BACKGROUND

Some important questions



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The U.S. Department of Labor and the National Center for O^*NET Development Form F R1

OMB#1205-0421

Expires: 11/30/2024 Version: 507F

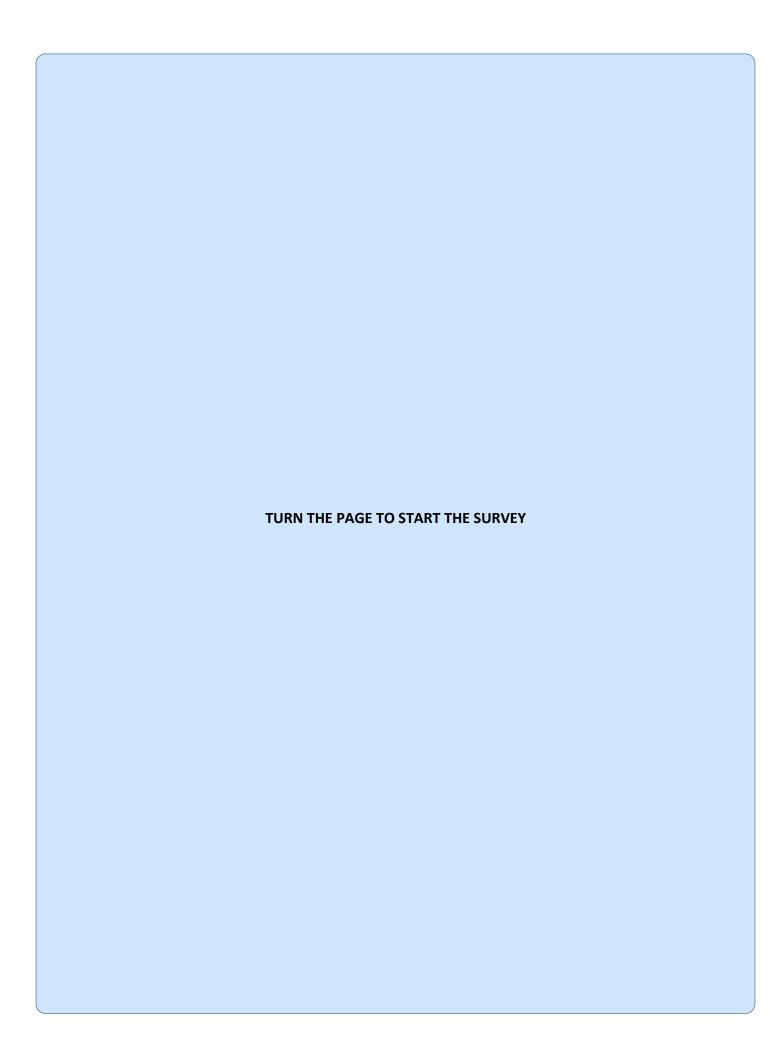
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Persons are not required to respond to this collection of information unless it displays a currently valid OMB control number. Respondents' obligation to reply to these reporting requirements is voluntary. Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, and completing and reviewing the collection of information.

Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to the U.S. Department of Labor, Office of Workforce Investment, Attn: O*NET Project, Frances Perkins Building, Mail Stop C4526, 200 Constitution Ave., NW, Washington, DC 20210 (OMB Control Number 1205-0421).

Return to: Research Triangle Institute Research Operations Center ATTN: O*NET Data Receipt 5265 Capital Boulevard Raleigh, NC 27616-2925



Getting Started

| | Mark your response by placing a check mark, an "X," or completely filling in the circle: or or or | | | | | | | |
|---|--|---|--|--|--|--|--|--|
| | _ | I of this project is to get accurate, up-to-date information on the occupation from a diverse and ntative set of experts in the field. Please answer the following questions to help us achieve this goal | | | | | | |
| N | satisf plann | for children in private households and provide support and expertise to parents in ying children's physical, emotional, intellectual, and social needs. Duties may include meal ling and preparation, laundry and clothing care, organization of play activities and outings, oline, intellectual stimulation, language activities, and transportation. | | | | | | |
| 1. When were you last active in this occupation? Please consider the last time you performed work, supervised workers, conducted training, or taught educational courses in the occupation. ○ Currently active in this occupation ○ Within the last 6 months ○ At least 6 months ago, but less than 1 year ○ One year or more ago ○ Never active in this occupation → Go to 7 | | | | | | | | |
| | → 2. | What is the title of your most recent job in this occupation? | | | | | | |
| | 3. | In your most recent job in this occupation, were you employed part-time or full-time? Part-time Full-time | | | | | | |
| | 4. | Which of the following best describes your employer in your most recent job in this occupation? Family business Self-employed Government Private for-profit company Non-profit organization, including tax-exempt and charitable organizations Academic institution Other (Specify) | | | | | | |
| | | | | | | | | |

| | 5. | How many years have you performed the work described in the occupation listed on the previous page? Ten years or more At least 5 years, but less than 10 years At least 3 years, but less than 5 years At least 1 year, but less than 3 years Less than 1 year Never performed work in the occupation | | | |
|-----|----|---|--|--|--|
| | 6. | How much total experience do you have related to this occupation? Please include experience performing work, supervising workers, conducting training, and teaching educational courses in this occupation. Ten years or more At least 5 years, but less than 10 years At least 3 years, but less than 5 years At least 1 year, but less than 3 years Less than 1 year | | | |
| 7. | | Female Male Transgender I use a different term: | | | |
| 8. | | at is your age? Less than 21 years old 21-40 years old 41-60 years old 61 years old or older | | | |
| 9. | | you of Hispanic, Latino, or Spanish origin? Yes No | | | |
| 10. | | American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White Other (Specify) | | | |

| 11. | What is the highest level of education that you have completed? |
|-----|--|
| | C Less than a High School Diploma |
| | High School Diploma or the equivalent (such as a GED) |
| | O Post-Secondary Certificate |
| | Some College Courses |
| | Associate's Degree or other 2-year degree |
| | Bachelor's Degree |
| | O Post-Baccalaureate Certificate |
| | Master's Degree |
| | O Post-Master's Certificate |
| | O Doctor's Degree – Professional Practice (such as a J.D. for Law or an M.D. for Medicine) |
| | O Doctor's Degree – Research/Scholarship (such as a Ph.D.) |
| | O Post-Doctoral Training |
| | |
| 12. | Are you deaf or do you have serious difficulty hearing? |
| | ○ Yes |
| | ○ No |
| | |
| 13. | Are you blind or do you have serious difficulty seeing even when wearing glasses? |
| | ○ Yes |
| | ○ No |
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Please return your completed questionnaire in the enclosed envelope to:

RTI Research Operations Center 5265 Capital Blvd Raleigh, NC 27616-2925

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