	5
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14. Do you have any children? If so, what are their ages?

15. If you do have children, does anyone help you in caring for them?

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

17. Do you speak any other languages? If so, what are they, and what language(s) do you speak at home?

18. How would you identify your ethnicity?

19. How would you identify your home culture (may be the same as your ethnicity or something different)?

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

21. 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.)

22. What are some specific concerns you have about taking online courses this semester?

23. Anything else you would like to share?

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