

AFTER THE JD: A Longitudinal Study of Careers in Transition



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AJD

**Please note that you can
complete this survey on the
Web. Consult the enclosure
on Web survey access.**

AJD QUESTIONNAIRE – WAVE 2 –

After the JD is the largest and most ambitious longitudinal study of the legal profession. It was prompted by recent statistics showing that lawyers change jobs at high rates and often exit the profession altogether. These statistics raise questions about the environments in which lawyers work and the sources of satisfaction and frustration that affect their professional and personal lives.

Sponsored by a consortium of organizations, the study aims to create a definitive picture of the careers of individuals admitted to the bar in the early twenty-first century. Thanks to the over 4,500 first-time bar admitted lawyers who responded to our initial survey in 2002, we have gathered a variety of groundbreaking findings.

For example, some of the basic findings are:

- 46% of the AJD1 respondents were women compared to 5% of new lawyers who were women in 1970
- 17% of the AJD1 respondents were racial-ethnic minorities compared to 5% of new lawyers who were racial/ethnic minorities in 1970
- 70% of AJD1 respondents reported work in law firms, 16% in government, 9% in business, and 4% in public interest
- About 20% of AJD1 respondents reported working 60 or more hours a week
- Male AJD1 respondents were more likely to be married than female AJD1 respondents; however both were less likely to have children compared to their age cohort in the general population

There are many more unique findings that are capturing the attention of scholars and others interested in the legal profession. We hope that we will be able to include you and your experiences in the Wave 2 results.

INSTRUCTIONS

Thank you for taking the time to complete this questionnaire. Directions are provided for each question. Because not all questions will apply to everyone, you may be asked to skip certain questions.

1. When answering questions that require you to mark a box, **please use an “X”** and place it inside the box.
2. Please PRINT all responses to questions that ask you for a written response.
3. As a study of the careers of individuals admitted to the bar, this questionnaire contains the following sections:
 - I. Current Professional Employment
 - II. Professional Employment History
 - III. Current Employment and Career Transitions
 - IV. Training, Education, and Debt
 - V. Social, Political, and Community Participation
 - VI. Other Background Information (including Parenting and Well-Being)
4. We welcome comments from you beyond your responses to specific questions, and have provided a page at the end of the questionnaire where you may enter them.
5. If you have questions about the After the JD study as a whole, please contact:
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312-988-6530
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6. If you have questions about this questionnaire, please contact:
Terry K. Adams
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I. CURRENT PROFESSIONAL EMPLOYMENT

1. Describe your current employment status by checking the appropriate box(es) below:

- a. Full time → **Skip to Question #2.**
- b. Part time, *Check all that apply, then*
→ **Skip to Question #2.**
- In order to care for children
 - In order to care for other family members
 - Due to a disability
 - Can't find full-time employment
 - For other reasons
(Please specify: _____)
- c. Not employed ↴

If you are not employed, please answer Questions 1C(i) and 1C(ii), and then **skip to Section II on page 10.**

i. Are you not employed for any of the following reasons? *Check all that apply.*

- In order to care for children
- In order to care for other family members
- Due to a disability
- Can't find employment
- For other reasons
(Please specify: _____)

ii. If you are not employed, are you doing any of the following? *Check all that apply.*

- Looking for full-time employment
- Looking for part-time employment
- Retired
- Left the paid workforce but not retired
- Other (Specify: _____)

2. What is the name of your current primary employer, and the city and state/country of your current place of primary employment?

Name of Employer:	
City:	State/Country:

a. Are you currently licensed to practice law in this state/country?

- 1 Yes
0 No

3. On what date did you begin to work for this employer?

Month	Year
-------	------

4. What type of organization is it? *Check one box only.*

- Solo practice
- Private law firm
- Federal government (including judiciary)
- State or local government (including judiciary)
- Legal services or public defender
- Public interest organization
- Other non-profit organization
- Educational institution
- Professional service firm (e.g., accounting, investment banking, consulting)
- Other Fortune 1000 industry/service
- Other business/industry
- Labor union, trade association
- Military
- Other (Specify: _____)

5. Are you a practicing lawyer in your primary job?

- 1 Yes → **Skip to Question #8.**
0 No

6. a. If you are not practicing law, what type of business or industry are you currently working in? (for example: hospital, bank, newspaper publishing)

b. What is your current occupation? (for example: registered nurse, accountant, personnel manager)

c. What are your most important activities or duties in this current job? (for example: patient care, directing hiring policies, supervising order clerks, reconciling financial records)

7. Are you self-employed in your current job?

- 1 Yes
0 No

8. How many people are employed in your organization (i.e. business, professional practice, or firm)?

 # of people

9. a. How many lawyers work in your entire firm or organization?

(Enter "1" if in solo practice)

b. How many lawyers work in your office?

10. Do you supervise anyone (e.g., secretary, associate, clerks) on your job?

- 1 Yes (If yes, enter # of individuals you supervise)
0 No → **Skip to Question # 12.**

11. a. If you supervise anyone, do you give directions to this (these) person(s)?

- 1 Yes
0 No

b. Can you reward this person(s)?

- 1 Yes
0 No

c. Does anyone you supervise (e.g., a secretary, associate) in turn supervise anyone as part of his/her job?

- 1 Yes
0 No

12. a. Do you receive supervision from anyone (e.g., another associate or partner) on your job?

- 1 Yes
0 No → **Skip to Question # 13.**

b. If yes, does this person give you directions?

- 1 Yes
0 No

c. Can this person reward you?

- 1 Yes
0 No

d. Does this person, in turn, receive supervision from someone else or others (e.g., senior partner/s)?

- 1 Yes
0 No

13. How frequently are you required to design important aspects of your own work and to put your ideas into practice? Check one box below.

- Never 1, 2, 3, 4, 5 Very Frequently

14. Do you hold any other paid jobs in addition to your primary position?

- 1 Yes
0 No -> Skip to Question #16.

15. What is the nature of your additional job?

Empty box for describing the nature of the additional job.

16. What is your position (in your primary job)? Check one box only.

- 1 Solo practitioner, 2 Associate, 3 Non-equity partner, 4 Equity partner/Shareholder, 5 Contract attorney, 6 Of Counsel, 7 Supervising/managing attorney, 8 Staff attorney, 9 Permanent judicial clerk, 10 Judge, 11 Prosecutor, 12 Public defender, 13 Entry level manager/Consultant, 14 Mid-level manager/Consultant, 15 Senior level manager/Consultant, 16 Business owner/Operator, 17 Elected official (other than judge), 18 Non-elected public official, 19 Lobbyist/Governmental affairs, 20 Law school/Academic administrator, 21 Law professor (tenure track), 22 Law professor (non-tenure track), 23 Other (than law) teacher/professor, 24 Student/Fellow, 25 Other (Specify:)

17. In the last week, how many hours did you spend in each of the following activities... If you were on vacation or sick leave last week use last week that you worked. Please enter the number of hours for each function. Enter "0" if you spent no time in any of the categories.

- a. working at the office or firm? # of Hours
b. working away from the office or firm on weekdays? # of Hours
c. working away from the office or firm on weekends? # of Hours
d. attending networking functions? # of Hours

e. participating in recreational activities (e.g., golf) for networking purposes with other lawyers or clients?

of Hours

18. How many hours were you expected to work last week? If you were on vacation or sick leave use the last week that you worked.

of Hours

-> If you are not a practicing attorney, skip to Question #30.

19. During the past year, how many hours have you devoted to pro bono work:

a. as part of your job (your law firm/employer was not compensated but these hours were considered by your employer as a legitimate part of your total hours worked)? # of Hours

b. not as part of your job? # of Hours

c. What percent of all your pro bono hours were spent on the following activities:

- 1. Providing legal services to poor or low income individuals %
2. Providing legal services to charitable organizations %
3. Other (specify) %

20. Approximately what percentage of your time do you spend in each of the following areas of law? Enter "0" if you spend no time in any given area. These allocations should total 100% of your time.

- a. Antitrust, b. Bankruptcy, c. Civil and Commercial litigation, d. Civil rights/liberties, e. Commercial law (Banking, Consumer law, Uniform Commercial Code), f. Criminal law, g. Employment law - management, h. Employment law - unions, i. Environmental law, j. Family law (Divorce, Adoption), k. General corporate, l. General practice, m. Health law, n. Immigration law, o. Insurance, p. Intellectual property (Patents, Trademarks, Copyrights), q. Municipal law (including bond issues), r. Personal injury - defense, s. Personal injury - plaintiffs, t. Probate (Wills and Trusts), u. Public utilities, Administrative law, and Regulated industries, v. Real estate - Commercial, w. Real estate - Personal/Residential, x. Securities (Mergers, Security fraud), y. Tax, z. Workers compensation, aa. Other (Specify:), TOTAL = 100%

21. Approximately what percentage of the lawyers in your workplace are men?

_____ % NA

22. Approximately what percentage of the lawyers in your workplace are members of racial-ethnic minority groups?

_____ % NA

23. Whether or not you are certified as a specialist by your state, do you consider yourself a specialist?

1 Yes **If yes, please enter the name of your specialty in the box below. ↓**
 0 No

24. What percentage of your work over the past year has involved non-U.S. clients or cross-border matters?

_____ %

25. Approximately, how many distinct legal matters have you worked on over the past three months? (A matter is a separate "client", case, transaction, etc.)

(Enter # of legal matters)

26. Over the total life of these matters, on how many of them were you . . . Check one box on each line.

	NA	None	Some	Half	Most	All
a. Involved in face-to-face meetings with clients?	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b. Responsible for keeping the client updated on the matter?	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
c. Doing routine research and memo-writing?	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
d. Spending 100 or more hours reviewing discovered documents or performing due diligence on prepared materials?	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
e. Writing motions or taking depositions?	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
f. Appearing in court as first or second chair on a case?	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
g. Drafting transactional documents?	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
h. Involved in formulating strategy on the matter with attorneys more senior than you and/or with clients?	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
i. Traveling to meet with clients, interview witnesses, or making court appearances?	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
j. Assigning and/or supervising the work of others (attorneys or paralegals)?	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
k. Handling the entire matter on your own?	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
l. Alternative dispute resolution, including arbitration	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
m. Negotiating with lawyers not in your firm or office	<input type="checkbox"/>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

27. Which of the following do you do on a recurring basis?

Check all that apply.

- a. Participate on the office/firm recruitment committee
- b. Join partners (if you are in a law firm) or senior attorneys (if you are in another setting) for breakfast or lunch
- c. Spend recreational time with partners (if you are in a law firm) or senior attorneys (if you are in another setting)
- d. Spend recreational time with associates (if you are in a law firm) or staff attorneys (if you are in another setting)
- e. Write for publications, presentations, or employer sponsored seminars
- f. Participate at least monthly in bar association activities, civic groups, or non-profit associations
- g. Serve on boards of directors of business organizations or trade associations
- h. Serve on boards of directors of charitable organizations, community groups, educational organizations, or other tax exempt organizations

28. Of your total work involving specific clients, approximately what percentage of your time is spent representing each of the following?

Fill in blanks with percentages totaling 100%.

- a. High-income individuals _____%
 - b. Middle-income or low-income individuals _____%
 - c. Fortune 500 businesses/services _____%
 - d. Other large or middle-sized businesses _____%
 - e. Small businesses _____%
 - f. Governments, government agencies _____%
 - g. Start-up businesses _____%
 - h. Insurance companies _____%
 - i. Non-profit organizations _____%
 - j. Other (Specify: _____) _____%
- TOTAL = 100%

29. Is there a particular community or social group (e.g., gender, religious, racial/ethnic group, national origin) that you tend to represent more often than others in your practice?

- 1 Yes **If yes, please enter the name of the group in the box below ↓**
- 0 No

30. Which of the following describes your current work situation?

- 1 In private law firm practice
- 0 Not in private law firm practice → Skip to Question # 40.

31. a. How many hours were you expected to bill last year (2006)? If you worked for multiple law firms in 2006 include the total for all firms here.

If you were not expected to bill a particular number of hours, please enter "0".

_____ # of Hours

b. How many hours did you actually bill last year (2006)?

_____ # of Hours

c. For how many weeks did you work for a law firm (or law firms) in 2006 (exclude vacation weeks)?

_____ # of weeks

d. Which of the following posed difficulties in meeting your billables in 2006?

Please check all that apply from the list below...

- 1. Did not get enough assignments
- 2. Partner discounted hours (or did not give them full credit)
- 3. Personal choice
- 4. Health issues
- 5. Less likely to bill for actual hours worked compared to my colleagues
- 6. Too much time spent on pro bono
- 7. Too much time spent on administrative tasks

32. a. Did you personally bring in any new clients to your law firm or practice last year, 2006?

- 0 No → If No, Skip to Question # 33.
- 1 Yes

b. How many new clients did you personally bring to your law firm or private practice last year, 2006?

of clients

c. Approximately how much revenue did these clients generate in the year 2006?

\$

33. How would you rate your ability to obtain new business for your firm relative to your peers?

- | | |
|---------------------------------|--------------------------------|
| Much better than average | Much worse than average |
| 1 <input type="checkbox"/> | 7 <input type="checkbox"/> |
| 2 <input type="checkbox"/> | 6 <input type="checkbox"/> |
| 3 <input type="checkbox"/> | 5 <input type="checkbox"/> |
| 4 <input type="checkbox"/> | 4 <input type="checkbox"/> |

34. a. Are there any of the firm's preexisting clients (not including new clients you brought in) for whom you are the primary responsible attorney?

- 0 No → If No, Skip to Question # 36.
- 1 Yes

b. For how many of these preexisting clients do you have primary responsibility?

_____ # of clients

c. Approximately how much revenue did these clients generate in the year 2006?

\$ _____

d. Do you have primary responsibility for relations with one or more of the major (i.e. the highest billing ten percent) clients of the firm?

- 1 Yes
- 0 No

35. In obtaining your clients for whom you have primary responsibility, how important was each of the following....? Check one box on each row.

	Not Important					Very Important				
a. Being introduced to clients by a partner in the firm	1	2	3	4	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Referral of clients from family or friends	1	2	3	4	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Referral of clients from other lawyers	1	2	3	4	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Referral of clients from involvement in social clubs/affiliations	1	2	3	4	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Advertising (i.e., traditional print and media)	1	2	3	4	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Online advertising	1	2	3	4	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Internet networking sites (e.g., facebook, blogs)	1	2	3	4	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Professional organizations	1	2	3	4	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Other businesses	1	2	3	4	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Referrals from other professionals	1	2	3	4	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Other (Specify: _____)	1	2	3	4	5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

36. Does your firm have any of the following positions? Check all that apply.

- a. Equity Partner
- b. Non Equity Partner
- c. Of Counsel
- d. Contract Lawyer

37. How strongly do you aspire to attain each of the following positions within your firm? Check one box on each row.

I am already an equity partner in the firm → If checked, skip to Question #39.

	NA	Not at All					Low Aspirations					Very High Aspirations									
		1	2	3	4	5	6	7	8	9	10	1	2	3	4	5	6	7	8	9	10
a. Equity Partner	<input type="checkbox"/>	1	2	3	4	5	6	7	8	9	10	1	2	3	4	5	6	7	8	9	10
b. Non Equity Partner	<input type="checkbox"/>	1	2	3	4	5	6	7	8	9	10	1	2	3	4	5	6	7	8	9	10
c. Of Counsel	<input type="checkbox"/>	1	2	3	4	5	6	7	8	9	10	1	2	3	4	5	6	7	8	9	10
d. Contract Lawyer	<input type="checkbox"/>	1	2	3	4	5	6	7	8	9	10	1	2	3	4	5	6	7	8	9	10
e. Other (Specify: _____)	<input type="checkbox"/>	1	2	3	4	5	6	7	8	9	10	1	2	3	4	5	6	7	8	9	10

38. How would you rate your chances, as a percentage ranging from 0 to 100, of attaining each of the following positions in your firm?

- a. Equity Partner%
- b. Non Equity Partner%
- c. Of Counsel%
- d. Contract Lawyer%

39. This question is about possible assistance and support you may have received or are receiving at your job.

Indicate the number (from the list below) of the most important sources of assistance to you in the following aspects of your job:

Aspects of Your Job

a. Acquiring technical aspects of the job	
b. Learning firm/office protocols and customs	
c. Devising specific strategies for achieving your career goals	
d. Receiving support and encouragement in stressful times	
e. Getting informal feedback on your performance	
f. Gaining valuable networking opportunities	
g. Having a personal advocate within the firm or office	

Sources of Support

- | | |
|--|-----------------------------|
| 1. Formal training program | 6. Non-lawyer colleagues |
| 2. Firm/office-designated mentor | 7. Friends and family |
| 3. Informal mentors at your firm or office | 8. Peers |
| 4. Your immediate supervisor | 9. Self-taught |
| 5. Colleagues at other firms/offices | 10. Other (Specify: _____) |

40. a. How many *informal* mentors have you had at your current job?

_____ Enter "0" if you do not have any informal mentors and skip to Question # 43.

b. How many of these informal mentors are or have been partners/senior attorneys or managers?

c. With respect to the informal mentor at your *current job*, who has been the *most important* to you in your career, please check that person's

c1. Race/Ethnicity

- 1. Black/African American
- 2. Hispanic/Latino
- 3. Native American/American Indian
- 4. Asian/Pacific Islander
- 5. White/Caucasian
- 6. Other (Specify: _____)

c2. Gender

- 1. Male
- 2. Female

c3. Position in the firm/office

- 1. Partner/Executive/Manager
- 2. Associate or co-worker senior to me
- 3. Associate or co-worker junior to me
- 4. Of counsel
- 5. Other (Specify: _____)

41. How often do you and your mentor spend time socializing out of the office?

Approximately _____ times in the past 12 months.

42. How soon after you started your job did the relationship with your mentor begin?

- 1. Less than a month
- 2. More than a month but less than a year
- 3. One to three years
- 4. More than three years

43. How satisfied are you with each of the following aspects of your current position? Check one box on each line.

	Highly Dissatisfied					Highly Satisfied		NA
a. Level of responsibility you have	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
b. Recognition you receive for your work	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
c. Substantive area of your work	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
d. Tasks you perform	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
e. Opportunities for advancement	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
f. Method by which compensation is determined (including salary, benefits and bonus, if applicable)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
g. Control you have over the amount of work you do	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
h. Control you have over how you do your work	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
i. Relationships with colleagues	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
j. Opportunities for doing pro bono work	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
k. Intellectual challenge of your work	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
l. Opportunities for building skills	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
m. Amount of travel required	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
n. Diversity of the workplace	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
o. Performance evaluation process	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
p. Value of your work to society	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
q. Job security	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
r. Access to information technology	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
s. Balance between personal life and work	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>

44. What changes would you most like to see in your job? Check all that apply.

- | | |
|---|--|
| a. <input type="checkbox"/> The establishment by my employer of formal leave policies | h. <input type="checkbox"/> Greater opportunity to shape the future direction of the office/firm |
| b. <input type="checkbox"/> Greater encouragement by my employer to make use of formal leave policies | i. <input type="checkbox"/> More and/or better mentoring by senior attorneys, co-workers, partners |
| c. <input type="checkbox"/> Less pressure to engage in client development | j. <input type="checkbox"/> More and/or better training |
| d. <input type="checkbox"/> Fewer hours | k. <input type="checkbox"/> More opportunities for pro bono work |
| e. <input type="checkbox"/> Less pressure to bill | l. <input type="checkbox"/> Method by which compensation is determined |
| f. <input type="checkbox"/> More flexibility by my employer in accommodating my personal life | m. <input type="checkbox"/> Better integration of technology |
| g. <input type="checkbox"/> Greater opportunity to shape decisions on matters I'm working on | n. <input type="checkbox"/> Technology assistance or training |
| | o. <input type="checkbox"/> Other (<i>Specify:</i> _____) |

46. How satisfied are you with your decision to become a lawyer?

- 1 Extremely satisfied
- 2 Moderately satisfied
- 3 Neither satisfied nor dissatisfied
- 4 Moderately dissatisfied
- 5 Extremely dissatisfied

47. If the decision were up to you, approximately how much longer would you like to stay with your current employer?

- 1 I am already looking for another position
- 2 Less than a year
- 3 1-2 years
- 4 3-5 years
- 5 More than 5 years

48. How important are each of the following long term goals to you? Check one box on each line.

	Not at all Important				Very Important
a. Intellectual challenge	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
b. Help individuals	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
c. Accumulate wealth	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
d. Become an influential person	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
e. Change or improve society	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
f. Have a satisfying career	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>
g. Have both a satisfying career and a personal life	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>

II. PROFESSIONAL EMPLOYMENT HISTORY

This section requests details of each employment position you have held when you were admitted to your **first bar, *not including your current position***. By “position,” we mean different job titles with the same employer as well as with new employers; thus if you changed from associate to partner with a single employer, please treat that as two positions in the table below. Please begin in the “First Position” column with the position you held when you were first admitted to your first bar (or the first position you held after that, if you were not employed right after your first bar admission) and work forward to the last position you held before your current position.

49. If you have not been employed in any setting since being admitted to the Bar, check here → and Skip to Section III on page 12.

50.

	FIRST POSITION			SECOND POSITION			THIRD POSITION			FOURTH POSITION			FIFTH POSITION		
1. Name of Employer															
2. Type of organization (List A, pg. 11)															
3. Location (city/state/country)															
4. Nature of position (List B, pg. 11)															
5. Start date (mo/yr)															
6. End date (mo/yr)															
7. Starting Salary															
8. Ending Salary															
9. Full or part-time	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time			<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time		
10. Approximate number of lawyers at all locations of this organization															
11. Reasons for leaving this position, if applicable (up to three most important reasons/List C, pg. 11)	1.	2.	3.	1.	2.	3.	1.	2.	3.	1.	2.	3.	1.	2.	3.

List A

1. Private law firm or solo practice
2. Federal government
3. State or local government
4. Legal services or public defender
5. Legal temporary firm
6. Public interest organization
7. Other non-profit organization
8. Educational institution
9. Professional service firm
(e.g., accounting, investment banking, consulting)
10. Other Fortune 1000 industry/service
11. Other business/industry
12. Labor union, trade association
13. Military
14. Other (*Specify:*

_____)

List B

1. Solo practitioner
2. Associate
3. Non-equity partner
4. Equity partner/Shareholder
5. Contract attorney
6. Of Counsel
7. Supervising/managing attorney
8. Staff attorney
9. Permanent judicial clerk
10. Judge
11. Prosecutor
12. Public defender
13. Entry level manager/Consultant
14. Mid-level manager/Consultant
15. Senior level manager/Consultant
16. Business owner/Operator
17. Elected official (other than judge)
18. Non-elected public official
19. Lobbyist/Governmental affairs
20. Law school/ Academic administrator
21. Law professor (tenure track)
22. Law professor (non-tenure track)
23. Other (than law) teacher/professor
24. Student/ Fellow
25. Other (*Specify:*

_____)

List C

Reasons for leaving this job (List as many as three, in order of importance.)

Dissatisfaction with the job

1. Dissatisfaction with the practice area
2. Conflicts with management or supervisor, peers or other personnel, or subordinates
3. Dissatisfaction with assignments
4. Disagreement with firm or company policies
5. Desire to change sector (private/non-private) of practice
6. Signals from management that opportunity to advance would be limited
7. Experienced discrimination

Better opportunities elsewhere

8. For a better job (higher pay, better benefits, more prestigious firm, faster track, more responsibility)
9. To accommodate dual careers
10. To better accommodate family needs
11. For a better work environment
12. For a more diverse work environment
13. For more compatible hours

Other reasons

14. Firm or company was downsized
15. Firm or company was closed
16. Received a promotion
17. Illness or injury
18. Maternity/paternity leave
19. To return to school
20. Contract ended
21. Moved to be nearer to spouses' job
22. Preferred different locale
23. Was fired
24. Other (*Specify:*

_____)

III. CURRENT EMPLOYMENT AND CAREER TRANSITIONS

If you are not currently employed, check here and skip to Question #54.

51. How important were each of the following in helping you obtain your current job? *Check one box on each line.*

	Not at all Important						Extremely Important
a. Family members	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
b. Law school classmates	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
c. Other friends or business associates	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
d. Law school's alumni/ae network	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
e. Direct, unsolicited contact with the employer	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
f. Response to an advertisement	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
g. Online employment agency, listing or discussion groups	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
h. Headhunters	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
i. Volunteer/Pro Bono	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
j. Other lawyers or acquaintances	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
k. Bar Association	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
l. Recommendation of a law professor	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
m. Experience in a judicial clerkship	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
n. Clients	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
o. Political affiliation or appointment	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
p. Undergraduate classmates	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
q. Opposing counsel from a previous case	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
r. Recommendation of judges	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
s. Involvement in social clubs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
t. Other (<i>Specify:</i> _____)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

52. In taking your current job, how important was each of the following factors in making your choice? Check one box on each line.

	Not at all Important						Extremely Important	NA
a. Salary	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
b. Benefits	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
c. Prospects for advancement	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
d. Office environment/collegiality	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
e. Hours expected	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
f. Paying off law school debts	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
g. Pro bono opportunities	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
h. Location	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
i. Size of organization	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
j. Prestige of the organization	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
k. Diversity of the workplace	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
l. Potential to balance work and personal life	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
m. Opportunity to do socially responsible work	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
n. Match of employers mission and mine	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
o. Opportunity to develop specific skills	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
p. Substantive interest in a particular field of law	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
q. Loan repayment assistance program	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
r. Access to sophisticated information technology (i.e., PDA's, online legal research tools, etc.)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
s. Other (Specify: _____)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>

53. How important do you believe each of the following factors was in this organization's decision to make you a job offer?
Check one box on each line.

	Not at all Important						Extremely Important	NA
a. The reputation of the law school I attended	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
b. My law school grades	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
c. My prior work experience	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
d. The reputation of the undergraduate school I attended	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
e. My ability to attract clients	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
f. My participation in law journal or moot court	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
g. Family connections	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
h. Friends	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
i. Connections through colleagues	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
j. The recommendations of faculty from my law school	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
k. Prestige of my previous position	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
l. The skills I gained in my prior position	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
m. My government connections/experience	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
n. My race/ethnicity	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
o. My gender	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
p. My physical appearance	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
q. My sexual orientation	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
r. Personal qualities I possess (<i>Specify briefly:</i> _____) _____) ...	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
s. Other (<i>Specify:</i> _____) ...	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>

IV. TRAINING, EDUCATION, AND DEBT

54. In what year did you receive your undergraduate degree?

1	9		
---	---	--	--

Year

55. What is the name of the college/university from which you received your undergraduate degree? *Specify which campus, if multiple locations.*

56. Which of the following best describes your cumulative undergraduate grade point average?

- | | |
|--|---|
| 1 <input type="checkbox"/> 3.74 - 4.00 | 7 <input type="checkbox"/> 2.25 - 2.49 |
| 2 <input type="checkbox"/> 3.50 - 3.74 | 8 <input type="checkbox"/> Under 2.25 |
| 3 <input type="checkbox"/> 3.25 - 3.49 | 9 <input type="checkbox"/> Did not take any courses for which grades were given |
| 4 <input type="checkbox"/> 3.00 - 3.24 | 10 <input type="checkbox"/> Other |
| 5 <input type="checkbox"/> 2.75 - 2.99 | (<i>Specify:</i> _____) |
| 6 <input type="checkbox"/> 2.50 - 2.74 | |

57. In what month and year did you receive your law degree?

	/	
Month		Year

58. From what law school did you receive your law degree? *Specify which campus, if multiple locations.*

59. Which of the following best describes your cumulative law school grade point average?

- | | |
|--|---|
| 1 <input type="checkbox"/> 3.74 - 4.00 | 7 <input type="checkbox"/> 2.25 - 2.49 |
| 2 <input type="checkbox"/> 3.50 - 3.74 | 8 <input type="checkbox"/> Under 2.25 |
| 3 <input type="checkbox"/> 3.25 - 3.49 | 9 <input type="checkbox"/> Did not take any courses for which grades were given |
| 4 <input type="checkbox"/> 3.00 - 3.24 | 10 <input type="checkbox"/> Other |
| 5 <input type="checkbox"/> 2.75 - 2.99 | (<i>Specify:</i> _____) |
| 6 <input type="checkbox"/> 2.50 - 2.74 | |

60. In which states are you admitted to the bar?
Please use two-letter state abbreviations.

State	Date Admitted (Month/Year)
a. _____	_____/____/_____
b. _____	_____/____/_____
c. _____	_____/____/_____
d. _____	_____/____/_____
e. _____	_____/____/_____
f. _____	_____/____/_____

61. Since being admitted to the bar, have you considered any of the following other careers in addition to or instead of law?

	Yes	No
a. Business/management	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Community organizing	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Consulting	1 <input type="checkbox"/>	0 <input type="checkbox"/>
d. Investment banking	1 <input type="checkbox"/>	0 <input type="checkbox"/>
e. Journalism/writing	1 <input type="checkbox"/>	0 <input type="checkbox"/>
f. Politics	1 <input type="checkbox"/>	0 <input type="checkbox"/>
g. Public policy/public administration	1 <input type="checkbox"/>	0 <input type="checkbox"/>
h. Public/social service	1 <input type="checkbox"/>	0 <input type="checkbox"/>
i. Starting your own business	1 <input type="checkbox"/>	0 <input type="checkbox"/>
j. Teaching/academia	1 <input type="checkbox"/>	0 <input type="checkbox"/>
k. Other (Specify type of organization: _____)	1 <input type="checkbox"/>	0 <input type="checkbox"/>

62. Since being admitted to the bar, have you obtained any other degrees or certifications?

0 No
1 Yes → Please specify:

	Year Obtained
a. <input type="checkbox"/> Master of Arts or Science (M.A., M.S. or ScM.)	_____
b. <input type="checkbox"/> LL.M (specify type (e.g. Tax), if applicable): _____	_____
c. <input type="checkbox"/> Certification as a specialist in a field of law	_____
d. <input type="checkbox"/> MBA	_____
e. <input type="checkbox"/> M.D.	_____
f. <input type="checkbox"/> Doctorate (Specify field: _____) ...	_____
g. <input type="checkbox"/> Other (Specify: _____) ...	_____

If you are **not currently employed**, check here and skip to Question #64.

63. How helpful are the following elements of your law school years in your current work assignments? Check one box on each line.

	Not at all Helpful					Extremely Helpful	NA	
a. First-year curriculum	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
b. Clinical courses/training	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
c. Law schools courses (Specify up to three courses: _____)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
d. Course concentrations/specializations offered at your law school	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
e. Pro bono service work	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
f. Law school training in legal ethics	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
g. Law school training in legal writing	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
h. Technology training in courses or seminars	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>
i. Other (Specify: _____) ..	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>

64. Indicate your level of agreement or disagreement with each of the following statements about your legal education. Check one box on each line.

	Strongly Disagree					Strongly Agree	
a. Law school prepared me well for my legal career	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
b. Law school teaching is too theoretical and unconcerned with real life practice	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
c. The 3rd year of law school is largely superfluous	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
d. I wish I had received more business training in law school	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
e. I consider my law degree to have been a good career investment	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
f. If I had to do it over again, I would still choose to have gone to law school	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
g. Law school provided me with good information technology skills	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

If your current job is your first job after Law School, check here and skip to Question #67.

65. How important were each of the following in helping you obtain your first job after law school? Check one box on each line.

	Not at all Important					Extremely Important	
a. Family members	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
b. Law school classmates	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
c. Other friends or business associates	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
d. Law school's alumni/ae network	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
e. Direct, unsolicited contact with the employer	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
f. Response to an advertisement	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
g. Law school's placement office	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
h. On-campus interview process	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
i. Hired following a summer position	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
j. Hired following a part-time position I held during law school	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
k. Unpaid internship with first employer	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
l. Recommendation of a law professor	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
m. Experience in a judicial clerkship	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
n. Other (Specify: _____)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

66. How important do you believe each of the following factors was in this organization's decision to make you a *first job* offer?
Check one box on each line.

	Not at all Important							Extremely Important	NA
a. The reputation of the law school I attended	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
b. My law school grades	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
c. My participation in law journal or moot court	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
d. The reputation of the undergraduate school I attended	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
e. My prior work experience in this organization	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
f. My prior work experience	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
g. My potential for attracting clients	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
h. The recommendations of faculty from my law school	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
i. Personal connections (family, friends, colleagues)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
j. My race/ethnicity	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
k. My gender	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
l. My physical appearance	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
m. Personal qualities I possess (<i>Specify briefly:</i> _____)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	
n. Other (<i>Specify:</i> _____)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>	<input type="checkbox"/>	

67. a. When you graduated from law school, approximately what was the total amount of your education-related debt (include unpaid loans from undergraduate and law school as well as credit cards; enter "0" if none)?

\$ _____

b. Approximately what amount of this education-related debt that you incurred while in undergraduate and law school was credit card debt (enter "0" if none)?

\$ _____

68. Do you have remaining educational debt?

- 1 Yes
- 0 No → Skip to Section V, Question # 72.

69. If you have educational debt approximately how much do you still owe? Please indicate the actual dollar amount rounded to the nearest \$1,000.

\$ _____

70. To what extent has having educational debt influenced your decisions about any of the following? Please check one box on each line.

	No Influence					Strong Influence	
a. What job to take	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
b. What sector to work in	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
c. Where to live	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
d. Whether to have children	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
e. When to have children	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
f. Home ownership	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
g. Leaving the legal profession	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>
h. Other (<i>Please specify</i> _____)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	5 <input type="checkbox"/>	6 <input type="checkbox"/>	7 <input type="checkbox"/>

71. How important has each of the following resources been in helping you to manage repayment of your student loans? Please provide a response to each item.

	Not at all Important							Extremely Important	NA
	1	2	3	4	5	6	7		
a. Flexible payment options (e.g., level, graduated, income-based)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Refinancing through loan consolidation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Ability to postpone repayment through deferments (e.g., economic hardship, unemployment) or forbearance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Parental support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Spousal support	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Loan repayment assistance or loan forgiveness programs (LRAPs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Other (Please specify _____)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

V. SOCIAL, POLITICAL, AND COMMUNITY PARTICIPATION

72. Who among the following people live within 50 miles of your current home? Check all that apply.

- a. Mother
- b. Father
- c. Two or more siblings
- d. One sibling
- e. Two or all of your three closest friends
- f. One of your three closest friends
- g. None of the above

73. Which of the following best characterizes your national political party preference? Check one box.

- 1 Democrat
- 2 Independent
- 3 Republican
- 4 Unaffiliated
- 5 Other (Specify: _____)

74. Circle the number on each of the following scales that best characterizes your political leaning...

a. on social issues

1	2	3	4	5	6	7
Liberal			Moderate			Conservative

b. on taxation, spending and social welfare issues

1	2	3	4	5	6	7
Liberal			Moderate			Conservative

75. Indicate whether and at what level you have participated in each of the following organizations. Check one box on each line.

Level of Participation

	Level of Participation		
	Not a Member	Member	Currently Active Participant/ Officer
a. Political party	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
b. Political advocacy groups	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
c. PTA or other school organization	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
d. College alumni/ae associations	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
e. Law school alumni/ae associations	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
f. Charitable organizations	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
g. Religious organizations	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
h. American Bar Association	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
i. State or local bar associations	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
j. Substantive sections of bar associations	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
k. Gender-based organizations	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
l. Race/ethnicity-based organizations	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
m. Community/civic associations	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
n. Service organizations (e.g. Kiwanis, Rotary)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
o. Private clubs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
p. Organized sports leagues	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
q. Other (Specify: _____)	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

VI. OTHER BACKGROUND INFORMATION (INCLUDING PARENTING AND WELL-BEING)

This final set of questions is intended to provide information on your background characteristics. You may, of course, omit any question that you prefer not to answer. All the information you provide will be held in the strictest confidence.

76. Are you male or female?

- 1 Female
2 Male

77. What is your racial/ethnic group? Check all that apply.

- a. Black/African American
b. Hispanic/Latino
c. Native American/American Indian
d. Asian/Pacific islander
e. White/Caucasian
f. Other (Specify: _____)

78. Are you gay, lesbian, transgendered or bisexual?

- 1 Yes
0 No

79. In what year were you born?

1	9		
---	---	--	--

Year

80. What is your religious preference or affiliation? Check one box.

- 1 Roman Catholic
2 Protestant
 Denomination: (_____)
3 Jewish
 Denomination: (_____)
4 Muslim
 Denomination: (_____)
5 Other (Specify: _____)
6 None

81. Were your parents/guardians born in the United States?

- | | Yes | No |
|------------------------------|----------------------------|----------------------------|
| a. Mother or Female Guardian | 1 <input type="checkbox"/> | 0 <input type="checkbox"/> |
| b. Father or Male Guardian | 1 <input type="checkbox"/> | 0 <input type="checkbox"/> |

82. What is the highest level of education completed by each of your parents/guardians? Check one box in each column.

	Mother or Female Guardian	Father or Male Guardian
1. Grade school	<input type="checkbox"/>	<input type="checkbox"/>
2. Some high school	<input type="checkbox"/>	<input type="checkbox"/>
3. High school diploma or equivalent	<input type="checkbox"/>	<input type="checkbox"/>
4. Trade or vocational school	<input type="checkbox"/>	<input type="checkbox"/>
5. Associate degree or some college	<input type="checkbox"/>	<input type="checkbox"/>
6. Bachelor's or four-year degree	<input type="checkbox"/>	<input type="checkbox"/>
7. Law degree (J.D.)	<input type="checkbox"/>	<input type="checkbox"/>
8. Some graduate or professional school	<input type="checkbox"/>	<input type="checkbox"/>
9. Graduate or professional degree	<input type="checkbox"/>	<input type="checkbox"/>
10. Don't know	<input type="checkbox"/>	<input type="checkbox"/>

83. What were your parents'/guardians' occupations when you were in high school?

a. Mother or Female Guardian

b. Father or Male Guardian

84. In what sort of organization were your parents/guardians employed, or what sort of organization did they own/operate?

a. Mother or Female Guardian

b. Father or Male Guardian

- 85. Are or were any of your following relatives lawyers?**
Check all that apply.
- a. Mother or female guardian
 - b. Father or male guardian
 - c. One or more siblings
 - d. One or more grandparents
 - e. Other relative(s) (*Specify:* _____)
 - f. No relatives are or were lawyers

- 86. What is your marital status?**
- 1 Never married or never in a domestic partnership
 → Skip to Question #90.
 - 2 Married, first time
 - 3 Remarried after divorce, annulment or being widowed
 - 4 Domestic partnership
 - 5 Divorced or separated
 - 6 Widowed
 - 7 Other (*Specify:* _____)

- 87. If you are married or have a partner with whom you share a home, is your spouse/partner employed outside the home?**
- 1 Yes **What is your spouse/partner's occupation?** ↴
 - 0 No
-

88. On average, how many hours a week does your spouse (partner) work in a paid position?
 _____ hours/week

89. Approximately what is your spouse's (partner's) current annual income before taxes?
 \$ _____

- 90. a. Do any minor or young adult children live with you for a significant part of the year?**
- 0 No → **If no, skip to Question #94.**
 - 1 Yes
- b. How many? _____ # Number of Children**
- c. What are their ages? Please list in order from youngest to oldest.**

Child 1		Child 4	
Child 2		Child 5	
Child 3		Child 6	

91. For each child, please circle whether you took maternity and/or parental leave and indicate the number of weeks for parental leave (if applicable) in the boxes below: Please list in the same order as in question 90c.

	Took Maternity/ Parental Leave?		Number of weeks of leave taken	Number of weeks leave that were paid by your employer
	Yes	No		
Child 1	1 <input type="checkbox"/>	0 <input type="checkbox"/>		
Child 2	1 <input type="checkbox"/>	0 <input type="checkbox"/>		
Child 3	1 <input type="checkbox"/>	0 <input type="checkbox"/>		
Child 4	1 <input type="checkbox"/>	0 <input type="checkbox"/>		
Child 5	1 <input type="checkbox"/>	0 <input type="checkbox"/>		
Child 6	1 <input type="checkbox"/>	0 <input type="checkbox"/>		

92. As a result of having a child, have you done, or do you intend to do any of the following? Check all that apply.

	Yes	No
a. Leave your job	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Find a job with fewer hours	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Reduce your work hours	1 <input type="checkbox"/>	0 <input type="checkbox"/>
d. Work part time	1 <input type="checkbox"/>	0 <input type="checkbox"/>
e. Leave the paid workforce	1 <input type="checkbox"/>	0 <input type="checkbox"/>
f. Change sectors of practice (e.g., from private practice to government)	1 <input type="checkbox"/>	0 <input type="checkbox"/>
g. Encourage your partner to cut down on their work hours	1 <input type="checkbox"/>	0 <input type="checkbox"/>
h. Move closer to family	1 <input type="checkbox"/>	0 <input type="checkbox"/>
i. Lobby to change workplace policies	1 <input type="checkbox"/>	0 <input type="checkbox"/>
j. Work more hours	1 <input type="checkbox"/>	0 <input type="checkbox"/>
k. Spend more time working from home	1 <input type="checkbox"/>	0 <input type="checkbox"/>
l. Other (<i>Specify:</i> _____)	1 <input type="checkbox"/>	0 <input type="checkbox"/>

93. As a result of having a child, have you experienced any of the following adverse consequences at work? Check all that apply.

	Yes	No
a. Delay in promotion	1 <input type="checkbox"/>	0 <input type="checkbox"/>
b. Loss of seniority	1 <input type="checkbox"/>	0 <input type="checkbox"/>
c. Questioning of commitment to work	1 <input type="checkbox"/>	0 <input type="checkbox"/>
d. Loss of office space	1 <input type="checkbox"/>	0 <input type="checkbox"/>
e. Pressure to work while on parental leave	1 <input type="checkbox"/>	0 <input type="checkbox"/>
f. Difficulty in obtaining flexible hours or part time work	1 <input type="checkbox"/>	0 <input type="checkbox"/>
g. Loss of clients	1 <input type="checkbox"/>	0 <input type="checkbox"/>
h. Unreasonable work load following parental leave	1 <input type="checkbox"/>	0 <input type="checkbox"/>
i. Loss of challenging assignments	1 <input type="checkbox"/>	0 <input type="checkbox"/>
j. Loss of opportunities to travel	1 <input type="checkbox"/>	0 <input type="checkbox"/>
k. Loss of income	1 <input type="checkbox"/>	0 <input type="checkbox"/>
l. Other (Specify: _____)	1 <input type="checkbox"/>	0 <input type="checkbox"/>

94. In your household, who is primarily responsible for each of the following? Check one answer for each item listed below.

	Myself	Shared Equally	My Spouse/ Partner	Someone Else	NA No Children
a. Cooking meals	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	
b. Grocery shopping	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	
c. House cleaning	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	
d. Overseeing household repairs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	
e. Looking after household finances	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	
f. Laundry	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	
g. Arranging child care	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="checkbox"/>
h. Leaving work for children's needs	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="checkbox"/>
i. Looking after the children during daytime hours	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="checkbox"/>
j. Looking after children during evening hours	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>	<input type="checkbox"/>

95. Approximately what was your total compensation (pre-taxes) from your primary employer for the calendar year 2006 in each of the following categories?

- a. Salary \$ _____
- b. Bonus \$ _____
- c. Profit sharing/equity distribution \$ _____
- d. Stock Options (present value) \$ _____
- e. Other (Specify: _____) \$ _____

96. Compared to most people your age, how would you rate your health? Would you say your overall health is... Check one box below.

- 1 Much better than most people your own age
- 2 Somewhat better
- 3 About the same as most people your own age
- 4 Somewhat worse
- 5 Much worse than most people your own age

97. How often does your job interfere with each of the following? Please check one box on each line.

	Never	Rarely	Sometimes	Frequently
a. Your home or family life	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. Your social or leisure activities	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

98. How often does your home or family life interfere with each of the following? Please check one box on each line.

	Never	Rarely	Sometimes	Frequently
a. Your job	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>
b. Your social or leisure activities	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>

99. How many days during the last week (0-7) have you:

- a. Felt you just couldn't get going? # of days _____
- b. Felt sad? _____
- c. Had trouble getting to sleep or staying asleep? _____
- d. Felt that everything was an effort? _____
- e. Felt lonely? _____
- f. Felt you couldn't shake the blues? _____
- g. Had trouble keeping your mind on what you were doing? _____

100. How strongly do you agree or disagree with each of the following statements?

	Strongly Disagree						Strongly Agree							
a. I am responsible for my own successes.	1	2	3	4	5	6	7	1	2	3	4	5	6	7
b. I can do just about anything I really set my mind to.	1	2	3	4	5	6	7	1	2	3	4	5	6	7
c. My misfortunes are the result of mistakes I have made.	1	2	3	4	5	6	7	1	2	3	4	5	6	7
d. I am responsible for my failures.	1	2	3	4	5	6	7	1	2	3	4	5	6	7
e. The really good things that happen to me are mostly luck.	1	2	3	4	5	6	7	1	2	3	4	5	6	7
f. There's no sense planning a lot, if something good is going to happen, it will.	1	2	3	4	5	6	7	1	2	3	4	5	6	7
g. Most of my problems are due to bad breaks.	1	2	3	4	5	6	7	1	2	3	4	5	6	7
h. I have little control over the bad things that happen to me.	1	2	3	4	5	6	7	1	2	3	4	5	6	7

103. PLEASE COMPLETE THIS LOCATOR FORM: Because of the importance of this study, we may be contacting you again. Please provide the names of two other persons (friends, family members, etc.) who will usually know where to get in touch with you. The persons you list below will not be contacted unless we cannot find you.

1. Name: _____
Relationship: _____
Address: _____

City: _____
State: _____ ZIP: _____
Telephone: (_____) _____

2. Name: _____
Relationship: _____
Address: _____

City: _____
State: _____ ZIP: _____
Telephone: (_____) _____

104. Please provide your email address so that we can keep in touch with you, and keep you updated about After the JD. Your email address will only be used for correspondence directly related to the After the JD Study.

Email _____

**Thank you for your cooperation.
Please return the questionnaire in the postage-paid envelope provided to:**

**After the JD
Survey Research Center/384958
University of Michigan
PO Box 1248
Ann Arbor, MI 48106-9952**