

Who Will I Be?



A survey of Year 11 students

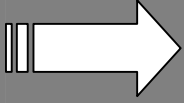
This questionnaire will produce findings about what you and other Year 11 students would like to do after Year 11.

Please make sure to complete all the questions. If you want to comment on what you thought about the questionnaire, there is space for you to do this on the back page.

*The information in this questionnaire is **confidential** and **anonymous** and will not be shared with other students or teachers.*

WE APPRECIATE YOUR HELP

IF THERE IS ANYTHING ABOUT
THE QUESTIONNAIRE THAT
YOU LIKED OR THAT YOU
DIDN'T LIKE, PLEASE WRITE
YOUR IDEAS ON THE BACK
PAGE.



Who will I be?

A1. Please write your date of birth in the boxes below:

| | | |
|-----------|-----------|-------------|
| | | |
| <i>DD</i> | <i>MM</i> | <i>YYYY</i> |

A2. Please circle whether you are male or female:

Male **Female**

A3. What is your ethnic origin?

Please choose **one** section from A to E, then tick the appropriate box to indicate your background.

A White

- White - British
- White - Irish
- White – other white background

B Mixed

- White and black Caribbean
- White and black African
- White and Asian
- Any other mixed background

C Asian or Asian British

- Indian
- Pakistani
- Bangladeshi
- Any other Asian background

D Black or Black British

- Caribbean
- African
- Other black background

E Chinese or Chinese British or other ethnic group

- Chinese
- Any other background



**Thank you for answering
all the questions so far**

A4. Please write down the things that you know about the job or last known job of your parents, step-parents or carers in the boxes below:

If you have only one parent, step-parent or carer, please write down the job for them only.

If they are not working or have never worked, please write '*not working*' at the top of the chart.

If you don't know the answers to the questions, please put a ? in the boxes. Thank you.

| | (a) Mother, stepmother or female carer | (b) Father, stepfather or male carer |
|--|--|--------------------------------------|
| What is their job? | | |
| Who do they work for? (Name of company) | | |
| Where do they work? (Town/City/area) | | |
| Do they work full time or part time? | | |

A5. Could you please tick **every** subject that you personally take at school.

Please write down any other subjects that you are taking, including any vocational subjects and any work experience, that are not on the list

| | | |
|----|---|--|
| 1 | English Literature | |
| 2 | English Language | |
| 3 | Maths | |
| 4 | Biology (science) | |
| 5 | Chemistry (science) | |
| 6 | Physics (science) | |
| 7 | French | |
| 8 | Spanish | |
| 9 | German | |
| 10 | Geography | |
| 11 | History | |
| 12 | Business Studies | |
| 13 | ICT or IT (Information & Communications Technology) | |
| 14 | Design Technology (DT) | |
| 15 | Drama (performing arts) | |
| 16 | Art | |
| 17 | RE (Religious Education) | |
| 18 | PHSE (Citizenship) | |
| 19 | Music | |
| 20 | P.E. (Physical Education) | |
| | Please list any other subjects in the lines below: | |
| 21 | | |
| 22 | | |
| 23 | | |
| 24 | | |
| 25 | | |

A6. Could you please tick **which set or class** you are in for English, Maths and Science.

If your class is mixed ability (not set) please show which paper you will do for GCSE by writing:

'**F**' for foundation (Grades G-C) or '**H**' for higher tier (Grades C-A*) next to the subject.

| | One (top) | Two (middle) | Three (lower) |
|---------|-----------|--------------|---------------|
| English | | | |
| Maths | | | |
| Science | | | |

If you cannot answer this question in any way, please put a ? in the boxes. Thank you.

A7. Are you planning to continue with education after Year 11, either here, in another school or at college?
Please circle one answer:

Yes

No

A8. What will you be doing after Year 11?

Please tick the box that best describes how **certain** or **sure** you are about what you will be doing after Year 11 for **each** option.

(Your chart should look a little like this but with your own answers)

| | Completely certain | Quite certain | Not certain or uncertain | Uncertain | Completely Uncertain |
|-----------------------------------|--------------------|---------------|--------------------------|-----------|----------------------|
| AS/A Levels at school | | | ✓ | | |
| AS/A Levels at Sixth Form College | ✓ | | | | |
| College – BTEC or NVQ Level Three | | | | ✓ | |
| Apprenticeship (not paid) | | | ✓ | | |
| Apprenticeship (paid) | | | | | ✓ |
| Leave school to get a job | | | | | ✓ |

Please complete the chart, making sure that for each statement, you have ticked one of the boxes.

| | Completely certain (Yes) | Quite certain | Not certain or uncertain | Uncertain | Completely Uncertain (No) |
|---------------------------------------|--------------------------|---------------|--------------------------|-----------|---------------------------|
| AS/A Levels at school | | | | | |
| AS/A Levels at Sixth Form College | | | | | |
| College (BTEC or NVQ Level Three) | | | | | |
| Apprenticeship (not paid) | | | | | |
| Apprenticeship (paid) | | | | | |
| Leave school to get a job | | | | | |
| Volunteer work or part time work | | | | | |
| Not be in education, work or training | | | | | |
| Other occupation not listed | | | | | |

You are doing well so far!

A9. What area of **employment or **training** would you realistically like to go into after you finish education?**

Please tick the box that best describes your level of interest in each of the areas given below.

Please do this for **each** area (please fill in the chart similar to the way you filled in the chart in question A8.).

| | | Extremely interested | Quite Interested | Not Sure | Not very interested | Not interested |
|-----------|---|----------------------|------------------|----------|---------------------|----------------|
| 1 | Health (Ex: Doctor, Nurse, Medical Secretary) | | | | | |
| 2 | Education (Ex: Teacher, Nursery Nurse) | | | | | |
| 3 | Public Services (Ex: Government, Social Worker)) | | | | | |
| 4 | Administrative (clerical, secretarial) (Ex: Secretary, Receptionist) | | | | | |
| 5 | Police and Armed Forces (Ex: Army, Navy) | | | | | |
| 6 | Transport (Ex: Bus Driver, Taxi Driver) | | | | | |
| 7 | Land based and Environmental (Ex: Farmer, Gardener) | | | | | |
| 8 | Engineering (Ex: Mechanical Engineer, Cable Layer) | | | | | |
| 9 | Manufacturing (Ex: Food Manufacturer, Factory Worker) | | | | | |
| 10 | Construction and the Built Environment (Ex: Architect, Builder, Stonemason) | | | | | |
| 11 | ICT (Ex: Computer Scientist, IT Technician) | | | | | |
| 12 | Retail (Ex: Shop Owner, Retail Assistant) | | | | | |
| 13 | Hospitality and Catering (Ex: Hotel Owner, Chef, Kitchen Hand) | | | | | |
| 14 | Hair and Beauty (Ex: Makeup Artist, Hairdresser) | | | | | |
| 15 | Sport and Leisure (Ex: Rugby Player, Fitness Instructor) | | | | | |
| 16 | Travel and Tourism (Ex: Travel Agent, Tour Guide) | | | | | |
| 18 | Creative Arts (Ex: Musician, Artist) | | | | | |
| 19 | Media (Ex: Journalist, Graphic or Web Designer) | | | | | |
| 20 | Business Administration and Finance (Ex: Bank Manager, Accountant) | | | | | |
| 21 | Other (please specify below) | | | | | |
| | | | | | | |

A10. Please choose one job that you think you will **realistically** go into after finishing education.

Please write this job in the space below, and then answer the questions below (A11 – A14)

| |
|--|
| |
|--|

(or) I do not know which job I realistically want (If you ticked this box please go to question A15)

A11. Did you ever think about getting this job before filling in this questionnaire today? Please circle one answer

Yes No

A12. Please fill in the table

Are you doing anything **now** that is helping you move towards getting this job?

(for example, 'Getting a C grade in GCSE science', 'Used the Internet to look for jobs at Pizza Hut')

Please circle one answer

Yes No

If you answered yes, please write down the things that you are doing towards getting the job.

| |
|---|
| What I am doing towards getting the job: |
| |
| |
| |
| |
| |

A13. Please write down your reasons for choosing this job. **What influenced you to want this job?**

| |
|------------------------------------|
| I chose this job because... |
| |
| |
| |
| |
| I want this job because... |
| |
| |
| |
| |

**Excellent! Now
are you ready
for some more
questions?**

A14. Thinking about this job, please tick the box that best describes you.

| | | | | | | |
|-----------|---|--|---|---|---|--|
| 1 | How important is this job to you? | Very important <input type="checkbox"/> | Quite important <input type="checkbox"/> | Somewhat important <input type="checkbox"/> | Not very important <input type="checkbox"/> | Not important <input type="checkbox"/> |
| 2 | How sure are you that this job will happen? | Completely sure <input type="checkbox"/> | Quite sure <input type="checkbox"/> | Not sure or unsure <input type="checkbox"/> | Unsure <input type="checkbox"/> | Completely unsure <input type="checkbox"/> |
| 3 | How much effort are you putting into making this job happen? | All your effort <input type="checkbox"/> | A lot of effort <input type="checkbox"/> | Some effort <input type="checkbox"/> | Not much effort <input type="checkbox"/> | No effort at all <input type="checkbox"/> |
| 4 | How often do you think about this job? | All of the time <input type="checkbox"/> | Most of the time <input type="checkbox"/> | Some of the time <input type="checkbox"/> | Not much of the time <input type="checkbox"/> | No time at all <input type="checkbox"/> |
| 5 | How many things are you currently doing to make this job happen? | All things possible <input type="checkbox"/> | Many things <input type="checkbox"/> | Some things <input type="checkbox"/> | Not many things <input type="checkbox"/> | Nothing <input type="checkbox"/> |
| 6 | What risk is there of this job not happening? | No risk <input type="checkbox"/> | Not much risk <input type="checkbox"/> | Some risk <input type="checkbox"/> | Quite some risk <input type="checkbox"/> | A lot of risk <input type="checkbox"/> |
| 6 | My choice of this job was influenced by my friends | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 7 | My choice of this job was influenced by my mother or female carer | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 8 | My choice of this job was influenced by my father or male carer | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 9 | My choice of this job was influenced by my teacher/s | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 10 | My choice of this job was influenced by <i>Connexions</i> (Personal Advisor) | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 11 | My choice of this job was influenced by the television, by a movie or by a book | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |

A15. If you could choose **any job in the world**, that you could do after you have finished your education, what would it be?

Please write the job in the space below, and then answer the questions below (A16 – A19)

If this is the same job as question A11, please tick this box and go straight to question B1.

| |
|--|
| |
|--|

| | | |
|--------------------------------|--------------------------|---|
| (or) I do not have a dream job | <input type="checkbox"/> | (If you ticked this box please go to question B1) |
|--------------------------------|--------------------------|---|

A16. Did you ever think about getting this job before filling in this questionnaire today? Please circle one answer

Yes **No**

A17. Please fill in the table

Are you doing anything **now** that is helping you move towards getting this job?

(for example, 'Looking at books in the library', 'Keeping a diary', 'Practicing sport')

Please circle one answer

Yes **No**

If you answered yes, please write down the things that you are doing towards getting the job.

| |
|---|
| What I am doing towards getting the job: |
| |
| |
| |
| |
| |

A18. Please write down your reasons for choosing this job. **What influenced you to want this job?**

| |
|------------------------------------|
| I chose this job because... |
| |
| |
| |
| |
| I want this job because... |
| |
| |
| |

A19. Thinking about this job, please tick the box that best describes you.

| | | | | | | |
|-----------|---|---|--|--|--|---|
| 1 | How important is this job to you? | Very important <input type="checkbox"/> | Quite important <input type="checkbox"/> | Somewhat important <input type="checkbox"/> | Not very important <input type="checkbox"/> | Not important <input type="checkbox"/> |
| 2 | How sure are you that this job will happen? | Completely sure <input type="checkbox"/> | Quite sure <input type="checkbox"/> | Not sure or unsure <input type="checkbox"/> | Unsure <input type="checkbox"/> | Completely unsure <input type="checkbox"/> |
| 3 | How much effort are you putting into making this job happen? | All your effort <input type="checkbox"/> | A lot of effort <input type="checkbox"/> | Some effort <input type="checkbox"/> | Not much effort <input type="checkbox"/> | No effort at all <input type="checkbox"/> |
| 4 | How often do you think about this job? | All of the time <input type="checkbox"/> | Most of the time <input type="checkbox"/> | Some of the time <input type="checkbox"/> | Not much of the time <input type="checkbox"/> | No time at all <input type="checkbox"/> |
| 5 | How many things are you currently doing to make this job happen? | All things possible <input type="checkbox"/> | Many things <input type="checkbox"/> | Some things <input type="checkbox"/> | Not many things <input type="checkbox"/> | Nothing <input type="checkbox"/> |
| 6 | What risk is there of this job not happening? | No risk <input type="checkbox"/> | Not much risk <input type="checkbox"/> | Some risk <input type="checkbox"/> | Quite some risk <input type="checkbox"/> | A lot of risk <input type="checkbox"/> |
| 6 | My choice of this job was influenced by my friends | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 7 | My choice of this job was influenced by my mother or female carer | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 8 | My choice of this job was influenced by my father or male carer | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 9 | My choice of this job was influenced by my teacher/s | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 10 | My choice of this job was influenced by <i>Connexions</i> (Personal Advisor) | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 11 | My choice of this job was influenced by the television, by a movie or by a book | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |

**Thank you for
answering all the
questions so far**

B1. We all spend time thinking or daydreaming about the future

What **positive** or happy thing that might happen after Year 11, do you honestly daydream or think about the most? This does not have to have anything to do with a job, although it can do.

Please write a brief description of this thing in the box below and then answer the questions below (B2-4):

| |
|--|
| |
|--|

If this is the same thing as your realistic job please tick this box and go straight to question B6.

If this is the same thing as your dream job please tick this box and go straight to question B6.

B2. Did you ever think about this thing before filling in this questionnaire today? Please circle one answer

Yes **No**

B3. Please fill in the table

Are you doing anything **now** that is helping you move towards achieving this thing?

Please circle one answer

Yes **No**

If you answered yes, please write down the things that you are doing towards achieving this thing.

| |
|--|
| What I am doing towards achieving this: |
| |
| |
| |
| |
| |

B4. Please write down your reasons for thinking about this. **What influenced you to think about this?**

| |
|---|
| I think about this because... |
| |
| |
| |
| |
| I want this to happen because... |
| |
| |
| |
| |

B5. Thinking about this thing, please tick the box that best describes you.

| | | | | | | |
|-----------|--|---|--|--|--|---|
| 1 | How important is this thing to you? | Very important <input type="checkbox"/> | Quite important <input type="checkbox"/> | Somewhat important <input type="checkbox"/> | Not very important <input type="checkbox"/> | Not important <input type="checkbox"/> |
| 2 | How sure are you that this thing will happen? | Completely sure <input type="checkbox"/> | Quite sure <input type="checkbox"/> | Not sure or unsure <input type="checkbox"/> | Unsure <input type="checkbox"/> | Completely unsure <input type="checkbox"/> |
| 3 | How much effort are you putting into making this thing happen? | All your effort <input type="checkbox"/> | A lot of effort <input type="checkbox"/> | Some effort <input type="checkbox"/> | Not much effort <input type="checkbox"/> | No effort at all <input type="checkbox"/> |
| 4 | How often do you think about this thing? | All of the time <input type="checkbox"/> | Most of the time <input type="checkbox"/> | Some of the time <input type="checkbox"/> | Not much of the time <input type="checkbox"/> | No time at all <input type="checkbox"/> |
| 5 | How many things are you currently doing to make this thing happen? | All things possible <input type="checkbox"/> | Many things <input type="checkbox"/> | Some things <input type="checkbox"/> | Not many things <input type="checkbox"/> | Nothing <input type="checkbox"/> |
| 6 | What risk is there of this thing not happening? | No risk <input type="checkbox"/> | Not much risk <input type="checkbox"/> | Some risk <input type="checkbox"/> | Quite some risk <input type="checkbox"/> | A lot of risk <input type="checkbox"/> |
| 6 | My reasons for thinking about this thing are influenced by my friends | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 7 | My reasons for thinking about this thing are influenced by my mother or female carer | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 8 | My reasons for thinking about this thing are influenced by my father or male carer | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 9 | My reasons for thinking about this thing are influenced by my teacher/s | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 10 | My reasons for thinking about this thing are influenced by <i>Connexions</i> (Personal Advisor) | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 11 | My reasons for thinking about this thing are influenced by the television, by a movie or by a book | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |

**Only one more section to go:
Well Done!
Keep Going!**

B6. We all have things that we don't want to happen to us in the future.

What **negative** thing that might happen after Year 11 do you honestly worry or think about the most?
This does not have to have anything to do with a job, although it can do.

Please write a brief description of this thing in the box below and then answer the questions below (B7-10):

| |
|--|
| |
|--|

B7. Did you ever think about this thing before filling in this questionnaire today? Please circle one answer

Yes **No**

B8. Please fill in the table

Are you doing anything **now** that is helping you prevent this thing from happening?

Please circle one answer

Yes **No**

If you answered yes, please write down what you are doing to prevent this thing from happening.

| |
|--|
| I am preventing this thing from happening by: |
| |
| |
| |
| |
| |

B9. Please write down your reasons for thinking about this thing. **What influenced you to think about this thing?**

| |
|--|
| I think about this thing because... |
| |
| |
| |
| |
| |
| |

Nearly there...

B10. Thinking about this thing, please tick the box that best describes you.

| | | | | | | |
|-----------|--|--|---|---|---|--|
| 1 | How important is it to you to prevent this thing from happening? | Very important <input type="checkbox"/> | Quite important <input type="checkbox"/> | Somewhat important <input type="checkbox"/> | Not very important <input type="checkbox"/> | Not important <input type="checkbox"/> |
| 2 | How sure are you that you can prevent this thing from happening? | Completely sure <input type="checkbox"/> | Quite sure <input type="checkbox"/> | Not sure or unsure <input type="checkbox"/> | Unsure <input type="checkbox"/> | Completely unsure <input type="checkbox"/> |
| 3 | How much effort are you putting into preventing this thing from happening? | All your effort <input type="checkbox"/> | A lot of effort <input type="checkbox"/> | Some effort <input type="checkbox"/> | Not much effort <input type="checkbox"/> | No effort at all <input type="checkbox"/> |
| 4 | How often do you think about this thing? | All of the time <input type="checkbox"/> | Most of the time <input type="checkbox"/> | Some of the time <input type="checkbox"/> | Not much of the time <input type="checkbox"/> | No time at all <input type="checkbox"/> |
| 5 | How many things are you currently doing to prevent this thing from happening? | All things possible <input type="checkbox"/> | Many things <input type="checkbox"/> | Some things <input type="checkbox"/> | Not many things <input type="checkbox"/> | Nothing <input type="checkbox"/> |
| 6 | What risk is there of this thing actually happening? | No risk <input type="checkbox"/> | Not much risk <input type="checkbox"/> | Some risk <input type="checkbox"/> | Quite some risk <input type="checkbox"/> | A lot of risk <input type="checkbox"/> |
| 6 | My reasons for thinking about this thing are influenced by my friends | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 7 | My reasons for thinking about this thing are influenced by my mother or female carer | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 8 | My reasons for thinking about this thing are influenced by my father or male carer | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 9 | My reasons for thinking about this thing are influenced by my teacher/s | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 10 | My reasons for thinking about this thing are influenced by <i>Connexions</i> (Personal Advisor) | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |
| 11 | My reasons for thinking about this thing are influenced by the television, by a movie or by a book | Completely <input type="checkbox"/> | A lot <input type="checkbox"/> | Somewhat <input type="checkbox"/> | Not much <input type="checkbox"/> | Not at all <input type="checkbox"/> |

You have finished... well done and thank you.



If you have any comments about the questionnaire, please write them in the space below:

Thank you very much for your help in completing this questionnaire. As part of this research we are trying to make it better for young people to make the right choices about what they want to do after they finish Year 11.

A copy of the finished study will be sent to the school on request from the head teacher. You may be able to read this copy.