



in conjunction with grant support from: **BetterWorldBooks®**

Prison Book Program
1306 Hancock Street, Suite 100
Quincy, MA 02169

Website: www.prisonbookprogram.org

GED Program – Participant Questionnaire 1

Your Name: _____

DOC/ID Number: _____

Prison Name: _____

Mailing Address: _____

1) At what grade did your formal education stop? Meaning, what grade did you officially “drop out” or “quit” school? _____

2) Why did your formal education end (why did you stop going to school?)

3) While you were in school, did you enjoy it? (Circle one)

A lot somewhat Take it or leave it somewhat disliked hated it

4) In general, do you enjoy learning?

A lot somewhat Take it or leave it somewhat dislike Not at all

5) What is your reason for wanting to obtain a GED? (Circle the number ONE reason to you):

Required to by condition/policy/law To get a job Personal-Growth To get into college

Other: _____

6) Do you know the date when you will take your GED exam?

No Yes

If yes, when is it? Month: _____ Year: _____

If no, when do you expect you will be ready? Month: _____ Year: _____

7) Do you, or someone directly on your behalf, have to pay for any or all of the cost of the GED exam?

Yes No If so, how much do you pay? \$_____

8) Have you ever taken any part of the GED exam before this (circle one)? Yes No

If yes, which test(s) did you take? (CIRCLE all that apply); also if you know your scores (**, *, 2, 410, 500, etc) please list them.

Mathematics _____

Language Arts: Reading _____

Language Arts: Writing I _____

Language Arts: Writing II _____

Science _____

Social Studies: _____

If you took the entire GED test previously, what was your last total score? _____

9) Are you willing and able to participate in follow-up surveys from Prison Book Program for at least 6 months following your next GED exam? Yes No

Thank you! Please send this completed survey to Prison Book Program.