

## APPENDIX J.5.c – STUDENT SURVEY OF COUNSELOR EFFECTIVENESS

The following tentative agreement regarding the incorporation of Appendix J.5.c into the ratified contract is agreed.

For the El Camino College Federation of Teachers

By: Jaura C. Saldivar  
Chief Negotiator

Date: 4/10/23

For the El Camino College District

By: Jane Miyashiro  
Chief Negotiator

Date: 4/6/2023

### Student Survey of Counselor Effectiveness

#### DIVISION OF \_\_\_\_\_

Directions: Please mark the response which is closest to your opinion. If you cannot answer, or the question is not applicable, mark opinion Does Not Apply. When you are finished, please click the "Submit" button.

#### Student Demographics

What is your goal at El Camino College? (Mark all that apply)

- No degree (personal development, lifelong learning, etc.)
- Certificate
- Associate's degree
- Transfer to a college/university

What is your major? \_\_\_\_\_

Counting this semester, how many semesters of college have you attended?

- 1-2 semesters
- 3-4 semesters
- 5 or more semesters

Age:

- 17 or younger
- 18-24
- 25-34
- 45-54
- 55+

Reason you scheduled a meeting with a counselor (Mark all that apply)

- Transfer / University information
- Planning classes (educational plan)
- Career exploration
- Disability accommodations
- Graduation/Degree information
- Referral to support services (Example: Tutoring, Health Services, Financial Aid)
- Other

What topics were discussed in your meeting? (Mark all that apply)

Academics

- Steps to enrollment (applying, orientation, English/Math placement)
- Planning classes (educational plan)
- Choosing a major
- Job or Career information
- Completing certificate or degree requirements
- University transfer requirements
- Probation/Dismissal

Student success

- Course progress or concerns
- Referred by an instructor
- Study skills
- Personal challenges

Referrals

- Participating in campus activities, events, clubs, or organizations
- Referrals for support services (on/off campus)
- Basic needs resources
- Financial Aid
- Student Health Services

Special programs

- Athletic Eligibility
- Disability accommodations
- Veterans' Certification

Other \_\_\_\_\_

Please mark your choice for the following questions:

**The response choices for each question are:**

- A - Strongly Agree
- B - Agree
- C – Disagree
- D - Strongly Disagree
- E - Does Not Apply

1. During our meeting, I felt comfortable and free to ask questions.
2. The counselor listened well during our meeting.
3. The counselor provided useful information to help me make progress in my goal(s).
4. The counselor's presentation of material was clear and organized.
5. The counselor used our meeting time effectively.
6. I got the information I needed or the counselor will provide a follow-up with further needed information.
7. The counselor responded to my questions promptly, clearly and thoroughly.
8. The counselor informed me of resources to support my learning and educational goals.
9. I would return to this counselor and/or recommend this counselor to another student.
10. Overall, I am satisfied with the meeting with the counselor.

Please include additional comments in regards to meeting. All comments will be typed to maintain confidentiality before the counselor views them.