

EXAMPLE ALUMNI SURVEY

Introduction

1. As part of our process of continuous improvement, the [Program Name] program at the University of Guelph, is gathering feedback on your experiences in the [Program Name] program and whether they have met your expectations post-graduation.

We value your honest and detailed responses.

This questionnaire should take approximately 10 minutes to complete. **Your responses will be completely anonymous to [Program Name] department faculty and staff.**

Note: Depending on the administration of the survey, anonymity may not be possible. In this case an alternate statement describing how identifying information will be removed before the data is shared may be more appropriate. Be aware of your audience and the ways in which power differentials may affect responses.

Please select your response by clicking on the appropriate choice.
Open boxes are available for some questions for you to enter your own descriptive answer.

Demographics

2. What year did you graduate from the [Program Name] program at the University of Guelph?
 - 2021
 - 2020
 - 2019
-

3. Were you primarily a full-time or part-time student?

Full-time (2.0 credits or more per semester)

Part-time (1.5 credits per semester throughout most of your studies)

4. Which of the following describes your current academic or professional career status?
(more than one option can be selected)

Working in government or the public sector

Working for a not-for-profit or non-governmental organization

Working in private sector or business

Self-employed

Pursuing (or already completed) additional educational opportunities

Unemployed

Other (please specify) _____

Display this question only if 'Pursuing (or already completed) additional educational opportunities' is selected

5. Please indicate the type of program you are pursuing, or have already completed (more than one option can be selected)

- Professional Degree program (e.g. law, medicine, engineering, teaching)
- Masters degree
- Doctoral degree
- Diploma
- Post-degree certificate
- Other (please specify) _____

Achievement of Program Learning Outcomes

6. Based on your experiences in the courses required for completion of your degree program, **to what extent did the [Program Name] program help you develop the ability to do the following:**

	Not at all	Very little	Somewhat	Moderately	Greatly	Not applicable, or unsure
Program Learning Outcome 1	<input type="radio"/>					
Program Learning Outcome 2	<input type="radio"/>					
Program Learning Outcome 3	<input type="radio"/>					
Program Learning Outcome 4	<input type="radio"/>					
Program Learning Outcome 5	<input type="radio"/>					

Program Experiences and Evaluation

7. How satisfied or dissatisfied were you with your overall experience in the [Program Name] program?

- Very Dissatisfied
 - Dissatisfied
 - Somewhat Dissatisfied
 - Neutral
 - Somewhat Satisfied
 - Satisfied
 - Very Satisfied
-

8. How satisfied or dissatisfied were you with the overall quality of teaching in the [Program Name] program?

- Very Dissatisfied
 - Dissatisfied
 - Somewhat Dissatisfied
 - Neutral
 - Somewhat Satisfied
 - Satisfied
 - Very Satisfied
-

9. Please describe what you think is the main strength of the [Program Name] Program

10. Please describe what you think is the main weakness of the [Program Name] Program

11. Please indicate the degree to which you agree or disagree with the statement:

"What I learned in the [Program Name] program prepared me for my professional or academic career post-graduation."

- Extremely Disagree
 - Moderately Disagree
 - Slightly Disagree
 - Neither Agree nor Disagree
 - Slightly Agree
 - Moderately Agree
 - Strongly Agree
-

12. Please indicate the degree to which you agree or disagree with the statement:

"Overall, I feel that the [Program Name] program met my expectations."

- Extremely Disagree
- Moderately Disagree
- Slightly Disagree
- Neither Agree nor Disagree
- Slightly Agree
- Moderately Agree
- Strongly Agree

Display this question only if the respondent disagreed (to any degree) with the above statement

13. Please provide some comments to explain your response to the last question:

14. What learning experiences or aspects of the [Program Name] program have been **most** beneficial to you post-graduation? Think about the program as a whole, as well as specific courses or experiences inside or outside of the classroom.

15. What learning experiences or aspects of the [Program Name] program have been **least** beneficial to you post-graduation? Think about the program as a whole, including courses and experiences inside or outside of the classroom. Please do not discuss individual course instructors.

16. What area or topic within the [Program Name] program do you feel was not adequately covered by the program or should be added to the program?

17. If the [Program Name] program were to make one change to improve the program, what one change would you recommend?

18. Please provide any further comments about the [Program Name] program that you feel may benefit this improvement process:

Thanks

19. Thank you for taking the time to complete this survey. We value your contribution to the improvement of the [Program Name] Program.

If you have any further questions regarding this survey, please contact:

[Program Chair]
Department Chair and Professor
Department of [Program Name]
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