

University of Massachusetts Amherst
Evaluation of Summer Program (SITE-REU)
Student Survey Phase I
June, 2008

The purpose of this survey is to obtain your impressions of the Summer Information Technology Research Experience for Undergraduates Program (SITE-REU) so far. In this phase of the evaluation, we would like you to provide some background information regarding yourself, your expectations for the summer program, and your views of the program to this point in time. It will take you less than 10 minutes to complete.

We ask you to give us your birthdate as a code so we can link your early perceptions of the program with your perceptions at the end of the program. Please be assured we will not link your birthdate or responses, with your name. The information you provide is valuable for improving the quality of the summer program, so please be honest in your responses.

Birthdate:

Month ____ Day ____ Year _____

1. Sex :

Female

Male

2. Year in College:

Freshman

Sophomore

Junior

Senior

Other

 (Please explain)

3. Major/Areas of Interest:

4. Do you plan to attend graduate school? (Check one of the boxes)

Yes

 (Major)

Not Sure

No

5. If you answered YES or NOT SURE to question 4, list your top three graduate schools (in the order of preference) and indicate the reason for why you want to attend.

1

 (Reason)

2

 (Reason)

3

 (Reason)

6. How confident are you that you could succeed in a STEM (Science, Technology, Engineering, or Math) graduate program? (Please check one of the boxes below)

Not at all Confident Somewhat Confident Confident Very Confident Not Sure

7. Students vary in their reasons for attending the SITE-REU program and have different expectations for what they hope to gain. Please indicate how important each of the following reasons is to you in attending the SITE-REU program. Please check the appropriate box.

Reasons for attending the Summer Program	Not At All Important	Not Too Important	Important	Very Important
a. To determine whether graduate school is right for me	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. To develop research skills related to my major/discipline	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. To build my confidence in working with faculty members on research	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. To develop my skills at working in a research group	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. To develop my presentation skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. To increase my chances of getting into graduate school	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. To develop connections with people in my major/field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. To gain research experience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. Please indicate your rating of the various aspects of the Summer Program at the University of Massachusetts, Amherst. Please check the appropriate box.

RATING

Aspect of the Summer Program	Very Poor	Poor	Adequate	Good	Very Good
a. Clarity of the goals of the Summer Program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Communication with the Program Staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Clarity of the Expectations for Participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Clarity of your Research Project Topic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Clarity of your Involvement in Research Project	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Travel Arrangements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. In the space below, please tell us what your biggest concerns are about participating in the SITE-REU program this summer.

Thank you for completing this survey!

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