Small Business and Special Surveys Division

Survey of Information Technology Occupations, 2000: Employee Survey

In all correspondence concerning this questionnaire, please quote the QID and Case ID numbers listed below. ▼

Confidential when completed

Collected under the authority of Statistics Act, Revised Statutes of Canada, 1985, Chapter S-19.

Si vous préférez recevoir une version française de ce questionnaire, veuillez nous appeler au numéro de téléphone sans frais 1-877-679-2746.

The purpose of this survey

Statistics Canada is conducting this survey on behalf of Human Resources Development Canada to collect statistical information on employment trends in information technology (IT) occupations.

As you may know, many employers have reported having difficulty finding skilled labour and have raised concerns about whether there are sufficient numbers of employees in these occupations to meet the demand. At the present time, there is very little data available to determine the nature and extent of this problem.

This survey will provide government and businesses with up-to-date labour-market information for IT occupations within various industries and regions. The results will be used to help shape policy relating to this important group of occupations.

The data you are reporting are confidential

Statistics Canada is prohibited by law from publishing or releasing any statistics that reveal information obtained from this survey relating to any identifiable individual or business without your consent. The data reported on the questionnaire will be treated in strict confidence, used for statistical purposes and released in aggregated form only.

Your participation is important

Participation in this survey is voluntary. However, your co-operation is important in order for the survey results to be reliable. The information you provide will help shape current and future programs and policies.

Please complete and return this questionnaire within 10 days.

Please complete and return this questionnaire within 10 days of receipt.

Please send the completed questionnaire in the enclosed postage-paid envelope or if you wish to send it by facsimile, our FAX number is 1-877-792-9270.

If you require assistance in the completion of the questionnaire or have any questions regarding the survey, please contact:

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SECTION A - Occupational History

The following questions ask about your current and previous work positions. For the purpose of this survey, a position refers to a job with a specific set of duties, performed for a specific employer.

1. Including your current employer, how many different companies or organizations have you worked for **as an employee** within the last five years?

   Please, do not consider a change of ownership in a company or organization as a different employer.

   ☐ companies (organizations)

2. At any time in the last 5 years, have you been **self-employed**?

   1 ◯ Yes

   2 ◯ No

Your current position

3. Which of the following information technology (IT) occupations best describes your **current position**? *(Mark only ONE)*

   If you perform more than one function, then the occupation for which you spend the MOST number of hours should be assigned.

   | For definitions of these occupations please refer to the enclosed guide. |

   1 ◯ IT Training manager

   2 ◯ Web manager

   3 ◯ Computer and information systems manager

   4 ◯ Information systems business analyst or consultant

   5 ◯ Systems security analyst

   6 ◯ Information systems quality assurance analyst

   7 ◯ Systems auditor

   8 ◯ Database administrator

   9 ◯ Data administration analyst

   10 ◯ Network systems and data communications specialist

   11 ◯ Software engineer

   12 ◯ Computer engineer, except software

   13 ◯ Electrical and electronics engineer, except computer engineer

   14 ◯ Computer programmer

   15 ◯ Interactive media developer

   16 ◯ Computer and network operator

   17 ◯ Web technician

   18 ◯ Technical support analyst

   19 ◯ Systems testing technician

   20 ◯ Technical writer

   21 ◯ Graphic designer or illustrating artist

   22 ◯ Other IT occupation, **please specify**

4. What is the title of your current position?

5. What are the **most important** duties or activities of your current position?

_____

_____

6. Since you began in your current position, have the duties of this position changed:
(Mark only ONE)

   1 ◯ a great deal?
   2 ◯ somewhat?
   3 ◯ slightly?
   4 ◯ not at all?

7. How long have you been working at this current position?

   [____] months   OR   [____] years

8. Is your current position permanent or temporary?

   1 ◯ Permanent *(no set termination date)*
   2 ◯ Temporary *(a set termination date)*

9. Is your current position full time or part time?

   1 ◯ Full time *(30 hours or more per week)*
   2 ◯ Part time *(less than 30 hours per week)*

10. How many weeks per year do you usually work at this position?
(Please include paid vacation and other paid leave)

   [____] weeks

11. **Not counting overtime,** how many **paid** hours, on average, do you work per week at this position?

   [____] hours

12. In your current position, during the past year, how frequently have you worked **overtime**?
(Mark only ONE)

   1 ◯ Regularly
   2 ◯ Often
   3 ◯ Occasionally   ► **Go to Question 13**
   4 ◯ Rarely

   5 ◯ Never ► **Go to Question 16**

13. How are you compensated for your overtime?
(Mark ALL that apply)

   1 ◯ Paid at straight time *(at your regular rate of pay)*
   2 ◯ Paid at overtime rate *(at a higher rate of pay than your regular rate)*
   3 ◯ Given time off at straight time *(the amount of time off is the same as the number of extra hours worked)*
   4 ◯ Given time off at overtime rate *(the amount of time off is greater than the number of extra hours worked)*
   5 ◯ Informal arrangement
   6 ◯ Not compensated

14. How many hours of **paid overtime**, on average, do you work per week?

[____] hours

15. How many hours of **unpaid overtime**, on average, do you work per week?

[____] hours

16. In your current position, what is your annual salary before taxes and other deductions?
    (Please DO NOT include bonuses or overtime.)

    1 ◯ Less than $30,000
    2 ◯ $30,000 - $34,999
    3 ◯ $35,000 - $39,999
    4 ◯ $40,000 - $44,999
    5 ◯ $45,000 - $49,999
    6 ◯ $50,000 - $54,999
    7 ◯ $55,000 - $59,999
    8 ◯ $60,000 - $64,999
    9 ◯ $65,000 - $69,999
    10 ◯ $70,000 - $74,999
    11 ◯ $75,000 - $79,999
    12 ◯ $80,000 - $84,999
    13 ◯ $85,000 - $89,999
    14 ◯ $90,000 - $94,999
    15 ◯ $95,000 - $99,999
    16 ◯ $100,000 or more

17. In the last 12 months, what were your estimated earnings from **overtime** payments for your current position?

$ [_____]

18. In the last 12 months, what were your estimated total earnings from shift premiums, commissions or piecework payments?

$ [_____]

19. Which of the following financial incentives does your employer provide to you?
    (Mark ALL that apply)

    1 ◯ Bonuses
    2 ◯ Profit-sharing
    3 ◯ Stock options   ► **Go to Question 20**
    4 ◯ Other, **please specify** [_____]

    5 ◯ None   ► **Go to Question 21**

20. In the last 12 months, what were your estimated total earnings from any bonuses, profit sharing or stock options?

$ [_____]

21. Which of the following non-salary benefits does your employer fully or partially pay for and provide to you? *(Mark ALL that apply)*

1 ◯ Life or disability insurance

2 ◯ Medical or dental plan

3 ◯ Pension plan (not including CPP/QPP or group RRSPs)

4 ◯ Employment insurance supplements for maternity leave or layoffs

5 ◯ Other, **please specify** |_____|

6 ◯ None

22. Which of the following other benefits does your employer provide to you? *(Mark ALL that apply)*

1 ◯ Recreation facilities

2 ◯ Day care facilities

3 ◯ Club memberships

4 ◯ Flexible working hours

5 ◯ Working from home (teleworking)

6 ◯ Other, **please specify** |_____|

7 ◯ None

23. When you were originally hired by this company or organization, how did you find out about the position? *(Mark only ONE)*

1 ◯ Directly recruited by employer

2 ◯ Help wanted ad

3 ◯ Personal initiative

4 ◯ Word-of-mouth

5 ◯ Informal networking

6 ◯ University or college recruitment

7 ◯ Job fair

8 ◯ Internet recruiting agency

9 ◯ The company's (organization's) Web site

10 ◯ Government employment centres

11 ◯ Head-hunter or personnel agency

12 ◯ Other, **please specify** |_____|

24. Immediately before working at your current position, were you **mainly**: *(Mark only ONE)*

1 ◯ working as a paid employee?

2 ◯ self-employed? ▶ **Go to Question 27**

3 ◯ going to school?

4 ◯ unemployed?

5 ◯ other? **please specify** |_____| ▶ **Go to Question 25**

25. Did you work as a paid employee or were you self-employed at any time prior to obtaining your current position?

1 ◯ Yes ▶ **Go to Question 26**

2 ◯ No ▶ **Go to Question 38**

26. How much time was there between your LAST position and your CURRENT position?
Your LAST position is the job you held before your current position.

| | months OR | | years |

Your Last Two Positions

The next questions ask about your last two positions. Your LAST position is the job you held before your current position. Your SECOND LAST position is the job you held before your LAST position.

27. Which of the following occupations best describes each of your **last two positions?**
(Mark only ONE per column.)
If you perform more than one function, then the occupation for which you spent the MOST number of hours should be assigned.

	Your LAST position A	Your SECOND LAST position B
IT Training manager	1 ◯	1 ◯
Web manager	2 ◯	2 ◯
Computer and information systems manager	3 ◯	3 ◯
Information systems business analyst or consultant	4 ◯	4 ◯
Systems security analyst	5 ◯	5 ◯
Information systems quality assurance analyst	6 ◯	6 ◯
Systems auditor	7 ◯	7 ◯
Database administrator	8 ◯	8 ◯
Data administration analyst	9 ◯	9 ◯
Network systems and data communications specialist	10 ◯	10 ◯
Software engineer	11 ◯	11 ◯
Computer engineer, except software	12 ◯	12 ◯
Electrical and electronics engineer, except computer engineer	13 ◯	13 ◯
Computer programmer	14 ◯	14 ◯
Interactive media developer	15 ◯	15 ◯
Computer and network operator	16 ◯	16 ◯
Web technician	17 ◯	17 ◯
Technical support analyst	18 ◯	18 ◯
Systems testing technician	19 ◯	19 ◯
Technical writer	20 ◯	20 ◯
Graphic designer or illustrating artist	21 ◯	21 ◯
Other IT occupation, **please specify** ▶	22 ◯	22 ◯
Non-IT occupation, **please specify** ▶	23 ◯	23 ◯
Not applicable	97 ◯	97 ◯

28. What was the title of each of your last two positions?

A **Your LAST position** 1 ◯ Not applicable

B **Your SECOND LAST position** 1 ◯ Not applicable

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29. What were the **most important** duties or activities of each of these positions?

A **Your LAST position** [1] ◯ Not applicable

_____
_____
_____

B **Your SECOND LAST position** [1] ◯ Not applicable

_____
_____
_____

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30. Were each of these previous positions in Canada?

Your LAST position	**Your SECOND LAST position**
A	B
[1] ◯ Yes	[1] ◯ Yes
[2] ◯ No	[2] ◯ No
[7] ◯ Not applicable	[7] ◯ Not applicable

---

31. How long were you working in each of these positions?

Your LAST position		**Your SECOND LAST position**	
A		B	
[___] months OR [___] years		[___] months OR [___] years	
[1] ◯ Not applicable		[1] ◯ Not applicable	

---

32. What was the **main reason** for leaving each of your previous positions?
(Mark only ONE per column)

	Your LAST position	Your SECOND LAST position
	A	B
Better salary, incentives or benefits	[1] ◯	[1] ◯
Better opportunities for career development or growth	[2] ◯	[2] ◯
More challenging or interesting projects	[3] ◯	[3] ◯
The opportunity to use leading-edge technology	[4] ◯	[4] ◯
Quality of management	[5] ◯	[5] ◯
Change of ownership	[6] ◯	[6] ◯
Better working hours	[7] ◯	[7] ◯
Wanted to change occupation	[8] ◯	[8] ◯
Better working environment	[9] ◯	[9] ◯
Leaving self-employment	[10] ◯	[10] ◯
Downsizing	[11] ◯	[11] ◯
Lay-off	[12] ◯	[12] ◯
Other, **please specify** ▶	[13] ◯	[13] ◯
	_____	_____
	_____	_____
Not applicable	[97] ◯	[97] ◯

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33. Were you working at your SECOND LAST position **immediately before** your LAST position?

[1] ◯ Yes ▶ **Go to Question 35**

[2] ◯ No ▶ **Go to Question 34**

[7] ◯ Not applicable ▶ **Go to Question 35**

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34. How much time was there between your SECOND LAST position and your LAST position?

[___] months OR [___] years

Your First IT Occupation

35. Is your CURRENT position, your first IT position?

 1 ◯ Yes ▶ **Go to Question 38**

 2 ◯ No ▶ **Go to Question 36**

36. Was your first IT position:

 1 ◯ your LAST position?

 2 ◯ your SECOND LAST position? ▶ **Go to Question 38**

 3 ◯ prior to your SECOND LAST position? ▶ **Go to Question 37**

37. Which of the following occupations best describes your **first IT position?**
 (Mark only ONE)

 If you performed more than one function, then the occupation for which you spent the MOST number of hours should be assigned.

 1 ◯ IT Training manager

 2 ◯ Web manager

 3 ◯ Computer and information systems manager

 4 ◯ Information systems business analyst or consultant

 5 ◯ Systems security analyst

 6 ◯ Information systems quality assurance analyst

 7 ◯ Systems auditor

 8 ◯ Database administrator

 9 ◯ Data administration analyst

 10 ◯ Network systems and data communications specialist

 11 ◯ Software engineer

 12 ◯ Computer engineer, except software

 13 ◯ Electrical and electronics engineer, except computer engineer

 14 ◯ Computer programmer

 15 ◯ Interactive media developer

 16 ◯ Computer and network operator

 17 ◯ Web technician

 18 ◯ Technical support analyst

 19 ◯ Systems testing technician

 20 ◯ Technical writer

 21 ◯ Graphic designer or illustrating artist

 22 ◯ Other, **please specify**

38. Was your first IT position your first job after completing your education?

 1 ◯ Yes

 2 ◯ No

39. How did you get your first IT position? *(Mark ALL that apply)*

 1 ◯ You were a co-op student

 2 ◯ You were recruited out of college or university

 3 ◯ You applied for the position

 4 ◯ You were transferred from within the company or organization

 5 ◯ Other, **please specify**

SECTION B - Education

The following questions ask about your educational background.

40. Not including education from a private business school or other private training institute, what is the **highest level** of education that you have completed?
(Mark only ONE)

1 ◯ Below the high school or secondary school level

2 ◯ Some high school or secondary school education   ► **Go to Question 52**

3 ◯ A high school or secondary school diploma

4 ◯ Some community college or CEGEP education

5 ◯ A community college or CEGEP diploma or certificate   ► **Go to Question 46**

6 ◯ Some university education

7 ◯ A university certificate, diploma or degree   ► **Go to Question 41**

8 ◯ Other, **please specify** _____

University Education

41. Which of the following university certificates, diplomas or degrees have you received?
(Mark ALL that apply)

1 ◯ University certificate or diploma (below the Bachelor's level)

2 ◯ Bachelor's degree

3 ◯ Master's degree

4 ◯ Earned Doctorate (Ph.D., D.Sc.or D.Ed.) or Degree in medicine, dentistry, veterinary medicine or optometry (M.D., D.D.S., D.M.D., D.V.M., O.D.)

5 ◯ No certificate, diploma or degree

42. Were you enrolled in a university co-op program?

1 ◯ Yes

2 ◯ No

43. What was (were) your **main** field(s) of study for each of these university levels, **whether you graduated or not?**
(Mark ALL that apply)

	University Program Below the Bachelor's Level	Bachelor's Level	Master's Level	Doctorate Level
	A	B	C	D
Arts, Education, Humanities or Social Sciences	1 ○	1 ○	1 ○	1 ○
Business, Commerce, Management and Administrative Studies	2 ○	2 ○	2 ○ MBA 3 ○ Other	2 ○
Computer Science	4 ○	4 ○	4 ○	4 ○
Engineering	5 ○	5 ○	5 ○	5 ○
Computer Engineering	6 ○	6 ○	6 ○	6 ○
Systems Engineering	7 ○	7 ○	7 ○	7 ○
Electrical or Electronic Engineering	8 ○	8 ○	8 ○	8 ○
Other Engineering, **please specify** ▶ _____	9 ○	9 ○	9 ○	9 ○
Health and Natural Sciences	10 ○	10 ○	10 ○	10 ○
Mathematics and Pure and Applied Sciences (except Computer Science)	11 ○	11 ○	11 ○	11 ○
Other, **please specify** ▶ _____	12 ○	12 ○	12 ○	12 ○

44. How long ago did you receive this university education?

University Program Below the Bachelor's Level	Bachelor's Level	Master's Level	Doctorate Level
A	B	C	D
⊔ months OR ⊔ years	⊔ months OR ⊔ years	⊔ months OR ⊔ years	⊔ months OR ⊔ years

45. Where did you receive this university education?
(Mark ALL that apply)

	University Program Below the Bachelor's Level	Bachelor's Level	Master's Level	Doctorate Level
	A	B	C	D
In Canada	1 ○	1 ○	1 ○	1 ○
Outside Canada	2 ○	2 ○	2 ○	2 ○

Community College or CEGEP Education
(excluding private business schools and other private training institutes)

46. Have you received:

    1 ◯ a community college or CEGEP diploma or certificate?

    2 ◯ some community college or CEGEP education? ▶ **Go to Question 47**

    3 ◯ no community college or CEGEP education? ▶ **Go to Question 52**

47. How long was the college or CEGEP program that you were enrolled in?
(Mark only ONE)

    1 ◯ Less than 1 year

    2 ◯ 1 year

    3 ◯ 2 years

    4 ◯ 3 or more years

48. Were you enrolled in a co-op program during your community college or CEGEP education?

    1 ◯ Yes

    2 ◯ No

49. What was (were) your **main** field(s) of study at community college or CEGEP?
(Mark ALL that apply)

    1 ◯ Pure and Applied Sciences (except Computer Science and Engineering)

    2 ◯ Arts, Humanities and Social Sciences

    3 ◯ Business and Commerce

    4 ◯ Computer Science

    5 ◯ Engineering

        6 ◯ *Electrical or Electronic Engineering Technology*

        7 ◯ *Other Engineering Technology*

    8 ◯ Health and Natural Sciences

    9 ◯ Other fields of study, **please specify**

50. How long ago did you receive this community college or CEGEP education?

    ☐☐ months   OR   ☐☐ years

51. Where did you receive this community college or CEGEP education?
(Mark ALL that apply)

    1 ◯ In Canada

    2 ◯ Outside Canada

Private Business School and Other Private Training Institute Education

52. Have you earned a certificate or diploma from a private business school or other private training institute ? *(Please include industry certification programs.)*

    1 ◯ Yes ▶ **Go to Question 53**

    2 ◯ No ▶ **Go to Question 56**

53. How long ago did you receive this certificate or diploma from a private business school or other private training institute?
(If you have received more than one certificate or diploma, please consider the most recent.)

[   ] months   OR   [   ] years

54. Were you enrolled in a co-op program in this private business school or other private training institute?

1 ◯ Yes

2 ◯ No

55. Where did you receive this certificate or diploma?
(Mark ALL that apply)

1 ◯ In Canada

2 ◯ Outside Canada

Certifications and Professional Designations

56. Which of the following certifications do you have?
(Mark ALL that apply)

1 ◯ Certified Lotus Professional (CLP)

2 ◯ Certified Novell Administrator (CNA)

3 ◯ Certified Novell Engineer (CNE)

4 ◯ Cisco Certified Network Administrator (CCNA)

5 ◯ Microsoft Certified Systems Engineer (MCSE)

6 ◯ Microsoft Certified Professional (MCP)

7 ◯ Microsoft Certified Systems Developer (MCSD)

8 ◯ Other, **please specify** [   ]

9 ◯ None

57. Which of the following professional credentials or designations do you have?
(Mark ALL that apply)

1 ◯ Applied Science Technologist (AscT)

2 ◯ Certified Engineering Technician (CET)

3 ◯ Certified Engineering Technologist (CET)

4 ◯ Certified Technician (C Tech)

5 ◯ Engineer or Member in Training (EIT, MIT)

6 ◯ Information Systems Professional (ISP)

7 ◯ Professional Engineer (P.Eng., ing.)

8 ◯ Registered Engineering Technologist (RET)

9 ◯ Technologue professionnel (TP) (Quebec only)

10 ◯ Other, **please specify** [   ]

11 ◯ None

SECTION C - Training

The following are questions about the training that you have received in the last 12 months.

Formal Training

For the purpose of this survey, FORMAL TRAINING is intended to develop an employee's skills or knowledge through a structured format, whether it takes place inside or outside the company's (organization's) location. It EXCLUDES computer-based training and on-line courses.

58. In the last 12 months, did you receive any **formal** training related to your position while being employed?

   1 ◯ Yes ▶ **Go to Question 59**

   2 ◯ No ▶ **Go to Question 63**

59. In the past 12 months, how many days of **formal** training did you receive?

   ☐ days

60. Which of the following types of **formal** training did you receive within the last 12 months?
   (Mark ALL that apply)

   1 ◯ Management training

   2 ◯ Systems software training

   3 ◯ Applications software training

   4 ◯ Telecommunication or computer network training

   5 ◯ Computer language and/or programming training

   6 ◯ Computer hardware training

   7 ◯ Communication or interpersonal skills training

   8 ◯ Other training, **please specify** ☐

61. Where was this **formal** training given?
   (Mark ALL that apply)

   1 ◯ In Canada

   2 ◯ Outside Canada

62. Who paid for this **formal** training?
   (Mark ALL that apply)

   1 ◯ You

   2 ◯ Your employer

   3 ◯ Another organization

   4 ◯ Other, **please specify** ☐

Informal or On-The-Job-Training

For the purpose of this survey, INFORMAL or ON-THE-JOB training is acquired as part of doing the job and can provide the employee with information, skills and attitudes. Informal or on-the-job training does not use a structured format, rather it may involve attending conferences, mentoring, self-study, networking and computer-based or on-line training.

63. In the past 12 months, have you had any **informal** or **on-the-job** training?

   1 ◯ Yes ▶ **Go to Question 64**

   2 ◯ No ▶ **Go to Question 65**

64. What methods of **informal** or **on-the-job** training did you use in the last 12 months?
    (Mark ALL that apply)

    1 ◯ Networking with colleagues or mentoring

    2 ◯ Computer-based training or on-line courses

    3 ◯ Self-study

    4 ◯ Conferences, seminars or informal presentations

    5 ◯ Other, **please specify**

SECTION D - *Skills*

The following questions ask about the skills you need for your CURRENT POSITION and your current level of ability.

65. How did you acquire the IT skills that are needed for your **current position?**
    (Mark ALL that apply)

    1 ◯ Self learning (manuals, books, on-line tutorials, etc.)

    2 ◯ Employer-paid formal training

    3 ◯ Self-paid formal training

    4 ◯ On-the-job or informal training (co-workers, supervisors, resource people, friends)

    5 ◯ Private business school or training institute

    6 ◯ Community college or university

    7 ◯ Other, **please specify**

66. How important are each of the following IT skills for your **current position**?
    (Mark only ONE per row)

		Level of importance for your CURRENT POSITION			
		Very Important	Somewhat Important	Less Important	Not Required
Analytical skills	A	1 ◯	2 ◯	3 ◯	4 ◯
Design skills	B	1 ◯	2 ◯	3 ◯	4 ◯
Programming skills	C	1 ◯	2 ◯	3 ◯	4 ◯
Maintenance skills	D	1 ◯	2 ◯	3 ◯	4 ◯
Documentation (technical writing) skills	E	1 ◯	2 ◯	3 ◯	4 ◯
Quality assurance (validation, release) skills	F	1 ◯	2 ◯	3 ◯	4 ◯
System operation skills	G	1 ◯	2 ◯	3 ◯	4 ◯
System administration skills	H	1 ◯	2 ◯	3 ◯	4 ◯
Technical support skills	I	1 ◯	2 ◯	3 ◯	4 ◯
Sales and marketing skills	J	1 ◯	2 ◯	3 ◯	4 ◯
Testing skills	K	1 ◯	2 ◯	3 ◯	4 ◯
Training skills	L	1 ◯	2 ◯	3 ◯	4 ◯
Client support skills	M	1 ◯	2 ◯	3 ◯	4 ◯
Other IT skills, **please specify**	N	1 ◯	2 ◯	3 ◯	4 ◯

67. Please indicate your **current level of ability** for each of the following IT skills.
(Mark only ONE per row)

	Your current level of ability				
	Very Good	**Good**	**Fair**	**Poor**	**Not Applicable**
Analytical skills ^A	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Design skills ^B	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Programming skills ^C	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Maintenance skills ^D	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Documentation (technical writing) skills ^E	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Quality assurance (validation, release) skills ^F	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
System operation skills ^G	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
System administration skills ^H	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Technical support skills ^I	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Sales and marketing skills ^J	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Testing skills ^K	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Training skills ^L	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Client support skills ^M	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Other IT skills, **please specify** ^N	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯

68. For your **current position,** in which of the following areas do you work?
(Mark ALL that apply)

1 ◯ Database

2 ◯ Web, Internet, Intranet

3 ◯ Software

4 ◯ Hardware

5 ◯ Network (excluding Web)

6 ◯ Systems (excluding systems security)

7 ◯ Systems Security

8 ◯ E-commerce

9 ◯ Multimedia (interactive and animated)

10 ◯ Other, **please specify**

69. How important are each of the following business or management skills for your **current position?**
    (Mark only ONE per row)

		Level of importance for your CURRENT POSITION			
		Very Important	Somewhat Important	Less Important	Not Required
Financial management skills	A	1 ◯	2 ◯	3 ◯	4 ◯
People management skills	B	1 ◯	2 ◯	3 ◯	4 ◯
Time management skills	C	1 ◯	2 ◯	3 ◯	4 ◯
Planning skills	D	1 ◯	2 ◯	3 ◯	4 ◯
Project management skills	E	1 ◯	2 ◯	3 ◯	4 ◯
Client/vendor relations	F	1 ◯	2 ◯	3 ◯	4 ◯
E-business skills	G	1 ◯	2 ◯	3 ◯	4 ◯
Product release skills	H	1 ◯	2 ◯	3 ◯	4 ◯
Negotiation skills	I	1 ◯	2 ◯	3 ◯	4 ◯
Cost estimation skills	J	1 ◯	2 ◯	3 ◯	4 ◯

70. Please indicate your **current level of ability** for each of the following business or management skills.
    (Mark only ONE per row)

		Your current level of ability				
		Very Good	Good	Fair	Poor	Not Applicable
Financial management skills	A	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
People management skills	B	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Time management skills	C	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Planning skills	D	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Project management skills	E	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Client/vendor relations	F	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
E-business skills	G	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Product release skills	H	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Negotiation skills	I	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯
Cost estimation skills	J	1 ◯	2 ◯	3 ◯	4 ◯	7 ◯

71. How important are each of the following personal/interpersonal skills for your **current position?**
(Mark only ONE per row)

		Level of importance for your CURRENT POSITION			
		Very Important	**Somewhat Important**	**Less Important**	**Not Required**
Written communication skills	A	1 ○	2 ○	3 ○	4 ○
Oral communication skills	B	1 ○	2 ○	3 ○	4 ○
Team work skills	C	1 ○	2 ○	3 ○	4 ○
Leadership skills	D	1 ○	2 ○	3 ○	4 ○
Presentation skills	E	1 ○	2 ○	3 ○	4 ○

72. Please indicate your **current level of ability** for each of the following personal/interpersonal skills.
(Mark only ONE per row)

		Your current level of ability				
		Very Good	**Good**	**Fair**	**Poor**	**Not Applicable**
Written communication skills	A	1 ○	2 ○	3 ○	4 ○	7 ○
Oral communication skills	B	1 ○	2 ○	3 ○	4 ○	7 ○
Team work skills	C	1 ○	2 ○	3 ○	4 ○	7 ○
Leadership skills	D	1 ○	2 ○	3 ○	4 ○	7 ○
Presentation skills	E	1 ○	2 ○	3 ○	4 ○	7 ○

SECTION E - Demographic Information

The next few questions ask for basic demographic information.

73. What is your age?

1 ○ under 20 years

2 ○ 20 to 24 years

3 ○ 25 to 29 years

4 ○ 30 to 34 years

5 ○ 35 to 39 years

6 ○ 40 to 49 years

7 ○ 50 to 59 years

8 ○ 60 years and over

74. What is your gender?

1 ○ Male

2 ○ Female

75. Are you an Aboriginal person (that is, North American Indian/First Nations, Métis, Inuit)?

1 ○ Yes

2 ○ No

76. Are you a person with a disability?

"Persons with disabilities" includes people who have a long-term or recurring physical, mental, sensory, psychiatric or learning impairment and who consider themselves to be disadvantaged in employment by reason of that impairment, or believe that an employer or potential employer is likely to consider them to be disadvantaged in employment by reason of that impairment, and includes persons whose functional limitations owing to their impairment have been accommodated in their current job or workplace.

1 ◯ Yes

2 ◯ No

SECTION F - Data-Sharing Agreement

77. In order to reduce duplication in information gathering, Statistics Canada has entered into a data-sharing agreement under Section 12 of the Statistics Act with Human Resources Development Canada. All your information will be kept strictly confidential by Human Resources Development Canada and used only for statistical purposes.

Do you agree to share the information you have provided?

1 ◯ Yes

2 ◯ No

SECTION G - Respondent Information

Contact Person

This information will only be used if we need to clarify the information that you have provided.

Name of person completing this questionnaire:

First name   Last name

Telephone number: Extension:

E-mail:

COMMENTS

Thank you for your participation.