

National Association of Schools of Dance

ALUMNI SURVEY FORMAT

NASD recommends that all institutions maintain records on graduates. The following questions are provided as examples. Institutions are encouraged to use this format as a basis for developing a survey that focuses on the institution's own program.

- Please indicate the dance degree(s) you received or program(s) you completed at (name of school), listing the level of the most recent degree or program first. Indicate B for bachelor's degree, M for initial master's degree (M.A. or M.S.), MFA for terminal master's degree, and D for doctoral degree. Also, include your focus of studies (e.g., performance, dance history, dance education), the year the degree/program was completed, and the number of years it took to complete the degree/program.

Degree/Program Level	Focus of Studies	Year Conferred	Number of years to Complete the Degree/Program		
			Years full-time	Years part-time	
				+	
				+	
				+	

- Please list your opinions regarding the following areas. (If you did not take classes outside the school or department of dance, answer only parts 1 and 2 of this question. *N.O.* = *No Opinion.*)

	Low Quality		High Quality			
Overall quality of the (name of school) school/department of dance	1	2	3	4	5	N.O.
Quality of your specific focus of studies as identified in question 1 above	1	2	3	4	5	N.O.
Quality of (name of school) overall studies outside of dance	1	2	3	4	5	N.O.

- Please list the full-time dance-related positions you have occupied since graduating from or leaving (name of school) and the years in each position. (*If you have never held a full-time position in dance, please skip to question 4.*)

Position	Employer, Location	Year(s) (e.g., 1999-2002)

- If you have never been employed in a full-time dance-related position, please list the part-time dance positions you have occupied since graduating from (name of school) and the years in each position. (*If you answered question 3, you should skip this question.*)

Position	Employer, Location	Year(s) (e.g., 1999-2002)

5. Please list your present occupation if not covered in questions 3 or 4 above.

6. Please list your opinions regarding the quality of instruction at (name of school) in the following areas: *(If you did not have any classes in a specified field, circle N.O. for No Opinion.)*

	Low Quality					High Quality	
Performance: Ballet Technique	1	2	3	4	5	N.O.	
Ballet Composition	1	2	3	4	5	N.O.	
Ballet Repertory	1	2	3	4	5	N.O.	
Performance: Modern Technique	1	2	3	4	5	N.O.	
Modern Composition	1	2	3	4	5	N.O.	
Modern Repertory	1	2	3	4	5	N.O.	
Choreography	1	2	3	4	5	N.O.	
Improvisation	1	2	3	4	5	N.O.	
Dance Analysis	1	2	3	4	5	N.O.	
Teaching Methods/Dance Education	1	2	3	4	5	N.O.	
Dance History	1	2	3	4	5	N.O.	
Music	1	2	3	4	5	N.O.	
Other (please specify) _____	1	2	3	4	5	N.O.	

7. Please describe any courses you think should be added for dance majors/students at (name of school).

8. Please list any courses you were *required* to take that you think should not be required.

[Degree-granting institutions only]

PLEASE NOTE: Questions 9 and 10 are only for those who undertook a senior project, thesis, treatise, or dissertation while at (name of school). *If you did not do any of these, please skip to question 11.*

[Degree-granting institutions only]

9. Do you feel that the breadth of your studies prepared you adequately for doing your senior project, thesis, treatise, and/or dissertation?

Yes _____

No _____

[Degree-granting institutions only]

10. Were your senior project, thesis, treatise, and/or dissertation advisors or committee members helpful?

Yes _____

No _____

11. Given your major or professional emphasis, do you feel you had adequate opportunities to work in the following situations? (Circle appropriate response for each item.)

Dancer in full productions	Yes	No	N/A
Dancer in workshop productions	Yes	No	N/A
Choreographer in full productions	Yes	No	N/A
Choreographer in workshop productions	Yes	No	N/A
Directing full productions	Yes	No	N/A
Directing workshop productions	Yes	No	N/A
Film/Video projects	Yes	No	N/A
Management projects	Yes	No	N/A
Supervised teaching	Yes	No	N/A

12. What was the general influence of these working opportunities (question 11) on your personal career development?

	No Influence			Tremendous Influence		
Dancer in full productions	1	2	3	4	5	N/A
Dancer in workshop productions	1	2	3	4	5	N/A
Choreographer in full productions	1	2	3	4	5	N/A
Choreographer in workshop productions	1	2	3	4	5	N/A
Directing full productions	1	2	3	4	5	N/A
Directing workshop productions	1	2	3	4	5	N/A
Film/Video projects	1	2	3	4	5	N/A
Management projects	1	2	3	4	5	N/A
Supervised teaching	1	2	3	4	5	N/A

13. Would you recommend (name of school or department of dance) to someone considering studying dance?

Yes _____ No _____

Please explain your answer: _____

14. What advice would you give to present dance students in regard to preparation for a career in dance? Emphasize your current career in dance.

[Degree-granting institutions only]

PLEASE NOTE: Questions 15 and 16 are only for those alumni who had a graduate assistantship in dance while pursuing a postbaccalaureate degree from (name of school). If you did not have such a graduate assistantship, please skip to question 17.

[Degree-granting institutions only]

15. Describe your assistantship duties (e.g., teaching, etc.)

[Degree-granting institutions only]

16. Rate your assistantship experience according to the following factors:

	Terrible			Excellent	
Freedom from inappropriate duties	1	2	3	4	5
Supervision, guidance, and attention received from your faculty supervisor	1	2	3	4	5
Contribution of assistantship experiences to your personal and career development	1	2	3	4	5
Preparation for subsequent professional responsibilities	1	2	3	4	5

17. How important were the following elements in your decision to attend (name of school)?

	Not Important			Very Important	
Location	1	2	3	4	5
Cost of tuition	1	2	3	4	5
Recommendations of a teacher	1	2	3	4	5
Recommendations of an acquaintance	1	2	3	4	5
Assistantship/Scholarship	1	2	3	4	5
Quality of education	1	2	3	4	5
Reputation of the school/department of dance	1	2	3	4	5
Presence of particular faculty member(s)	1	2	3	4	5
Facilities	1	2	3	4	5

18. Do you have any comments or suggestions regarding the (name of school or department of dance)?

OPTIONAL

19. Name _____ Phone _____
Address _____
City _____ State _____ Zip _____

**Thank you for taking the time to complete this survey.
Please return it to: (Name of School, Address)**

[RP0903]