Dear Social Work Student:

We are requesting your help with a longitudinal research project. Recruitment and retention of qualified child welfare staff is being studied through a federal grant from the United States Department of Health and Human Services, Administration for Children and Families. The aim of the research is to develop models of effective child welfare staff recruitment and retention training.

Completing the questionnaire will take 15 minutes. Your decision to complete or not complete the questionnaire will not affect your grade in this course either negatively or positively. Your response to the questionnaire is confidential. Because the research is longitudinal we are asking you to create a unique identifier that will allow us to link your survey from this semester with surveys we will ask to complete in subsequent years. The identifier will not link the surveys back to you because the identifier will only be recognizable to you. Neither the instructor nor I will know which questionnaire is yours. Your participation is completely voluntary and confidential. By participating in this survey you are not obligated to participate in any subsequent surveys that are part of this research project. Your identity and privacy will be protected to the maximum extent allowable by law.

As with all research projects, there are risks and benefits associated with this study. The benefits of this study do not accrue to you directly. The benefits are to the social work profession and future child welfare professionals. The risks to you may involve the emergence of painful memories or strong emotions that people sometimes experience when thinking about child welfare. If you experience any distress or troubling thoughts as a result of completing this survey I am available to you, as is your instructor, to provide support. I can be reached at (517) 432-0174 or by e-mail sent to eatonmon@msu.edu

If you have any questions about this study, please contact the investigator, Dr. Peg Whalen or the coordinator, Monaca Eaton, (153 Baker Hall, MSU School of Social Work, East Lansing, 48824, (517) 432-0174 mail: peg.whalen@ssc.msu.edu or e-mail: eatonmon@msu.edu). If you have questions or concerns regarding your rights as a study participant, or are dissatisfied at any time with any aspect of this study, you may contact – anonymously, if you wish –Peter Vasilenko, Ph.D., Chair of the University Committee on Research Involving Human Subjects (UCRIHS) by phone: (517) 355-2180, fax: (517) 432-4503, e-mail: ucrihs@msu.edu, or regular mail: 202 Olds Hall, East Lansing, MI 48824. The primary investigator also is available to address your concerns. You may contact Dr. Gary Anderson, 254 Baker Hall, School of Social Work, MSU, East Lansing, MI 48824-1118, he also can be reached by phone at (517) 355-7515, or by e-mail to: gary.anderson@ssc.msu.edu.

Your signature below indicates your voluntary agreement to participate in this study. This informed consent form will be collected and stored separately from the questionnaire you complete. Do not write your name on the questionnaire. Since each questionnaire is not identifiable you will not be able to withdraw from the research once you have returned the completed questionnaire.

Thank you in advance for your time.

Unique Identifier			
To create your unique identifier please fill in the following spaces using the requ	uested information:		
What are the first two letters of your mother's/guardian's maiden name?			
What are the last two digits of your student APID?			
How many siblings do you have?			
What is the day portion of your date of birth, e.g. February 1, $1980 = 01$?			
Please record these eight digits at the top of the first page of survey questions Do not record this identifier on the signed letter of consent.			

Unique Identifier								
MSW & BSW Student Interest In Child Welfare								
What is your current status in the MSU Social Wo	ork Program?							
$\square BSW \square 1^{st} Year \square 2^{nd} Year OR$								
\square MSW \square Full Time \square 1 st Year \square 2 nd Year \square Other	er (Specify)							
\Box Part Time $\Box 1^{st}$ Year $\Box 2^{nd}$ Year $\Box 3^{rd}$ Y	ear 🗆 Other (Specify)							
Identified or preferred advanced concentration	Campus Site							
 Clinical Organizational and Community Practice Do not know 	 East Lansing Marquette Flint Gaylord Other 							
Practice Interest Areas (Choose all that apply)								
	Displaced Persons, Homeless, Refugees							
□ Adolescents	□ Gerontology							
□ Adoption	□ Health							
Administration	□ Infancy and Early Childhood							
Child Welfare								
□ Clinical Social Work with Families	□ Mental Health							
Community Development	□ Policy/Legislation							
Community Organizing	□ School Social Work							
Criminal Justice/Judicial System	Domestic Violence Verthand Care Violence							
Developmental/Rehabilitative Disabilities Family Services	□ Youth and Gang Violence							
□ Family Services	Other (Specify)							

Age _____

 $\textbf{Gender} \ \ \Box \ Male \ \Box \ Female$

Ethnic/Racial Identity:

- □ African American/Black
- \Box American Indian or Alaskan Native
- \square Asian American or Pacific Islander
- \Box Chicano/Mexican American
- Puerto Rican
- □ Other Hispanic/Latino
- □ White/Caucasian (not Hispanic/Latino in origin)
- □ Non-U.S. Citizen
- □ Other (Specify) _____

	Unique Identifier							
Emp	Employment and Field Education Experiences							
	How many years/months of human service experience did you have before entering the Social Work program?YearsMonths							
Ha	Have you had paid employment in Child Welfare? No Yes, Public Yes, Private							
In	In which service areas have you been involved through either your School of Social Work field placements							
	(Fld) and current or previous employment (Job)? (Choose all that apply)							
Fld	Job		Fld	Job				
		Addictions			Displaced Persons/Homeless/Refugees			
		Adolescents			Gerontology			
		Adoption			Health			
		Administration			Infancy and Early Childhood			
		Child Welfare			International			
		Clinical Social Work with families			Mental Health			
		Community Development			Policy/Legislation			
		Community Organizing			School Social Work			
		Criminal Justice/Judicial System			Domestic Violence			
		Developmental/Rehabilitative Disabilities			Youth and Gang Violence			
		Family Services			Other (Specify)			

What did you learn, experience or hear about child welfare at your field placement(s)?

Child Welfare Field

How much do you know about child welfare?

- \Box I do not know anything about child welfare.
- \Box I know a little about child welfare.
- □ I know some about child welfare.
- □ I know a lot about child welfare.

How much thought have you given to working in child welfare?

- \Box I have not given it any thought.
- \Box I have given it a little thought.
- \Box I have given it some thought.
- \Box I have given it a lot of thought.

Unique Identifier		
What professional interest do you have in working in child welfare?		
 High interest, I specifically sought a social work degree in order to work in child welfare. Some interest, I would not mind working in child welfare. No interest, I have a specific interest in another area. No interest, I would not/could not work in child welfare. I do not have any interest. Other (please explain) 		
For you, what are the most attractive aspects of working in child welfare?		
For you, what are the least attractive aspects of working in child welfare?		
What non-employment/education-related child welfare experience do you have? (Please mark & describe briefly)		
□ Volunteer Experience:YearsMonths (please describe)		
□ Personal Experience: (please describe)		
When you think of a workday for a child welfare worker, what do you imagine?		
What perceptions or comments have your family, friends or co-workers shared with you about social work in child welfare?		