

CARL ALBERT STATE COLLEGE
DEPARTMENT OF NURSING EDUCATION

Graduate Questionnaire
8 months post graduation

PART I: DEMOGRAPHIC DATA

Name of Graduate _____ Current Address: _____

1. List the states in which are currently licensed as an RN:

2. Please check the positions you have held since graduation:

_____ Staff Nurse _____ Charge Nurse _____ Supervisor
_____ Other

3. Please check the types of health care agencies in which you have been employed as RN:

_____ Hospital _____ Home Health _____ Clinic
_____ Nursing Home _____ Other

4. Are you currently employed:

_____ Yes If yes: _____ Full-time, or
_____ No _____ Part-time

5. Do you currently belong to a professional nursing organization?

_____ Yes If yes: Please specify _____
_____ No

6. Are you currently pursuing an advanced degree in nursing?

_____ Yes; Where _____
_____ No

PART II: STUDENT SUPPORTIVE SERVICES

On a scale from 1 to 5, with 1 being lowest and 5 being highest, rate the quality of student services you used while a student at Carl Albert State College:

	Highest		Standard		Lowest	
Academic Counseling	5	4	3	2	1	NA
Learning Resource Center	5	4	3	2	1	NA
Library	5	4	3	2	1	NA
Financial Aid	5	4	3	2	1	NA
Personal Counseling	5	4	3	2	1	NA
Career Placement	5	4	3	2	1	NA

PART III: NURSING COMPETENCIES.

How well did the CASC nursing program prepare you to perform the following nursing competencies?

	Highest		Standard		Lowest
Professional Behaviors	5	4	3	2	1
Communication	5	4	3	2	1
Assessment	5	4	3	2	1
Clinical Decision Making	5	4	3	2	1
Caring Interventions	5	4	3	2	1
Teaching and Learning	5	4	3	2	1
Collaboration	5	4	3	2	1
Managing Care	5	4	3	2	1

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