



Graduate Survey

In an effort to better assist our graduates in obtaining meaningful employment, we ask you to take a few moments to complete this survey. Thank you in advance for your cooperation and participation!

Personal Information

Full Name _____ Program of study _____
 Quarter/Year degree was completed _____ Email _____
 Phone # _____

Please select one of the following:

- (A) Associate Degree
- (B) Diploma
- (C) Certificate of Credit
- (D) Embedded Certificate of Credit

What is your current employment status?

(Please mark all that apply)

- (A) Employed in field
- (B) Employed in related field
- (C) Employed in unrelated field
- (D) Unemployed but actively seeking
- (E) Not seeking employment
- (F) Continuing Education
- (G) Military

If you are **employed** or have been employed since graduating from STC, please provide the following:

Company Name _____
 Mailing Address _____ City/State _____ Zip _____
 E-Mail _____ Your job title _____

Please rate your experience at STC:

Strongly Agree

Agree

Somewhat Agree

Disagree

Strongly Disagree

Do you feel your training at Savannah Technical College prepared you for your current position?

(A)

(B)

(C)

(D)

(E)

Have you used the Office of Career Services at Savannah Technical College?

(Y)

(N)

If your answer is Yes, please answer the next two questions.

Were the Career Services helpful?

(A)

(B)

(C)

(D)

(E)

What Career Services did you use? *(Please mark all that apply)*

(A) Fax

(B) Receiving job postings

(C) Resume/Cover Letter

(D) Interviewing

THANK YOU FOR YOUR INPUT!