

POST-SCHOOL DATA COLLECTION SURVEY

STUDENT DEMOGRAPHIC PROFILE

Student: _____	Date of Birth: _____
Address: _____	Gender: _____
_____	SIS Number: _____
Contact Telephone Number: _____	School Graduated From: _____
Parent/Guardian Name: _____	School District: _____
_____	Date Student Graduated/Exited School: _____
Parent/Guardian Address (if different)	Student's Primary Disability (Optional):
_____	_____
_____	Student's Secondary Disability (Optional):
Parent/Guardian Cell: _____	_____
Parent/Guardian Email: _____	_____

- Student Exited School:
- With regular high school, diploma
 - With certificate/modified diploma
 - Reached maximum age
 - Dropped out
 - Unknown

What post-school goals are included in this student's IEP for the period immediately following high school?
(CHECK ALL THAT APPLY)

- Attend a post-secondary school, training, or education.
- Secure employment
- No response

STUDENT PERMISSION

The Illinois State Board of Education is required to report to the Federal government on the post-school outcomes of students one year after they leave high school (e.g., are you employed, are you attending college, etc.).

May we have your or your parents' permission to be contacted by your school district one year after you leave to ask some questions about what you are doing?

- Yes No

Signature of student or legal guardian: _____

Date Signed: _____