

Florida Department of Education

Exit Interview Student Survey

School Name:

School District:

Student Name:

Student DOB:

Grade Level:

Date:

Directions: Please check the response that best describes your experience or provide a description of your experience in the tables provided.

1. Which of the following best describes your **primary** reason for terminating school enrollment?

- | | |
|--|---|
| <input type="checkbox"/> Classes were not interesting/bored | <input type="checkbox"/> Student-teacher conflict |
| <input type="checkbox"/> Missed too many days and could not catch up | <input type="checkbox"/> Employment/have to work full-time |
| <input type="checkbox"/> Did not like school | <input type="checkbox"/> Friends dropped out |
| <input type="checkbox"/> Failing classes/couldn't keep up with school work | <input type="checkbox"/> Failed to pass Florida Required Assessment |
| <input type="checkbox"/> Illness | <input type="checkbox"/> Intimidated/Threatened/Bullied |
| <input type="checkbox"/> Became a parent | <input type="checkbox"/> Migrant |
| <input type="checkbox"/> Getting married | <input type="checkbox"/> Homeless |
| <input type="checkbox"/> Felt like I did not belong | <input type="checkbox"/> Family Problems |
| <input type="checkbox"/> Expelled from school | <input type="checkbox"/> Other |

2. Which of the following best describes your **secondary** reason for terminating school enrollment?

- | | |
|--|---|
| <input type="checkbox"/> Classes were not interesting/bored | <input type="checkbox"/> Student-teacher conflict |
| <input type="checkbox"/> Missed too many days and could not catch up | <input type="checkbox"/> Employment/have to work full-time |
| <input type="checkbox"/> Did not like school | <input type="checkbox"/> Friends dropped out |
| <input type="checkbox"/> Failing classes/couldn't keep up with school work | <input type="checkbox"/> Failed to pass Florida Required Assessment |
| <input type="checkbox"/> Illness | <input type="checkbox"/> Intimidated/Threatened/Bullied |
| <input type="checkbox"/> Became a parent | <input type="checkbox"/> Migrant |
| <input type="checkbox"/> Getting married | <input type="checkbox"/> Homeless |
| <input type="checkbox"/> Felt like I did not belong | <input type="checkbox"/> Family Problems |
| <input type="checkbox"/> Suspended from school often | <input type="checkbox"/> Other |
| <input type="checkbox"/> Expelled from school | |

3. What would have improved your chances of staying in school? (Check all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Opportunities for real-world learning (internships, service learning) | <input type="checkbox"/> Better communication with your parents |
| <input type="checkbox"/> Better teachers | <input type="checkbox"/> Increased parental involvement |
| <input type="checkbox"/> Smaller classes | <input type="checkbox"/> Less freedom and more supervision from parents |
| <input type="checkbox"/> More individualized instruction | <input type="checkbox"/> Less freedom and more supervision from school officials |
| <input type="checkbox"/> Better communication with your teachers | <input type="checkbox"/> Other |

Exit Interview Student Survey (continued)

4. What actions did your school personnel take to keep you enrolled in school?

- Provide student counseling
- Scheduled a conference with parent(s), guardian(s), student, and school staff
- Discussed and offered options for tutoring
- Discussed the consequences of dropping out
- Discussed and offered options for continuing education in a different environment (e.g., Adult Education, home school, virtual school, hospital homebound)
- Discussed and offered alternative options for graduation (e.g., diploma options, GED Exit Option or GED Testing)
- Conducted home visits
- Referred student to agencies/programs to address problems interfering with school success (e.g., substance abuse counseling, psychological counseling, family counselor)
- Discussed and offered participation in a credit recovery course/program
- Discussed and offered access to Dropout Prevention Program(s) (e.g., alternative education, disciplinary, teenage parent)
- Tracked student progress (by teacher, counselor, social worker, graduation coach, etc.)
- Changed or revised course schedule
- Implemented intervention contracts (e.g. attendance or behavior)
- Student reported that school staff took no action
- Other

Please check and sign below to certify that each of the following statements were addressed by school personnel.

I am at least 16 years of age and it is my intent to terminate my school enrollment. I received counseling from a guidance counselor or other school personnel which addressed the following:

- Terminating school enrollment prior to graduation will likely reduce my potential earnings and negatively affect my career options.
- Termination of school enrollment will result in the revocation/denial of my driving privileges until age 18
- My reasons for leaving school prior to graduation.
- Possible actions that could keep me from leaving school prior to graduation.
- Options for continuing my education in a different environment, e.g., Adult Education or GED testing.
- For Bright Futures eligibility, GED students must complete credit requirements before taking GED exam.

Student Signature:	Date:
Parent/Guardian Signature: (if student is under 18 years of age)	Date:
School Personnel Signature:	Date:

Optional:

1. What is the highest level of education completed by your maternal parent/guardian? (check one)
Elementary Middle School High School College Graduate School Unknown
2. What is the highest level of education completed by your paternal parent/guardian? (check one)
Elementary Middle School High School College Graduate School Unknown

**Florida Department of Education
Exit Interview
(Designated School Personnel)**

To be completed by school guidance counselor or other school personnel:

School Name:	School District:
Student Name:	Withdrawal date:
Grade Level:	Student ID#:
Student DOB:	School Transcript: <i>(Please attach)</i>

What is the **primary** reason the student is terminating school enrollment (check one)

- | | |
|--------------------------|--|
| Classes not interesting | Failing classes |
| Marriage | Migrant |
| Employment | Truancy/absenteeism |
| Student/teacher conflict | Did not like school |
| Parenting | Expelled |
| Suspended to often | Failed to pass Florida Required Assessment |
| Friends dropped out | Family problems |
| Illness | Intimidated/Threatened/Bullied |
| Homeless | |

Other:

Was the student in an alternative program prior to withdrawal from school?

YES NO

If no, was an alternative program available

YES NO

If yes, describe the alternative program:

Had the student received individual counseling prior to this meeting: YES NO
 If no, was counseling made available to the student? YES NO

Has a child study team been convened on the student's behalf? YES NO
 If yes, please list the interventions taken by the child study team:

Was the student involved in school sponsored extracurricular activities YES NO
 Does the student have an IEP or Section 504 Accommodation Plan YES NO
 Has the student received any remediation services in the past two (2) years? YES NO
 If yes, please describe the remediation services:

What is the average number of days the student was absent over the past two (2) years Year 1 Year 2

How many unexcused absences or tardies has the student accumulated over the past two years?

Unexcused Absences:	Year 1	Year 2
Unexcused Tardies:	Year 1	Year 2

What interventions did the school attempt in response to unexcused absences or tardinesses of the student while enrolled?

- Communication between the school/teacher and the family/school
- Attendance contract
- Formal meeting with the parent
- Mentoring
- Changes to the learning environment
- Referral to other agencies/services on behalf of family needs
- Student counseling
- Truancy petition
- Tutoring
- Other (please describe)

Has the student ever been suspended? YES NO

Has the student ever been expelled? YES NO

Is the student eligible for the free/reduced lunch program? YES NO

Does the student plan to earn a GED? YES NO

If yes, inform student, for Bright Futures eligibility, GED students must complete credit requirements before taking GED exam.

Has the student been informed of options for continuing his/her education? YES NO

Has the parent been notified of the student's intent to terminate school enrollment? YES NO

If yes provide the date of parent notification:

The student has identified the following as actions that could be taken to keep them in school

Opportunities for real-world leaning (internships, service learning)

Better communication with your parents

Better teachers

Increased parental involvement

Smaller classes

Less freedom and more supervision from parents

More individualized instruction

Less freedom and more supervision from school officials

Better communication with your teachers

Other:

Has the student completed the student survey? YES NO

If no, how many attempts did the school make to obtain a completed survey from the student?

The following section is included to encourage dropout retrieval efforts.

Three (3) month follow-up: (Please check all that apply)

Method of contact:

- Letter (Level I) Phone Call (Level II) Home visit (Level III)
 Contact successful Contact unsuccessful

Employment status:

- Employed full-time Employed part-time Unemployed Unknown

Education status:

- Working on GED Earned GED Enrolled in another school (private/vocational) Unknown

Other (please explain)

Did the student return to school following this contract? YES NO

Final contact (prior to start of next school year)

Not applicable: Student returned to school Date:

Method of contact:

- Letter (level I) Phone call (level II) Home visit (level III)
 Contact successful Contact unsuccessful

Employment status:

- Employed full-time Employed part-time Unemployed Unknown

Education status:

- Working on GED Earned GED Enrolled in another school (private/vocational) Unknown

Other (please explain)

Did the student return to school following this contract? YES NO