

# Exit Survey - Annual

## Exit Year: 2024-2025



West Virginia DEPARTMENT OF  
EDUCATION

The West Virginia Department of Education is gathering information from exiting students during the current school year to improve secondary transition services that prepare students for education/training, employment, enlistment, and independent living skills necessary for success after high school.

Please mark your response in the boxes and fill in the blanks where applicable, or complete online under **Exit Surveys** at:  
<http://wvde.us/academics/special-education/surveys/>.

First Name _____	MI _____	Last Name _____	Local Educational Agency (LEA) _____
Birth Date: _____	WVEIS # _____	<b>Reason for Exit:</b>	
High School: _____	Eligibility: _____	<input type="radio"/> Graduated: Regular Diploma	
Race/Ethnicity: <input type="radio"/> HI - Hispanic or Latino <input type="radio"/> AM - American Indian/Alaskan Native <input type="radio"/> AS - Asian		<input type="radio"/> Graduated: Alternate Diploma	
<input type="radio"/> BL - Black or African American <input type="radio"/> PI - Native Hawaiian/Pacific Islander <input type="radio"/> WH - White/Caucasian		<input type="radio"/> Dropped Out	
This survey was completed by: <input type="radio"/> Student <input type="radio"/> Parent <input type="radio"/> Local Educational Agency (LEA) personnel		<input type="radio"/> Dropped Out for Employment	
		<input type="radio"/> Reached Maximum Age of 21	

Please contact the student's case manager for additional information to answer any of the questions below:

**1. Career Cluster** \_\_\_\_\_

**2. Cluster Concentration** \_\_\_\_\_

### 3. Career and Technical Education Programs

I have completed the required courses and earned my certificate in a Career and Technical program concentration.

☐ Yes ☐ No

I have earned the industry credential for my Career and Technical concentration area.

☐ Yes ☐ No

### 4. Job Experience While in High School

☐ Work-based learning experience ☐ Part-time work  
☐ Summer job ☐ None ☐ Other: \_\_\_\_\_

### 5. Extracurricular Activities While in High School

☐ Clubs ☐ Performing Arts ☐ Volunteer Activities  
☐ Sports ☐ None ☐ Other: \_\_\_\_\_

### 6. Career Plans

The job or occupation I plan to have after high school:

### 7. General Information

I have a current driver's license. (Not a learner's permit)

☐ Yes ☐ No

My special education services helped me to be successful in general education classes.

☐ Yes ☐ No ☐ I am not in general education classes

My ideas and suggestions were considered and included at my most recent IEP meeting.

☐ Yes ☐ No ☐ I don't know

I am comfortable discussing my special needs and asking for help.

☐ Yes ☐ No

### 8. Future Plans (Living)

My plan immediately after high school is to live:

- ☐ At home with parents or other family  
☐ Independently in my own place or with friends  
☐ In group home/supervised shared apartment  
☐ In a dormitory or on a military base  
☐ Other: \_\_\_\_\_

### 9. Future Plans for Adult Support

I plan to request supports under the Americans with Disabilities Act (ADA) or Section 504.

Yes ☐ No ☐ Need more information

I plan to obtain Rehabilitation Services support.

☐ Yes ☐ No ☐ Need more information

### 10. Future Plans (Choose A or B)

\_\_\_\_ **A.** Yes, I plan to continue my education.

(Please provide more information by choosing one below)

- ☐ Apprenticeship/On-the-Job Training  
☐ Adult Education (Skill Building, Adult Basic Education, etc.)  
☐ Career & Technical Education/Vocational Training  
☐ College (4 Year)  
☐ Community & Technical College (2 Year)

\_\_\_\_ **B.** No, I do NOT plan to continue my education.

(Please provide more information by choosing all that apply)

- ☐ Have a job  
☐ Need to work  
☐ Am getting married  
☐ Am unsure of my plans  
☐ Need a break from school  
☐ Am joining the military  
☐ Find education too expensive  
☐ Do not need more education for my job  
☐ Have poor grades  
☐ Am not ready  
☐ Other: \_\_\_\_\_

**Please continue survey on next page**

Level of Staff Support

Mark the box that best describes how much school staff helped you with the following:

	Mark only ONE box for each		
	Not at All	Some	A Lot
a. Plan for a career			
b. Connect to a job			
c. Connect to further education or training opportunities (Examples: college, career technical education, apprenticeship, and adult education)			
d. Connect with adult support agencies (Examples: Rehabilitation Services, Social Security, and Independent Living)			
e. Develop work related skills (Examples: self-responsibility, getting along with others, and use of technology)			
f. Have confidence to continue my education after high school			
g. Talk about my disability			
h. Ask for the supports I need to be successful in work, training, and education programs			

Helpful School Supports

Mark all the boxes that identify which school experiences most helped to prepare you for the following:

	Mark all that apply				
	Academic Classes	Career Technical/ Vocational Classes	Career Activities at School	IEP Participation	Special Education Supports
a. Plan for a career					
b. Connect to a job					
c. Connect to further education or training opportunities (Examples: college, technical education, and apprenticeship)					
d. Connect with adult support agencies (Examples: Vocational Rehabilitation and Social Security)					
e. Develop work-related skills (Examples: self-responsibility, getting along with others, and use of technology)					
f. Have confidence to continue my education after high school					
g. Talk about my disability					
h. Ask for the supports I need to be successful in work, training, and education programs					

Thank you for completing this survey.

Please return this survey by June 30, 2025.

Local Educational Agency (LEA) Contact: \_\_\_\_\_

Place return mailing label here:

