

CHC Five Minute Scheduling Feedback Survey - Fall 2025

Start of Block: Default Question Block

Dear Student:

Crafton Hills College is committed to offering you the online and in-person instruction and support services that meet your needs. Please take a few moments to help the college better understand your scheduling needs for Fall 2025

This survey is **anonymous and confidential** -- you will NOT be required to offer identifying information (e.g., name or student ID) and any information you do offer will be kept strictly confidential. The deadline to complete the survey is XXXXXXXXXXXXXXXX.

Please contact Gio Sosa (gsosa@craftonhills.edu), Dean of Institutional Effectiveness, with any questions concerning the survey.

The survey takes approximately 5 minutes to complete. We appreciate your time and value your input!

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Please rank the method of instruction you prefer for the classes you take at the college in Fall 2025 -- 1 being the best (or most preferred) and 4 being the worst (or least preferred).

_____ In-Person Instruction (i.e., exclusively on-campus or face-to-face) (2)

_____ Hybrid (i.e., a combination of in-person/on-campus and online instruction) (3)

_____ Remote Synchronous learning (i.e., required meeting times with an instructor on zoom) (5)

_____ Asynchronous learning (i.e., No scheduled required meeting times for the class) (6)

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Please identify all of the days that you would like to take classes in **Fall 2025 (check all that apply)**.

- ☐ Monday (1)
 - ☐ Tuesday (2)
 - ☐ Wednesday (3)
 - ☐ Thursday (5)
 - ☐ Friday (6)
 - ☐ Saturday (7)
 - ☐ Sunday (8)
-

Please identify all of the the **start** times during the day that you would like to take classes in **Fall 2025 (check all that apply)**.

- ☐ Early Morning (Between 6:00AM - 8:00AM) (1)
 - ☐ Morning (Between 8:00AM - 12:00PM) (2)
 - ☐ Afternoon (Between 12:00PM - 4:00PM) (3)
 - ☐ Late Afternoon (Between 4:00PM - 6:00PM) (5)
 - ☐ Evening (Between 6:00PM - 10:00PM) (6)
 - ☐ Other: Please State Start Time(s) (9)
-

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Please rank the method you prefer when accessing the college's student services (e.g., counseling, financial aid, admission & records, application, registration, transcripts, etc.) -- **1 being the best (or most preferred) and 3 being the worst (or least preferred).**

- _____ In-Person (i.e., exclusively on-campus or face-to-face) (1)
- _____ Online (e.g., exclusively via Cranium Café or other online platform) (2)
- _____ Hybrid (i.e., availability of both in-person and online service delivery) (3)

Please rank the method of service delivery you prefer when accessing the college's academic support services (e.g., the library, tutoring, the STEM Center) -- **1 being the best (or most preferred) and 3 being the worst (or least preferred).**

- _____ In-Person (i.e., exclusively on-campus or face-to-face) (1)
- _____ Online (e.g., exclusively via Cranium Café or other online platform) (2)
- _____ Hybrid (i.e., availability of both in-person and online service delivery) (3)

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Which of the following schedules in **Fall 2025** best meets your needs to receive student services between Monday and Friday? (e.g., counseling, financial aid, admissions & records)

- ☐ Monday through Thursday from 9:00am to 6:00pm and Friday from 9:00am to 1:00pm (current college schedule) (1)
 - ☐ Monday through Friday from 8:00am to 5:00pm (2)
 - ☐ Monday through Thursday from 9:00am to 6:00pm and Friday from 9:00am to 4:30pm (4)
 - ☐ Other (5) _____
-

Do you intend to register for **Fall 2025** classes?

- ☐ Yes (1)
- ☐ No (2)
- ☐ Maybe (3)
- ☐ Not applicable -- I am graduating/transferring (4)

Skip To: Q43 If Do you intend to register for Fall 2025 classes? = No

Skip To: register_type If Do you intend to register for Fall 2025 classes? = Maybe

Skip To: recommendations If Do you intend to register for Fall 2025 classes? = Not applicable -- I am graduating/transferring

How many courses are you planning to take in Fall 2025?

- ☐ None (4)
- ☐ 1 course (5)
- ☐ 2 courses (6)
- ☐ 3 courses (7)
- ☐ 4 courses (8)
- ☐ 5 or more courses (9)

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You indicated that you intend to (or may intend to) register for **Fall 2025**. Please select the type of courses you would most likely enroll in for **Fall 2025 (Select all that Apply)**:

- ☐ General Ed (typically 100 and 101 level courses) (4)
- ☐ Advanced/Major Specific courses (typically 200 level or higher) (5)
- ☐ Advanced STEM courses (e.g. Calculus or Micro-Biology) (6)
- ☐ CTE (e.g. Fire-tech, Respiratory) (7)
- ☒ High Group Interactive content (e.g. Choir, Theater, Physical Education, Languages, Communication Studies) (8)
- ☐ [Personal Enrichment](#)
- ☐ Other (please describe) (9)

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What factors are having (or will have) the biggest influence on whether you register for **Fall 2025** classes? **Please check all that apply.**

- ☐ Class offerings that fit my schedule (11)
- ☐ Financial concerns (5)
- ☐ My work schedule (6)
- ☐ Family responsibilities (e.g.: child care) (7)
- ☐ Medical or health issues (8)
- ☐ I am graduating or transferring (9)
- ☒ Transportation (12)
- ☒ [Availability of online classes](#)
- ☒ [Available of in person classes](#)
- ☐ [The ability to complete a degree by taking courses completely online](#)
- ☐ Other (10) _____

Do you have any recommendations for the class schedule and/or services?

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Please tell us about yourself. **These questions are optional. All individual responses will be kept strictly confidential:**

Please identify the type of classes you are currently enrolled (**Select all that apply**):

- ☐ In-Person Instruction (i.e., exclusively on-campus or face-to-face) (1)
 - ☐ Hybrid (i.e., a combination of in-person/on-campus and online instruction) (2)
 - ☐ Remote Synchronous learning (i.e., required meeting times with an instructor on zoom) (7)
 - ☐ Asynchronous learning (i.e., No scheduled required meeting times for the class) (8)
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What is your major?

Please identify your gender:

- ☐ Woman (1)
 - ☐ Man (2)
 - ☐ Transgender (6)
 - ☐ Non-binary/non-conforming (3)
 - ☐ Decline to state (4)
 - ☐ Other identity not listed above (7)
-

Please identify your ethnicity (**Check all that apply**):

- ☐ Asian American (1)
- ☐ Black / African American (2)
- ☐ Filipino (6)
- ☐ Hispanic / Latinx (3)
- ☐ Native American / Alaskan Native (7)
- ☐ Native Hawaiian / Pacific Islander (5)
- ☐ White, non-Hispanic (8)
- ☐ Decline to State (9)
- ☐ Other (10) _____



age What is your age?

Please identify all that apply to you (check all that apply):

- ☐ LGBTQ community member (2)
- ☐ Foster youth at any time (1)
- ☐ Differently abled person (I have a physical or mental challenge) (10)
- ☐ Veteran or currently on active duty (3)
- ☐ Homeless (I lack a fixed, regular, and adequate residence) (9)
- ☐ Not Applicable / Decline to State (12)

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OPTIONAL

OPTIONAL -- Student Request to be Contacted

Would you like to be contacted by the college to receive additional information about available resources? If so, please provide your contact information below:

First and Last Name

Student ID

Email Address

End of Block: Default Question Block
