



2010

# Survey of Doctorate Recipients

Conducted by  
The National Opinion Research Center  
at the University of Chicago for



The National Science Foundation *and* The National Institutes of Health

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First Name  M.I.

Last Name

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State  ZIP Code

Office Use Only				
RC <input type="checkbox"/>	Edit <input type="checkbox"/>	CADE <input type="checkbox"/>	VER <input type="checkbox"/>	Adj <input type="checkbox"/>

OMB No.: 3145-0020  
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## INSTRUCTIONS

Thank you for taking the time to complete this questionnaire. Directions for filling it out are provided with each question.

- In order to get comparable data, we will be asking you to refer to the week of October 1, 2010 when answering most questions.
- Follow all appropriate skip instructions after marking a box. If no skip instruction is provided, you should continue to the next question.

**Thank you again for your help; we really appreciate it.**

## Part A - Employment Situation

**A1. Were you working for pay or profit during the week of October 1, 2010?**

*Working includes being self-employed, on a postdoctoral appointment, or on any type of paid or unpaid leave, including vacation.*

Use an X to mark your answer.

1  Yes → **Go to question A8**

2  No

**A2. (If No) Did you look for work during the four weeks preceding October 1, 2010? This would be between September 3<sup>rd</sup> and October 1<sup>st</sup>.**

1  Yes

2  No

**A3. What were your reasons for not working during the week of October 1, 2010?**

Mark Yes or No for each item.

		Yes	No
		↓	↓
1	Retired.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>

If Yes → 

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Year retired

2 On layoff from a job.....1  2

3 Student.....1  2

4 Family responsibilities.....1  2

5 Chronic illness or permanent disability.....1  2

6 Suitable job not available.....1  2

7 Did not need or want to work.....1  2

8 Other – Specify .....1  2

**A4. Prior to the week of October 1, 2010, when did you last work for pay or profit?**

0  ← **Mark this box if you never worked for pay or profit and then go to page 10, question D1**

LAST WORKED 

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Month Year

**A5. What was the title of the last job you held prior to the week of October 1, 2010?**

*Example: Physics professor*

**A6. What kind of work were you doing on this last job – that is, what were your duties and responsibilities on your last job? Please be as specific as possible, including any area of specialization.**

*Example: Taught physics and conducted research. Specialized in high energy physics.*

**A7. Using the JOB CATEGORY list on pages 16-17, choose the code that best describes the last job you held prior to the week of October 1, 2010.**

CODE 

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 → **Go to page 8, question A42**

**A8. Although you were working during the week of October 1, had you previously retired from any position?**

*Examples of retirement include mandatory retirement, early retirement, or voluntary retirement.*

1  Yes → 

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Year retired

2  No

## Principal Employer

**A9. Who was your principal employer during the week of October 1, 2010?**

*If you had more than one job, report the one for which you worked the most hours that week.*

*If your employer had more than one location, report the location that employed you.*

*If you worked for a contracting or consulting company, report the name of that company, not the client organization.*

Employer Name
Department/Division
City/Town
State
ZIP Code

**A10. What was that employer's main business or industry – that is, what did that employer make or do?**

*If your principal employer had more than one type of business, report the type of business primarily performed at the location where you worked.*

*Example: Production of microprocessor chips*

EMPLOYER'S MAIN BUSINESS


**A11. Counting all locations where this employer operates, how many people work for your principal employer? Your best estimate is fine.**

*Mark one answer.*

- 1  10 or fewer employees
- 2  11 - 24 employees
- 3  25 - 99 employees
- 4  100 - 499 employees
- 5  500 - 999 employees
- 6  1,000 - 4,999 employees
- 7  5,000 - 24,999 employees
- 8  25,000+ employees

**A12. Did your principal employer come into being as a new business within the past 5 years?**

- 1  Yes
- 2  No

**A13. Which one of the following best describes your principal employer during the week of October 1, 2010? Were you...**

*Mark one answer.*

- 1  SELF-EMPLOYED or a BUSINESS OWNER in a non-incorporated business, professional practice, or farm
- 2  in an incorporated business, professional practice, or farm
- 3  PRIVATE SECTOR employee in a for-profit company or organization
- 4  in a non-profit organization (including tax-exempt and charitable organizations)
- 5  GOVERNMENT employee in a local government (e.g., city, county, school district)
- 6  in a state government (including state colleges/universities)
- 7  in the U.S. military service, active duty or Commissioned Corps (e.g., USPHS, NOAA)
- 8  in the U.S. government (e.g., civilian employee)
- 9  OTHER type of employee – *Specify type of employer*

**A14. Was your principal employer an educational institution?**

- 1  Yes
- 2  No → **Go to page 4, question A19**

**A15. (If Yes) Was the educational institution where you worked a...**

Mark one answer.

- 1  Preschool, elementary, middle, or secondary school or system
- 2  Two-year college, community college, or technical institute
- 3  Four-year college or university, other than a medical school
- 4  Medical school (including university-affiliated hospital or medical center)
- 5  University-affiliated research institute
- 6  Other – Specify

**Go to page 4, question A19**

**A16. During the week of October 1, 2010, what type of academic position(s) did you hold at this institution?**

Mark Yes or No for each item.

	Yes	No
	↓	↓
1 President, Provost, or Chancellor (any level) .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>
2 Dean (any level), department head, or department chair.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>
3 Research faculty, scientist, associate, or fellow .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>
4 Teaching faculty.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>
5 Adjunct faculty.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>
6 Postdoc (e.g., postdoctoral fellow or associate) .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>
7 Research assistant .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>
8 Teaching assistant.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>
9 Other position – Specify	1 <input type="checkbox"/>	2 <input type="checkbox"/>

**A17. What was your faculty rank?**

Mark one answer.

- 1  Not applicable: no ranks designated at this institution
- 2  Not applicable: no ranks designated for my position
- 3  Professor
- 4  Associate Professor
- 5  Assistant Professor
- 6  Instructor
- 7  Lecturer
- 8  Other – Specify

**A18. What was your tenure status?**

Mark one answer.

- 1  Not applicable: no tenure system at this institution
- 2  Not applicable: no tenure system for my position
- 3  Tenured → Year tenured

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- 4  On tenure track but not tenured
- 5  Not on tenure track



**A27. To what extent was your work on your principal job related to your first U.S. doctoral degree? Was it...**

Mark one answer.

- 1  Closely related
- 2  Somewhat related
- 3  Not related

Go to question A30

**A28. (If Not related) Did these factors influence your decision to work in an area outside the field of your first U.S. doctoral degree?**

Mark Yes or No for each item.

- |                                                                          | Yes<br>↓                   | No<br>↓                    |
|--------------------------------------------------------------------------|----------------------------|----------------------------|
| 1 Pay, promotion opportunities .....                                     | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 2 Working conditions (e.g., hours, equipment, working environment) ..... | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 3 Job location.....                                                      | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 4 Change in career or professional interests .....                       | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 5 Family-related reasons (e.g., children, spouse's job moved) .....      | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 6 Job in doctoral degree field not available.....                        | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 7 Some other reason – <i>Specify</i> <input type="checkbox"/>            | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |

**A29. Which two factors in question A28 were your most important reasons for working in an area outside the field of your first U.S. doctoral degree?**

Enter number of appropriate reason from question A28 above.

- 1  Most important reason
- 2  Second most important reason  
(Enter "0" if no second reason)

**A30. The next question is about your work activities on your principal job. Which of the following work activities occupied at least 10 percent of your time during a typical work week on this job?**

Mark Yes or No for each item.

- |                                                                                                         | Yes<br>↓                   | No<br>↓                    |
|---------------------------------------------------------------------------------------------------------|----------------------------|----------------------------|
| 1 Accounting, finance, contracts .....                                                                  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 2 Basic research – study directed toward gaining scientific knowledge primarily for its own sake .....  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 3 Applied research – study directed toward gaining scientific knowledge to meet a recognized need ..... | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 4 Development – using knowledge gained from research for the production of materials, devices .....     | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 5 Design of equipment, processes, structures, models .....                                              | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 6 Computer programming, systems or applications development .....                                       | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 7 Human resources – including recruiting, personnel development, training .....                         | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 8 Managing or supervising people or projects .....                                                      | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 9 Production, operations, maintenance (e.g., chip production, operating lab equipment) .....            | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 10 Professional services (e.g., health care, counseling, financial services, legal services) .....      | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 11 Sales, purchasing, marketing, customer service, public relations .....                               | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 12 Quality or productivity management .....                                                             | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 13 Teaching .....                                                                                       | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 14 Other – <i>Specify</i> <input type="checkbox"/>                                                      | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |

**A31. On which two activities in question A30 did you work the most hours during a typical week on this job?**

Enter number of appropriate activity from question A30 above.

- 1  |  Activity most hours
- 2  |  Activity second most hours  
(Enter "0" if no second most)

**A32. Did you supervise the work of others as part of the principal job you held during the week of October 1, 2010?**

Mark "Yes" if you recommended or initiated personnel actions such as hiring, firing, evaluating, or promoting others.

Teachers should not count students.

- 1  Yes
- 2  No → **Go to question A34**

**A33. (If Yes) How many people did you typically...**

- |                                                                      | Number supervised                                                                      |
|----------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| 1 Supervise <u>directly</u> ? .....                                  | <input style="width: 50px; height: 20px;" type="text"/><br><i>(If none, enter "0")</i> |
| 2 Supervise <u>indirectly</u> through subordinate supervisors? ..... | <input style="width: 50px; height: 20px;" type="text"/><br><i>(If none, enter "0")</i> |

**A34. Thinking about your principal job held during the week of October 1, please rate your satisfaction with that job's...**

Mark one answer for each item.

	Very satisfied	Somewhat satisfied	Somewhat dissatisfied	Very dissatisfied
	↓	↓	↓	↓
1 Salary .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
2 Benefits.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
3 Job security .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
4 Job location .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
5 Opportunities for advancement.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
6 Intellectual challenge.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
7 Level of responsibility .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
8 Degree of independence	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
9 Contribution to society....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

**A35. How would you rate your overall satisfaction with the principal job you held during the week of October 1, 2010?**

Mark one answer.

- 1  Very satisfied
- 2  Somewhat satisfied
- 3  Somewhat dissatisfied
- 4  Very dissatisfied



**A36. As of the week of October 1, 2010, what was your basic annual salary on your principal job, before deductions?**

*Do not include bonuses, overtime, or additional compensation for summertime teaching or research. If you are not salaried, please estimate your earned income, excluding business expenses.*

\$		,		,						.00
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ANNUAL SALARY OR EARNED INCOME

**A37. Was this salary based on a 52-week year, or less than that?**

*Include paid vacation and sick leave.*

1  52-week year

2  Less than 52 weeks

NUMBER OF WEEKS PER YEAR

**A38. During a typical week on your principal job, how many hours did you work?**

NUMBER OF HOURS WORKED PER WEEK

***If fewer than 35 hours, go to question A39.***

***If 35 or more hours, go to question A41.***

**A39. (If fewer than 35 hours) Did you want to work 35 or more hours per week on your principal job?**

1  Yes

2  No

**A40. For which of the following reasons did you usually work fewer than 35 hours per week on the principal job you held during the week of October 1, 2010?**

Mark Yes or No for each item.

- |                                                                        | Yes<br>↓                                                                                                                                                                                                                                                                                                                                           | No<br>↓                    |              |  |  |  |  |  |  |  |
|------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|--------------|--|--|--|--|--|--|--|
| 1 Previously retired or semi-retired.....                              | 1 <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                         | 2 <input type="checkbox"/> |              |  |  |  |  |  |  |  |
| If Yes →                                                               | <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td colspan="4" style="text-align: center;">Year retired</td> </tr> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> |                            | Year retired |  |  |  |  |  |  |  |
| Year retired                                                           |                                                                                                                                                                                                                                                                                                                                                    |                            |              |  |  |  |  |  |  |  |
|                                                                        |                                                                                                                                                                                                                                                                                                                                                    |                            |              |  |  |  |  |  |  |  |
| 2 Student.....                                                         | 1 <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                         | 2 <input type="checkbox"/> |              |  |  |  |  |  |  |  |
| 3 Family responsibilities.....                                         | 1 <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                         | 2 <input type="checkbox"/> |              |  |  |  |  |  |  |  |
| 4 Full-time job not available .....                                    | 1 <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                         | 2 <input type="checkbox"/> |              |  |  |  |  |  |  |  |
| 5 Held more than one job .....                                         | 1 <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                         | 2 <input type="checkbox"/> |              |  |  |  |  |  |  |  |
| 6 Did not need or want to work more hours .....                        | 1 <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                         | 2 <input type="checkbox"/> |              |  |  |  |  |  |  |  |
| 7 Other – <i>Specify</i> <input style="width: 20px;" type="checkbox"/> | 1 <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                         | 2 <input type="checkbox"/> |              |  |  |  |  |  |  |  |
| <input style="width: 100%; height: 20px;" type="text"/>                |                                                                                                                                                                                                                                                                                                                                                    |                            |              |  |  |  |  |  |  |  |

**A41. Concerning your principal job during the week of October 1, 2010, were any of the following benefits available to you, even if you chose not to take them?**

Mark Yes or No for each item.

- |                                                                                | Yes<br>↓                   | No<br>↓                    |
|--------------------------------------------------------------------------------|----------------------------|----------------------------|
| 1 Health insurance that was at least partially paid by your employer .....     | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 2 A pension plan or a retirement plan to which your employer contributed ..... | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 3 A profit-sharing plan .....                                                  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 4 Paid vacation, sick, or personal days .....                                  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |

**A42. Thinking back now to 2009, was any of your work during 2009 supported by contracts or grants from the U.S. government?**

FEDERAL EMPLOYEES: Please answer "No."

Mark one answer.

- 0  Did not work in 2009 → **Go to question B1 on this page**
  - 1  Yes
  - 2  No
  - 3  Don't know
- } → **Go to question A44**

**A43. (If Yes) Which Federal agencies or departments were supporting your work?**

Mark all that apply.

- 1  Dept. of Defense (DOD)
- 2  Dept. of Education
- 3  Dept. of Energy (DOE)
- 4  National Institutes of Health (NIH)
- 5  Dept. of Health and Human Services (except NIH)
- 6  National Science Foundation (NSF)
- 7  Other – Specify

- 8  DON'T KNOW SOURCE AGENCY

**A44. Counting all jobs held in 2009, what was your total earned income for 2009, before deductions?**

*Include all wages, salaries, bonuses, overtime, commissions, consulting fees, net income from businesses, summertime teaching or research, or other work associated with scholarships.*

\$		,		,				.00
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TOTAL 2009 EARNED INCOME

## Part B - Past Employment

**B1. Were you working for pay or profit during both of these time periods – the week of October 1, 2008 and the week of October 1, 2010?**

- 1  Yes
- 2  No → **Go to page 9, question C1**

**B2. (If Yes) During these two time periods – the week of October 1, 2008, and the week of October 1, 2010 – were you working for...**

Mark one answer.

- 1  Same employer and in same type of job } → **Go to page 9, question C1**
- 2  Same employer but in different type of job
- 3  Different employer but in same type of job
- 4  Different employer and in different type of job

**B3. (If Different) Why did you change your employer or your job?**

Mark Yes or No for each item.

- |                                                                                                           | Yes                        | No                         |
|-----------------------------------------------------------------------------------------------------------|----------------------------|----------------------------|
|                                                                                                           | ↓                          | ↓                          |
| 1 Pay, promotion opportunities .....                                                                      | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 2 Working conditions (e.g., hours, equipment, working environment) .....                                  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 3 Job location .....                                                                                      | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 4 Change in career or professional interests .....                                                        | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 5 Family-related reasons (e.g., children, spouse's job moved) .....                                       | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 6 School-related reasons (e.g., returned to school, completed a degree) .....                             | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 7 Laid off or job terminated (includes company closings, mergers, buyouts, grant or contract ended) ..... | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 8 Retired .....                                                                                           | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 9 Some other reason – Specify <input style="width: 50px;" type="text"/>                                   | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |

### Part C - Other Work-Related Experiences

**C1.** During the past 12 months, did you take any work-related training, such as workshops or seminars?

*Include conferences or professional meetings only if you attended a training session at the conference or meeting.*

*Do not include college coursework for which you were enrolled in a degree program.*

- 1  Yes
- 2  No → **Go to question C4**

**C2.** (If Yes) For which of the following reasons did you take training during the past 12 months?

Mark Yes or No for each item.

- |                                                                                                   | Yes                        | No                         |
|---------------------------------------------------------------------------------------------------|----------------------------|----------------------------|
|                                                                                                   | ↓                          | ↓                          |
| 1 To improve skills or knowledge in your current occupational field .....                         | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 2 To increase opportunities for promotion or advancement in your current occupational field ..... | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 3 For licensure or certification in your current occupational field .....                         | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 4 To facilitate a change to a different occupational field .....                                  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 5 Required or expected by employer .....                                                          | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 6 For leisure or personal interest .....                                                          | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 7 Other – Specify <input type="checkbox"/> .....                                                  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |

**C3.** What was your most important reason from question C2 for taking training?

*Enter number of appropriate reason from question C2 above.*

MOST IMPORTANT REASON

**C4.** During the past 12 months, did you attend any professional society or association meetings or professional conferences?

*Include regional, national, or international meetings.*

- 1  Yes
- 2  No

**C5.** To how many regional, national, or international professional societies or associations do you currently belong?

NUMBER   
(If none, enter "0")

**C6.** When thinking about a job, how important is each of the following factors to you?

*Mark one answer for each item.*

- |                                       | Very important             | Somewhat important         | Somewhat unimportant       | Not important at all       |
|---------------------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
|                                       | ↓                          | ↓                          | ↓                          | ↓                          |
| 1 Salary.....                         | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 2 Benefits.....                       | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 3 Job security.....                   | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 4 Job location.....                   | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 5 Opportunities for advancement ..... | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 6 Intellectual challenge .....        | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 7 Level of responsibility .....       | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 8 Degree of independence ..           | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |
| 9 Contribution to society .....       | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> | 3 <input type="checkbox"/> | 4 <input type="checkbox"/> |

### Part D - Recent Educational Experiences

**D1. Between October 2008 and October 2010, did you complete another degree such as a master's or another doctorate?**

- 1  Yes  
 2  No → **Go to page 11, question D7**

**D2. (If Yes) What type of degree did you earn?**

*If you completed more than one degree, mark the level for the highest degree awarded.*

*Mark one answer.*

- 1  Bachelor's degree (e.g., BS, BA, AB)  
 2  Master's degree (e.g., MS, MA, MBA)  
 3  Doctorate (e.g., PhD, DSc, EdD)  
 4  Other professional degree (e.g., JD, LLB, MD, DDS, DVM) – *Specify*

- 5  Other – *Specify*

**D3. What was the primary field of study for this degree?**

PRIMARY FIELD OF STUDY

  
  


**D4. In what month and year was this degree awarded?**

	Month		Year		
DEGREE AWARDED			2	0	

**D5. From which academic institution did you receive this degree?**

College or University Name
Department
City/Town
State/Foreign Country

**D6. For which of the following reasons did you obtain this degree?**

*Mark Yes or No for each item.*

- |                                                                                          | Yes                        | No                         |
|------------------------------------------------------------------------------------------|----------------------------|----------------------------|
|                                                                                          | ↓                          | ↓                          |
| 1 To gain further education before beginning a career.....                               | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 2 To prepare for graduate school or further education .....                              | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 3 To change your academic or occupational field.....                                     | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 4 To gain <u>further</u> skills or knowledge in your academic or occupational field..... | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 5 For licensure or certification .....                                                   | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 6 To increase opportunities for promotion, advancement, or higher salary .....           | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 7 Required or expected by employer.....                                                  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 8 For leisure or personal interest.....                                                  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 9 Other – <i>Specify</i> <input type="checkbox"/>                                        | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |

**D7. During the week of October 1, 2010, were you enrolled in or taking courses at a college or university?**

- 1  Yes
- 2  No → **Go to page 12, question E1**

**D8. (If Yes) Were you taking courses or enrolled as...**

Mark one answer.

- 1  A full-time student in a degree program
- 2  A part-time student in a degree program
- 3  Not enrolled in a degree program, but taking courses

**D9. Toward what degree were you working?**

If you were working toward more than one degree, mark the level for the highest degree.

Mark one answer.

- 0  No specific degree → **Go to question D11**
- 1  Bachelor's degree (e.g., BS, BA, AB)
- 2  Master's degree (e.g., MS, MA, MBA)
- 3  Doctorate (e.g., PhD, DSc, EdD)
- 4  Other professional degree (e.g., JD, LLB, MD, DDS, DVM) – Specify type
- 5  Other – Specify type

**D10. What was the primary field of study for this degree?**

PRIMARY FIELD OF STUDY

  


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**D11. For which of the following reasons were you taking courses or enrolled?**

Mark Yes or No for each item.

- |                                                                                           | Yes                        | No                         |
|-------------------------------------------------------------------------------------------|----------------------------|----------------------------|
| 1 To gain further education before beginning a career .....                               | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 2 To prepare for graduate school or further education .....                               | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 3 To change your academic or occupational field .....                                     | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 4 To gain <u>further</u> skills or knowledge in your academic or occupational field ..... | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 5 For licensure or certification .....                                                    | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 6 To increase opportunities for promotion, advancement, or higher salary .....            | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 7 Required or expected by employer .....                                                  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 8 For leisure or personal interest .....                                                  | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 9 Other – Specify <input type="text"/> .....                                              | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |

**D12. Were any of your school-related costs for taking courses paid for by an employer?**

- 1  Yes
- 2  No

## Part E - Demographic Information

**E1. On October 1, 2010, were you...**

Mark one answer.

- 1  Married
  - 2  Living in a marriage-like relationship
  - 3  Widowed
  - 4  Separated
  - 5  Divorced
  - 6  Never married
- } → **Go to question E4**

**E2. (If Married or Living in a marriage-like relationship) During the week of October 1, 2010, was your spouse or partner working?**

- 1  Yes, full-time
- 2  Yes, part-time
- 3  No → **Go to question E4**

**E3. (If Yes) Did your spouse's or partner's duties on this job require the technical expertise of a bachelor's degree or higher in...**

Mark Yes or No for each item.

- |                                                                           | Yes<br>↓                   | No<br>↓                    |
|---------------------------------------------------------------------------|----------------------------|----------------------------|
| 1 Engineering, computer science, math, or the natural sciences .....      | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 2 The social sciences .....                                               | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |
| 3 Some other field (e.g., health, business, or education) – Specify ↴ ... | 1 <input type="checkbox"/> | 2 <input type="checkbox"/> |

**E4. As of the week of October 1, 2010, did you have any children living with you as part of your family?**

Only count children who lived with you at least 50 percent of the time.

- 1  Yes
- 2  No → **Go to page 13, question E6**

**E5. (If Yes) How many of these children living with you as part of your family were...**

If no children in a category, enter "0."

	Number of children
1 Under age 2 .....	<input style="width: 40px; height: 20px;" type="text"/>
2 Aged 2-5.....	<input style="width: 40px; height: 20px;" type="text"/>
3 Aged 6-11.....	<input style="width: 40px; height: 20px;" type="text"/>
4 Aged 12-18.....	<input style="width: 40px; height: 20px;" type="text"/>
5 Aged 19 or older.....	<input style="width: 40px; height: 20px;" type="text"/>

**E6. On October 1, 2010, were you living in the United States, Puerto Rico, or another U.S. territory, or were you living in another country?**

- 1  United States, Puerto Rico, or another U.S. territory
- 2  Another country

**E7. On October 1, 2010, were you a...**

- 1  U.S. citizen
- 2  Non-U.S. citizen → **Go to question E9**

**E8. (If U.S. citizen) Were you a U.S. citizen...**

Mark one answer.

- 1  Born in the United States, Puerto Rico, or another U.S. territory
- 2  Born abroad of U.S. citizen parent(s)
- 3  By naturalization
- Go to question E11**

**E9. (If Non-U.S. citizen) Were you a non-U.S. citizen...**

- 1  With a Permanent U.S. Resident Visa (Green Card)
- 2  With a Temporary U.S. Resident Visa

**E10. Of which country are you a citizen?**

COUNTRY

**E11. What is your birthdate?**

Month   Day   Year     **1 9**

**E12. The next several questions are designed to help us better understand the career paths of individuals with specific functional limitations.**

**E13. What is the USUAL degree of difficulty you have with...**

Mark one answer for each item.

	None ↓	Slight ↓	Moderate ↓	Severe ↓	Unable to do ↓
1 SEEING words or letters in ordinary newspaper (with glasses/contact lenses, if you usually wear them) .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
2 HEARING what is normally said in conversation with another person (with hearing aid, if you usually wear one).....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
3 WALKING without human or mechanical assistance or using stairs.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
4 LIFTING or carrying something as heavy as 10 pounds, such as a bag of groceries.....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
5 CONCENTRATING, REMEMBERING, or MAKING DECISIONS because of a physical, mental, or emotional condition .....	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

**E14.**  ← Mark this box if you answered “None” to all the activities in question E13, and go to question E16.

**E15. What is the earliest age at which you first began experiencing any difficulties in any of these areas?**

AGE   OR  ← SINCE BIRTH

**E16. In case we need to clarify some of the information you have provided, please list phone numbers and an email address where you can be reached.**

	Home ↓	Work ↓	Cell ↓
Daytime Phone Number <input style="width: 30px; height: 20px;" type="text"/> - <input style="width: 30px; height: 20px;" type="text"/> - <input style="width: 30px; height: 20px;" type="text"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<small>Area Code                      Number</small>			
Evening Phone Number <input style="width: 30px; height: 20px;" type="text"/> - <input style="width: 30px; height: 20px;" type="text"/> - <input style="width: 30px; height: 20px;" type="text"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<small>Area Code                      Number</small>			
Other Phone Number <input style="width: 30px; height: 20px;" type="text"/> - <input style="width: 30px; height: 20px;" type="text"/> - <input style="width: 30px; height: 20px;" type="text"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
<small>Area Code                      Number</small>			

Email Address  @



- E17. Because we are interested in how education and employment change over time, we may be contacting you in 2012. To help us contact you, please provide the name and contact information for two people who are likely to know where you can be reached. Do not include someone who lives in your household.**

*As with all the information provided in this questionnaire, complete confidentiality will be provided. These people will only be contacted if we have difficulty contacting you in 2012.*

**Person 1**

First Name	MI	Last Name
Number and Street		
City/Town	State	ZIP Code
Country (if outside of U.S.)		
Area Code	Number	

**Person 2**

First Name	MI	Last Name
Number and Street		
City/Town	State	ZIP Code
Country (if outside of U.S.)		
Area Code	Number	

- E18. How would you like to complete future rounds of this survey?**

*Mark one answer.*

- 1  A questionnaire sent in the mail
- 2  A web questionnaire on the Internet
- 3  A telephone interview
- 4  No preference

## JOB CATEGORY

If you cannot find the code that best describes your job, use the "OTHER" code under the most appropriate broad category. If none of the codes fit your job, use Code 500.

• <b>Biological/Life Scientists</b>	021	Agricultural and food scientists	025	Medical scientists (excluding practitioners)
	022	Biochemists and biophysicists	026	Technologists and technicians in the biological/life sciences
	023	Biological scientists (e.g., botanists, ecologists, zoologists)	027	OTHER biological and life scientists
	024	Forestry and conservation scientists		
• <b>Clerical/Administrative Support Occupations</b>	031	Accounting clerks and bookkeepers	033	OTHER administrative (e.g., record clerks, telephone operators)
	032	Secretaries, receptionists, typists		
• <b>Clergy/Other Religious Workers</b>	040	Clergy and other religious workers		
• <b>Computer Occupations</b> <i>Also consider 173 Operations research analysts, including modeling</i>	***	Computer engineers – <i>also consider 087 Computer engineers – hardware and 088 Computer engineers – software</i>	056	Database administrators
	051	Computer & information scientists, research	057	Information security analysts
	052	Computer network architect	058	Network and computer systems administrators
	053	Computer programmers (business, scientific, process control)	059	Software developers – applications and systems software
	054	Computer support specialists	060	Web developers
	055	Computer system analysts	061	OTHER computer and information science occupations
• <b>Consultants</b>	<i>Find the category on page 16 or 17 that comes closest to your field of consulting and select the code</i>			
• <b>Counselors</b>	070	Counselors (Educational, vocational, mental health and substance abuse) <i>Also consider 236 Psychologists, including clinical</i>		
• <b>Engineers/Architects</b> <i>Also consider 100 to 104 under Engineering Technologists, Technicians and Surveyors</i>	081	Architects	090	Environmental engineers
	082	Aeronautical/aerospace/astronautical engineers	091	Industrial engineers
	083	Agricultural engineers	092	Marine engineers and naval architects
	084	Bioengineers or biomedical engineers	093	Materials and metallurgical engineers
	085	Chemical engineers	094	Mechanical engineers
	086	Civil, including architectural/sanitary engineers	095	Mining and geological engineers
	087	Computer engineers – hardware	096	Nuclear engineers
	088	Computer engineers – software	097	Petroleum engineers
	089	Electrical and electronics engineers	098	Sales engineers
			099	OTHER engineers
• <b>Engineering Technologists/Technicians/Surveyors</b>	100	Electrical, electronic, industrial, and mechanical technicians	103	OTHER engineering technologists and technicians
	101	Drafting occupations, including computer drafting	104	Surveyors, cartographers, photogrammetrists
	102	Surveying and mapping technicians		
• <b>Farmers/Foresters/Fishermen</b>	110	Farmers, foresters and fishermen		
• <b>Health Occupations</b>	111	Diagnosing/treating practitioners (e.g., dentists, optometrists, physicians, psychiatrists, podiatrists, surgeons, veterinarians)	236	Psychologists, including clinical – <i>Also consider 070 Counselors</i>
	112	Registered nurses, pharmacists, dieticians, therapists, physician assistants, nurse practitioners	113	Health technologists and technicians (e.g., dental hygienists, health record technologists/technicians, licensed practical nurses, medical or laboratory technicians, radiological technicians)
			114	OTHER health occupations
• <b>Lawyers/Judges</b>	120	Lawyers, judges		
• <b>Librarians/Archivists/Curators</b>	130	Librarians, archivists, curators		
• <b>Managers and Supervisors, First-Line</b>	<i>Find the category on page 16 or 17 that best describes the occupation of the people you manage and select the code</i>			
• <b>Managers, Top-level Executives/Administrators</b>	141	Top-level managers, executives, administrators (e.g., CEO/COO/CFO, president, district manager, general manager, legislator, chancellor, provost)		
• <b>Managers, Other</b> <i>People who manage other managers</i>	142	Computer and information systems managers		
	143	Engineering managers		
	144	Medical and health services managers		
	145	Natural sciences managers		
	146	Education administrators (e.g., registrar, dean, principal)		
	147	OTHER mid-level managers		

## JOB CATEGORY (Continued)

<ul style="list-style-type: none"> <li>• <b>Management-Related Occupations</b> <i>Also consider 141 to 147 under Managers, Other</i></li> </ul>	151	Accountants, auditors, and other financial specialists	153	OTHER management related occupations	
	152	Personnel, training, and labor relations specialists			
<ul style="list-style-type: none"> <li>• <b>Mathematical Scientists</b></li> </ul>	171	Actuaries	174	Statisticians	
	172	Mathematicians	175	Technologists and technicians in the mathematical sciences	
	173	Operations research analysts, including modeling	176	OTHER mathematical scientists	
<ul style="list-style-type: none"> <li>• <b>Physical Scientists</b></li> </ul>	191	Astronomers	195	Oceanographers	
	192	Atmospheric and space scientists	196	Physicists, except biophysicists	
	022	Biochemists and biophysicists	197	Technologists and technicians in the physical sciences	
	193	Chemists, except biochemists	198	OTHER physical scientists	
	194	Geologists, including earth scientists			
<ul style="list-style-type: none"> <li>• <b>Research Associates/ Assistants</b></li> </ul>	<i>Find the category on page 16 or 17 that comes closest to your research field and select the code</i>				
<ul style="list-style-type: none"> <li>• <b>Sales/Marketing Occupations</b></li> </ul>	200	Insurance, securities, real estate, and business services	202	Sales occupations – retail (e.g., furnishings, clothing, motor vehicles, cosmetics)	
	201	Sales occupations – commodities except retail (e.g., industrial machinery/equipment/supplies, medical and dental equip./supplies)	203	OTHER marketing and sales occupations	
<ul style="list-style-type: none"> <li>• <b>Service Occupations, Except Health</b> <i>Also consider 111 to 114 under Health Occupations</i></li> </ul>	221	Food preparation and service (e.g., cooks, waitresses, bartenders)	223	OTHER service occupations, except health (e.g., probation officers, human services workers)	
	222	Protective services (e.g., fire fighters, police, guards, wardens, park rangers)			
<ul style="list-style-type: none"> <li>• <b>Social Scientists</b></li> </ul>	231	Anthropologists	236	Psychologists, including clinical – <i>Also consider 070 Counselors</i>	
	232	Economists	237	Sociologists	
	233	Historians	238	OTHER social scientists	
	235	Political scientists			
<ul style="list-style-type: none"> <li>• <b>Social Workers</b></li> </ul>	240	Social workers			
<ul style="list-style-type: none"> <li>• <b>Teachers—Precollege</b></li> </ul>	251	Pre-kindergarten and kindergarten	255	Secondary – other subjects	
	252	Elementary	256	Special education – primary and secondary	
	253	Secondary – computer, math, or sciences	257	OTHER precollegiate area	
	254	Secondary – social sciences			
<ul style="list-style-type: none"> <li>• <b>Teachers/Professors— Postsecondary</b></li> </ul>	271	Agriculture	283	History	
	272	Art, Drama, and Music	286	Mathematics and Statistics	
	273	Biological Sciences	287	Health and Related Sciences	
	274	Business, Commerce, and Marketing	288	Physical Education	
	275	Chemistry	289	Physics	
	276	Computer Science	290	Political Science	
	277	Earth, Environmental, and Marine Science	291	Psychology	
	278	Economics	293	Sociology	
	279	Education	297	OTHER Natural Sciences	
	280	Engineering	298	OTHER Social Sciences	
	281	English	299	OTHER Postsecondary fields	
	282	Foreign Language			
<ul style="list-style-type: none"> <li>• <b>Teachers—Other</b></li> </ul>	300	OTHER teachers and instructors (e.g., private tutors, dance or flying instructors, martial arts instructors)			
<ul style="list-style-type: none"> <li>• <b>Writers/Editors/Public Relations Specialists/Artists/Entertainers/Broadcasters</b></li> </ul>	010	Writers, editors, public relations specialists, artists, entertainers, broadcasters			
<ul style="list-style-type: none"> <li>• <b>Other Professions</b></li> </ul>	401	Construction and extraction occupations	403	Precision/production occupations (e.g., metal workers, woodworkers, butchers, bakers, assemblers, printing occupations, tailors, shoemakers, photographic process)	
	402	Installation, maintenance, and repair occupations	405	Transportation and material moving occupations	
<ul style="list-style-type: none"> <li>• <b>OTHER OCCUPATIONS</b></li> </ul>	500	<b>OTHER OCCUPATIONS (Not Listed)</b>			

**THANK YOU FOR COMPLETING THE QUESTIONNAIRE.**

**Please return the completed form within two weeks in the envelope provided.**

If you have any questions or need assistance, please visit our SDR website at [www.norc.uchicago.edu/sdr](http://www.norc.uchicago.edu/sdr), call us toll-free at 1-800-685-1663, or email us at [SDR@norc.uchicago.edu](mailto:SDR@norc.uchicago.edu). If you cannot find the envelope or would like another, please email or call us.

**Our mailing address is:**

**2010 Survey of Doctorate Recipients  
c/o NORC at the University of Chicago  
1 North State Street, 16th Floor  
Chicago, IL 60602-3305**

- **Results of the Survey of Doctorate Recipients can be found on the National Science Foundation's Website at <http://www.nsf.gov/statistics/doctoratework>.**
- **You are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget. The approval number for this survey is 3145-0020.**

**COMMENTS ABOUT THIS SURVEY:**