



# University of the District of Columbia

## Office of Alumni Relations Survey

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Information about the University's alumni—our proud graduates of Miner Teachers College, Wilson Teachers College, District of Columbia Teachers College, Washington Technical Institute, Federal City College, the University of the District of Columbia, and the UDC David A. Clarke School of Law—will help the Office of Alumni Relations in its programmatic efforts to provide you with the opportunity for maximum service to the University, its students, and your fellow alumni. We hope that you will answer this survey in its totality, and that you will not hesitate to contact the Alumni Office ([jthompson@udc.edu](mailto:jthompson@udc.edu) or (202) 274-5206 for further clarity on the survey's usage. Completed surveys should be submitted to the **University of the District of Columbia, Office of Alumni Relations, Intelsat Building, Room 6P-31, 4200 Connecticut Avenue, N.W., Washington, D.C. 20008. Thank You!!**

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### About You:

First Name	<input type="text"/>	Last Name	<input type="text"/>
Maiden Name	<input type="text"/>	Marital Status (M/D/S)	<input type="text"/>
Address	<input type="text"/>		
City	<input type="text"/>	State	<input type="text"/>
		Zip	<input type="text"/>
Home Phone	<input type="text"/>	Work Phone	<input type="text"/>
E-Mail Address	<input type="text"/>	Preferred contact method	<input type="text"/>
Employer	<input type="text"/>	Employer's Address	<input type="text"/>
Position Title	<input type="text"/>		

### Your Education:

Year (s) Graduated	<input type="text"/>	College Graduated From	<input type="text"/>
Degree/Credential Earned	<input type="text"/>	Major	<input type="text"/>

Name(s) of Other Universities Attended

Degree(s)/Credential earned  Major

Do you have certification in a special area? No  Yes

If yes, name Area of Certification

1. Please indicate your level (w  $\surd$  mark) of satisfaction with the following aspects:

**Very Satisfied   Satisfied   Neutral   Dissatisfied   Very Dissatisfied**

- ▶ Overall Quality of Education
- ▶ Preparation for Career
- ▶ College/University Attended

2. What did you find the most fulfilling about your education? (Circle one or more)

- ▶ The rigors of the academic training
- ▶ Social activities
- ▶ Other \_\_\_\_\_

3. I have been back to the University of the District of Columbia since graduation (Circle one):

- ▶ Never
- ▶ 1-3 times
- ▶ 4-6 times
- ▶ More than 7 times

4. I am interested in visiting the University and seeing the new developments in my program as well as developments on the campus as a whole. (Circle one)

- ▶ Very interested
- ▶ Somewhat Interested
- ▶ Not certain at all
- ▶ Uncertain

5. How many times have you visited the University's web site – [www.udc.edu](http://www.udc.edu) within the last six months? (Circle one)

- ▶ None
- ▶ 1-3
- ▶ 4-7

6. What is your overall impression of the University since you graduated? (Circle one)

- ▶ I can see evolvement
- ▶ It appears the same
- ▶ Improvements need to be made

7. Do you have family members who also attended the University or one of its predecessor schools? (Circle one)

- ▶ Yes
- ▶ No
- ▶ Relationship

8. If yes to the previous question, what was that person's response to her/his educational experience at the college/university? (Circle One)

- ▶ Favorable
- ▶ Unfavorable
- ▶ I really don't know

9. Would you recommend the University to prospective students? (Circle One)

- ▶ Yes
- ▶ No
- ▶ Uncertain

10. I would be interested in volunteering time and working with the Office of Alumni Relations in the following areas (Circle one or more):

- ▶ Public relations
- ▶ Alumni News
- ▶ Student Mentoring Program

- ▶ Alumni Networking
- ▶ Legislative and Civic Affairs
- ▶ Fund-Raising
- ▶ Other \_\_\_\_\_

11. What type of social function would you prefer? (Circle one or more)

- ▶ Dinner
- ▶ Reception
- ▶ Sunday Brunch
- ▶ Arts/Cultural Event
- ▶ Athletic Event

Other \_\_\_\_\_

12. What time of day do you prefer to attend social/cultural events? (Circle one or more)

- ▶ Day
- ▶ Evening
- ▶ Weekend

13. At which location would you prefer that alumni activities take place? (Circle one or more)

- ▶ Van Ness Campus
- ▶ Off Campus (Name Location) \_\_\_\_\_

14. Would you be interested in being a Class Representative to assist alumni class reunions or other special events? (Circle one)

- ▶ Yes
- ▶ No
- ▶ Other (please specify) \_\_\_\_\_

15. Would you be interested in starting an alumni chapter in your area or with the department or College that you graduated from? (Circle one)

- ▶ Yes
- ▶ No

▶ Other (please specify) \_\_\_\_\_

16. Would you be interested in hosting an alumni gathering? (Circle one)

▶ Yes

▶ No

▶ Other (please specify) \_\_\_\_\_

17. Are there some alumni programs that you would like to take part in that have not been listed in this survey? If so, please specify.

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18. What do you think is the most effective way to communicate with alumni (check all that apply):

▶ E-mail

▶ Postal Mail

▶ University Web Site

▶ Phone Calls

▶ Other (please specify) \_\_\_\_\_

\_\_\_\_\_  
(Your Signature)

\_\_\_\_\_  
(Date)