## Employment Questionnaire for NHS Students

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Your Name	Year of Graduation				
Background Questions:					
A. Have you ever applied for a job?	(Y)	) (N	)		
B. Did you get the job you applied for	or? (Y)	) (N	)		
C. Do you know how to get a job?	(Y)	) (N	)		
The Past:					
1. Did you have a job last summer?	(Y)	) (N	)		
2. If you answered "Yes" to question On	e, what is the name of t	he indi	vidual or	business	that
employed you?					
3. What was your hourly rate of pay?					
The Present:					
4. Do you now have a job after school of	or on weekends? (includ	ling bal	oy sitting)	(Y)	(N)
5. If you answered "Yes" to question Fou	ır, what is the name of t	he indi	ividual or	business	that
employs you?					
6. What is your hourly rate of pay?					
7. Are you currently active as a voluntee	r with a nonprofit orga	nizatio	n? (Y)	(N)	
8. If you answered "Yes" to question Sev	en, what is the name of	the or	ganizatior	n that	
employed you?					
	(OVER)				

9. Do you currently have conflicts (school, athletics) that prevent you	ou froi	n getting a job?
The Future:		
10. If you answered "Yes" to question One, do you plan to work fo	r this i	ndividual or business
during the December holiday vacation or next summer?	(Y)	(N)
11. What would be your dream job at this point in your life?		