
Creative Graduates Creative Futures Appendix 5: Survey questionnaire

Creative Graduates Creative Futures is a major longitudinal study undertaken between 2008 and 2010 of the early career patterns of more than 3,500 graduates in practice-based art, design, crafts and media subjects, qualifying in 2002, 2003 and 2004 from 26 UK higher education institutions.

For further details see www.creativegraduates.com.

Please complete the form as fully as you can and return it in the reply paid envelope.

If you prefer, you can fill this form in online at:
www.employmentresearch.co.uk/cgcf.htm

or, contact our Researcher, Will Hunt on 01273 873641, or email your number to him on: creative@ies.ac.uk and he will take your responses to the questions by phone.

Thank you for completing the questionnaire. Your responses will directly influence course design and higher education planning and lead to a greater understanding about the value of a creative arts education.

a study of the career patterns of graduates from UK courses in art, design, craft & media

CREATIVE GRADUATES CREATIVE FUTURES

Section A: Background information about your degree

A1 What was the full name/title of your undergraduate degree course? Write in e.g. BA Fine Art, FdA Fine Art.

A2a What was the MAIN subject of your undergraduate degree? Please write in.

A2b If applicable, what was the second subject of your undergraduate degree? Please write in.

A3 What was the name of your institution? Please write in.

A4 When did you start your course? Please enter the year e.g. 2001.

A5 When did you end the course? Please enter the year e.g. 2004.

A6 What is the classification of your degree? Please tick ONE only.

- | | | | | | |
|-------|--------------------------|---|------------------------|--------------------------|---|
| First | <input type="checkbox"/> | 1 | Pass | <input type="checkbox"/> | 5 |
| 2:1 | <input type="checkbox"/> | 2 | Pass (FdA) | <input type="checkbox"/> | 6 |
| 2:2 | <input type="checkbox"/> | 3 | Other (please specify) | | |
| Third | <input type="checkbox"/> | 4 | | <input type="checkbox"/> | 7 |

A7 Did you undertake course related work placement(s) during your course? Please tick all that apply.

- Yes, as a course requirement Continue
Yes, not as part of the course Continue
No Go to A8

A7a If YES, how many work placements did you do? Please write number in box.

A7b What was the TOTAL time spent on your work placement(s)? Please tick ONE only.

- | | | | | | |
|----------------|--------------------------|---|----------------|--------------------------|---|
| Up to 5 weeks | <input type="checkbox"/> | 1 | 25 to 34 weeks | <input type="checkbox"/> | 4 |
| 6 to 12 weeks | <input type="checkbox"/> | 2 | 35 to 44 weeks | <input type="checkbox"/> | 5 |
| 13 to 24 weeks | <input type="checkbox"/> | 3 | 45 weeks plus | <input type="checkbox"/> | 6 |

A7c In general, how useful was (were) your work placement(s) to the development of your career? Please tick ONE box only.

- | | | | | | |
|-------------------|--------------------------|---|---------------|--------------------------|---|
| Not at all useful | <input type="checkbox"/> | 1 | Fairly useful | <input type="checkbox"/> | 3 |
| Not very useful | <input type="checkbox"/> | 2 | Very useful | <input type="checkbox"/> | 4 |

A8 Did you undertake any vacation/term-time work during your course? Please tick all that apply.

- Yes, during vacation(s) Continue
Yes, during term-time Continue
No Go to A9

A8a In general, how useful was your vacation/term-time work to the development of your career? Please tick ONE box only.

- | | | | | | |
|-------------------|--------------------------|---|---------------|--------------------------|---|
| Not at all useful | <input type="checkbox"/> | 1 | Fairly useful | <input type="checkbox"/> | 3 |
| Not very useful | <input type="checkbox"/> | 2 | Very useful | <input type="checkbox"/> | 4 |

A14 Overall, how well would you say your course prepared you for the world of work? Please tick ONE box. *Not at all well* ¹ *Fairly well* ³
Not very well ² *Very well* ⁴

A15 Is there anything else you would like to say about your course that you feel is important? Please describe below.

A16 Have you accessed any of the following since you finished your degree? Please tick ONE box for each row.

	<i>Yes, and it was useful</i>	<i>Yes, but it was not useful</i>	<i>No, had no need to</i>	<i>No, did not realise it was available</i>	<i>No, not available</i>
	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
a) Careers advice.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
b) Information about vacancies/work opportunities	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
c) Networking opportunities	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
d) Opportunities for continuing professional development and developing new skills.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
e) Access to studio space/facilities	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
f) Business start-up advice/support.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵

Section B: Activities since graduating

B1 Which of the activities below are you (a) currently doing, (b) have done at ANY time since completing your course? Please tick as many as applicable for each time column.

	<i>(a) Current activity</i>	<i>(b) Activity since completing the course</i>
	<input type="checkbox"/>	<input type="checkbox"/>
a) Temporary employment (contract less than 3 months)	<input type="checkbox"/>	<input type="checkbox"/>
b) Fixed term employment (contract more than 3 months)	<input type="checkbox"/>	<input type="checkbox"/>
c) Permanent employment.....	<input type="checkbox"/>	<input type="checkbox"/>
d) Self employed (running own business).....	<input type="checkbox"/>	<input type="checkbox"/>
e) Self employed (freelance/on a commission).....	<input type="checkbox"/>	<input type="checkbox"/>
f) Further study, education or training	<input type="checkbox"/>	<input type="checkbox"/>
g) Independent study/informal learning	<input type="checkbox"/>	<input type="checkbox"/>
h) Developing a portfolio/creative practice or doing studio work.....	<input type="checkbox"/>	<input type="checkbox"/>
i) Voluntary/unpaid work/work experience	<input type="checkbox"/>	<input type="checkbox"/>
j) Unemployed and looking for work.....	<input type="checkbox"/>	<input type="checkbox"/>
k) Time out/career break.....	<input type="checkbox"/>	<input type="checkbox"/>
l) Maternity/family caring responsibility	<input type="checkbox"/>	<input type="checkbox"/>
m) Other <i>(please specify below)</i>	<input type="checkbox"/>	<input type="checkbox"/>

B2 Since graduating from your course, have you done any paid teaching or lecturing? Please tick all that apply. *Yes, related to art, design, craft and media*
Yes, in another subject
No

B3 Since graduating from your course, have you worked in... Please tick all that apply.

	<i>Yes, paid</i>	<i>Yes, unpaid</i>	<i>No</i>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i) the creative industries (for an employer involved in the practice/production of art, design, craft or media)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ii) an area directly related to your degree?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Section C: Current employment and wider work-related activities

C1 In your working life, are you **CURRENTLY** doing any of the following: paid/unpaid employment/self employment; work-related activities such as volunteering; or work related to your creative practice such as studio work or preparing for an exhibition?

Yes ¹ Continue
 No ² Go to Section D

C2 How many of these activities/jobs are you doing at present?

One ¹ Two ² Three ³ 4 plus ⁴

If you are doing more than three activities/jobs, please tell us about the three you spend most time on.

C3 Which best describes your status in EACH activity/job? Tick ONE box only in each COLUMN. Please use the first column for your main activity/job.

	Activity/ Job 1	Activity/ Job 2	Activity/ Job 3
Self employed/freelance (own business/freelance/commission work etc.)	<input type="checkbox"/> ¹	<input type="checkbox"/> ¹	<input type="checkbox"/> ¹
Permanent employment (with wage/salary)	<input type="checkbox"/> ²	<input type="checkbox"/> ²	<input type="checkbox"/> ²
On a temporary/fixed term contract (with wage/salary)....	<input type="checkbox"/> ³	<input type="checkbox"/> ³	<input type="checkbox"/> ³
Unpaid work/volunteering/work related to your creative practice	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁴

C4 What label or title best describes each of these activities/jobs? Please write in for each.

C5 When did you start this activity/job?

Please give in MM / YYYY (e.g. 06/2007)

___ / ___ ___ / ___ ___ / ___

C6 In which industry/sector is each job/activity? Please tick ONE box only in each COLUMN.

	Activity/ Job 1	Activity/ Job 2	Activity/ Job 3
Advertising and publicity	<input type="checkbox"/> ⁰¹	<input type="checkbox"/> ⁰¹	<input type="checkbox"/> ⁰¹
Architecture.....	<input type="checkbox"/> ⁰²	<input type="checkbox"/> ⁰²	<input type="checkbox"/> ⁰²
Art market and antiques (incl. fine arts practice)	<input type="checkbox"/> ⁰³	<input type="checkbox"/> ⁰³	<input type="checkbox"/> ⁰³
Computer/video games and software	<input type="checkbox"/> ⁰⁴	<input type="checkbox"/> ⁰⁴	<input type="checkbox"/> ⁰⁴
Crafts	<input type="checkbox"/> ⁰⁵	<input type="checkbox"/> ⁰⁵	<input type="checkbox"/> ⁰⁵
Cultural heritage (museums, galleries, libraries and arts facilities).....	<input type="checkbox"/> ⁰⁶	<input type="checkbox"/> ⁰⁶	<input type="checkbox"/> ⁰⁶
Design.....	<input type="checkbox"/> ⁰⁷	<input type="checkbox"/> ⁰⁷	<input type="checkbox"/> ⁰⁷
Fashion, textiles and apparel	<input type="checkbox"/> ⁰⁸	<input type="checkbox"/> ⁰⁸	<input type="checkbox"/> ⁰⁸
Film, video and photography.....	<input type="checkbox"/> ⁰⁹	<input type="checkbox"/> ⁰⁹	<input type="checkbox"/> ⁰⁹
Performing arts and music.....	<input type="checkbox"/> ¹⁰	<input type="checkbox"/> ¹⁰	<input type="checkbox"/> ¹⁰
Publishing and literary arts (incl. news)	<input type="checkbox"/> ¹¹	<input type="checkbox"/> ¹¹	<input type="checkbox"/> ¹¹
TV and Radio	<input type="checkbox"/> ¹²	<input type="checkbox"/> ¹²	<input type="checkbox"/> ¹²
National/local government	<input type="checkbox"/> ¹³	<input type="checkbox"/> ¹³	<input type="checkbox"/> ¹³
IT/business services	<input type="checkbox"/> ¹⁴	<input type="checkbox"/> ¹⁴	<input type="checkbox"/> ¹⁴
Manufacturing/engineering	<input type="checkbox"/> ¹⁵	<input type="checkbox"/> ¹⁵	<input type="checkbox"/> ¹⁵
Health and social work.....	<input type="checkbox"/> ¹⁶	<input type="checkbox"/> ¹⁶	<input type="checkbox"/> ¹⁶
Banking and finance	<input type="checkbox"/> ¹⁷	<input type="checkbox"/> ¹⁷	<input type="checkbox"/> ¹⁷
Retailing	<input type="checkbox"/> ¹⁸	<input type="checkbox"/> ¹⁸	<input type="checkbox"/> ¹⁸
Hotel and catering.....	<input type="checkbox"/> ¹⁹	<input type="checkbox"/> ¹⁹	<input type="checkbox"/> ¹⁹
Leisure	<input type="checkbox"/> ²⁰	<input type="checkbox"/> ²⁰	<input type="checkbox"/> ²⁰
Research and development.....	<input type="checkbox"/> ²¹	<input type="checkbox"/> ²¹	<input type="checkbox"/> ²¹
Education.....	<input type="checkbox"/> ²²	<input type="checkbox"/> ²²	<input type="checkbox"/> ²²
Non-profit making organisations/charities.....	<input type="checkbox"/> ²³	<input type="checkbox"/> ²³	<input type="checkbox"/> ²³
Other (please specify below each column as appropriate).	<input type="checkbox"/> ²⁴	<input type="checkbox"/> ²⁴	<input type="checkbox"/> ²⁴

C7 Is this activity/job full-time or part-time? Please tick ONE box only in each COLUMN.

	Activity/ Job 1	Activity/ Job 2	Activity/ Job 3
Full-time (25 or more hours a week)	<input type="checkbox"/> ¹	<input type="checkbox"/> ¹	<input type="checkbox"/> ¹
Part-time (less than 25 hours a week)	<input type="checkbox"/> ²	<input type="checkbox"/> ²	<input type="checkbox"/> ²

C8 Approximately, how many other people are there in the organisation as a whole (excluding yourself) in which you undertake each activity/job? Please tick ONE box only in each COLUMN.

	Activity/ Job 1	Activity/ Job 2	Activity/ Job 3
No others (freelance/sole trader/solo activity).....	<input type="checkbox"/> ¹	<input type="checkbox"/> ¹	<input type="checkbox"/> ¹
1 to 10.....	<input type="checkbox"/> ²	<input type="checkbox"/> ²	<input type="checkbox"/> ²
11 to 50.....	<input type="checkbox"/> ³	<input type="checkbox"/> ³	<input type="checkbox"/> ³
51 to 250.....	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁴
Over 250.....	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁵	<input type="checkbox"/> ⁵
Don't know.....	<input type="checkbox"/> ⁶	<input type="checkbox"/> ⁶	<input type="checkbox"/> ⁶

C9 Please indicate the extent to which you agree or disagree with the following statements about your current working situation. Please tick ONE box on each ROW.

	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree
a) I am satisfied with my work	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
b) I feel underemployed in my work.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
c) I feel I am able to be creative in my work	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
d) Generally, my work is relevant to art, design, craft and media.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
e) Generally, my work is related to the subject of my degree	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
f) I have little autonomy and independence in my work.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
g) I feel there are career opportunities open to me	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵
h) I feel that my work is in my chosen career	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴	<input type="checkbox"/> ⁵

Section D: Further study

D1 Have you undertaken any further study, education or training since finishing your undergraduate degree?

Yes ¹ Continue No ² Go to Section E

D2 Since graduating, how many MONTHS in total have you spent in further study, education or training?

D3 Have you done any courses leading to a postgraduate qualification since graduating? Please tick ONE box and then provide details as indicated.

Yes ¹ continue No ² go to D4

D3a If YES, what was/were the title(s) of the qualification?

Masters (MA/MSc/MPhil)

PhD/DPhil

PGCE

PG Diploma

Other postgraduate qualification (please specify below)

D3b What was the subject of the course?

D3c In which institution did you do the course?

D4 Have you done any short skills based courses since graduating?

No

Yes, in an art, design, craft or media subject

Yes, in a business skills area

Yes, other (please specify subject below)

D5 If you have done any other further study, education or training that you have not already told us about, please briefly describe below.

D6 Why did you undertake this course/these courses? Please tick ALL that apply.

- | | | | |
|---|--------------------------|---|--------------------------|
| a) To obtain a professional qualification | <input type="checkbox"/> | g) To develop further skills/knowledge..... | <input type="checkbox"/> |
| b) To enhance my job opportunities..... | <input type="checkbox"/> | h) To develop my creative practice | <input type="checkbox"/> |
| c) To make more contacts..... | <input type="checkbox"/> | i) To give me time to decide on a career..... | <input type="checkbox"/> |
| d) Out of interest/personal fulfilment | <input type="checkbox"/> | j) To help me earn more money in the long term..... | <input type="checkbox"/> |
| e) Because I had nothing else to do..... | <input type="checkbox"/> | k) Other (please specify) | <input type="checkbox"/> |
| f) At request of my employer | <input type="checkbox"/> | | <input type="checkbox"/> |

Section E: Careers and looking to the future

E1 When you finished your UNDERGRADUATE degree course, what kind of career did you aspire to (what were your goals)? Please write in.

E2a Have your aspirations changed? Yes ¹ No ² Unsure ³

E2b If YES, what kind of career do you now aspire to? Please write in.

E3 How close to your chosen career do you consider yourself to be? Please tick ONE box.

Not at all close <input type="checkbox"/> ¹	Very close <input type="checkbox"/> ⁴
Not very close <input type="checkbox"/> ²	In my chosen career <input type="checkbox"/> ⁵
Fairly close <input type="checkbox"/> ³	Not applicable <input type="checkbox"/> ⁶

E4 If you are not yet in your chosen career, how likely do you think it is that you will be during the next five years? Please tick ONE box.

Not at all likely <input type="checkbox"/> ¹	Fairly likely <input type="checkbox"/> ³
Not very likely <input type="checkbox"/> ²	Very likely <input type="checkbox"/> ⁴

E5 If you think it is unlikely that you will get into your chosen career in the next five years, why do you think this is the case? Please give your reasons in the space below.

E6 How important are the following in the decisions you make about your career? Please tick ONE box for each row.

	<i>Not at all important</i>	<i>Not very important</i>	<i>Fairly important</i>	<i>Very important</i>
a) Earning a good salary.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
b) Being able to work for myself	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
c) Being able to pursue/maintain my creative practice	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
d) Being recognised/respected by my peers	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
e) Making full use of my knowledge and skills.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
f) Having time with my family and friends	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
g) Having a stable/regular source of income	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
h) Being able to try new things	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
i) Working with people from different disciplines	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
j) Having time to pursue hobbies/interests outside the workplace.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
k) Being able to continue to improve knowledge and skills	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
l) Being able to contribute to society/help others.....	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
m) To identify myself as an artist/designer	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴
n) Other (please specify)	<input type="checkbox"/> ¹	<input type="checkbox"/> ²	<input type="checkbox"/> ³	<input type="checkbox"/> ⁴

E7 During the next five years, how likely do you think it is that you will be doing any of the following? Please tick ONE box for each row.

	<i>Not at all likely</i>	<i>Not very likely</i>	<i>Fairly likely</i>	<i>Very likely</i>	<i>Not applicable</i>
a) Doing the same as present	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
b) Doing a higher level job in the same career	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
c) Changing working hours	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
d) Doing a range of jobs/activities	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
e) Working freelance	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
f) Running my own business	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
g) Changing career direction	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
h) Training / learning new skills	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
i) Doing something completely different	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
j) Parenthood/looking after dependents	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
k) Other (<i>please specify</i>)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

Section F: About you

F1 Where is/was your main area of residence? i) before starting your UNDERGRADUATE degree course, and ii) currently. Please tick ONE box for each column.

	<i>i) Before your course</i>	<i>ii) Current residence</i>
Northern Ireland	<input type="checkbox"/> 01	<input type="checkbox"/> 01
Scotland	<input type="checkbox"/> 02	<input type="checkbox"/> 02
Wales	<input type="checkbox"/> 03	<input type="checkbox"/> 03
East Anglia	<input type="checkbox"/> 04	<input type="checkbox"/> 04
East Midlands	<input type="checkbox"/> 05	<input type="checkbox"/> 05
Greater London	<input type="checkbox"/> 06	<input type="checkbox"/> 06
North East England	<input type="checkbox"/> 07	<input type="checkbox"/> 07
North West England	<input type="checkbox"/> 08	<input type="checkbox"/> 08
South East England	<input type="checkbox"/> 09	<input type="checkbox"/> 09
South West England	<input type="checkbox"/> 10	<input type="checkbox"/> 10
West Midlands	<input type="checkbox"/> 11	<input type="checkbox"/> 11
Yorkshire & Humberside	<input type="checkbox"/> 12	<input type="checkbox"/> 12
Other UK (e.g. Channel Islands/Isle of Man).....	<input type="checkbox"/> 13	<input type="checkbox"/> 13
Overseas country (<i>please specify below</i>)	<input type="checkbox"/> 14	<input type="checkbox"/> 14

F2 When you began your UNDERGRADUATE degree course, how were you classed? Please tick ONE box.

- A 'home' (i.e. UK domiciled) student 1
- A European Union (EU) student 2
- A non-EU/overseas student 3
- Don't know 4

F3 What was your age on your last birthday? Enter in years.

F4 What is your gender?

- Male 1
- Female 2

F5a Do you consider yourself to have a disability? (e.g. dyslexia, hearing impairment etc.)

- Yes 1
- No 2

F5b If YES, please give brief details.

F6 Do you have any children who normally live with you and who are financially dependent on you?

- Yes 1
- No 2

F7 Which of the following qualifications did you have PRIOR to starting your undergraduate degree course? Please tick ALL that apply.

- | | | |
|--|--|--|
| a) Art and Design Foundation Course <input type="checkbox"/> | e) Access to HE <input type="checkbox"/> | i) AVCE/VCE..... <input type="checkbox"/> |
| b) Foundation degree (2 year) <input type="checkbox"/> | f) BTEC National/SCOTVEC dip/cert.. <input type="checkbox"/> | j) NVQ/SVQ Level 3, GNVQ Advanced <input type="checkbox"/> |
| c) HNC/HND..... <input type="checkbox"/> | g) A/AS level/Advanced Highers/Highers..... <input type="checkbox"/> | k) Other (please specify) <input type="checkbox"/> |
| d) First degree (BA/BSc) <input type="checkbox"/> | h) GCSEs/Scottish Standard Grades.. <input type="checkbox"/> | <input type="checkbox"/> |

F8 How would you describe your ethnic group? Please tick ONE box.

- | | |
|---|---|
| White <input type="checkbox"/> 1 | Black or Black British <input type="checkbox"/> 4 |
| Mixed <input type="checkbox"/> 2 | Chinese <input type="checkbox"/> 5 |
| Asian or Asian British <input type="checkbox"/> 3 | Other (please specify) <input type="checkbox"/> 6 |
| <input type="text"/> | |

F9 Has anyone else in your family studied at university/polytechnic or college of higher education?

- | | |
|---|-------------------------------------|
| Yes, parent(s) <input type="checkbox"/> | No <input type="checkbox"/> |
| Yes, other family member <input type="checkbox"/> | Don't know <input type="checkbox"/> |

F10 What is your personal gross annual income? Please tick ONE box only.

- | | |
|--|--|
| £5,000 or less <input type="checkbox"/> 1 | £20,001-£30,000 <input type="checkbox"/> 5 |
| £5,001-£10,000 <input type="checkbox"/> 2 | £30,001-£40,000 <input type="checkbox"/> 6 |
| £10,001-£15,000 <input type="checkbox"/> 3 | £40,001-£50,000 <input type="checkbox"/> 7 |
| £15,001-£20,000 <input type="checkbox"/> 4 | over £50,000 <input type="checkbox"/> 8 |

F11 How well would you say that you are managing financially these days? Please tick ONE box only.

- | | |
|---|---|
| Living comfortably <input type="checkbox"/> 1 | Finding it difficult <input type="checkbox"/> 3 |
| Getting by <input type="checkbox"/> 2 | Don't know/Not sure <input type="checkbox"/> 4 |

G: Future contact

Data Protection Act 1998: The personal and sensitive information you provide in this form will be processed by IES and Employment Research Ltd (the research team), on behalf of the partnership of universities and colleges funding the research (the research partners and data controller), ONLY for the purpose of the Creative Graduates Creative Futures research study in compliance with their duties and obligations under the Act. The research partner organisations will not have access to individual responses and no individual will be identified in any report or summary data provided to them.

G1 We will donate 50p to charity for each questionnaire returned to us and have selected three charities to benefit. Please indicate which of these you would like your 50p to go to.

- | |
|---|
| Art for Refugees in Transition (ART) <input type="checkbox"/> 1 |
| Marie Curie Cancer Care <input type="checkbox"/> 2 |
| UNICEF <input type="checkbox"/> 3 |

G2 There is a top prize of £1000 in gift vouchers and a total prize fund of £3000 for 20 winners.
Please tick the box if you would like to be entered into the prize draw.

G3 The research team want to explore career stories in a little more detail. Please tick the box if you are willing to be contacted by email/telephone to discuss your early career experiences further.

G4 Please tick the box if you would like to receive information by email about the findings from the research.

G5 Please provide your contact details below. You will only be contacted for the purpose(s) you have indicated above. No other organisation will have access to your details.

Name:

Email address:

Telephone number:

Home address:

**Thank you once again for your help - your response will make a difference.
We welcome any further comments. Please provide these on a separate sheet.
Please return your questionnaire and extra sheets in the reply paid envelope to:
Employment Research, SEA 1044, FREEPOST, PO Box 2106, Hove, East Sussex, BN3 5ZB**