



Survey of Earned Doctorates July 1, 2003 to June 30, 2004

Confidential when completed.

Collected under the authority of the *Statistics Act*,
Revised Statutes of Canada, 1985, Chapter S19.

Version française disponible; 1-877-540-3973

Please print your name in full:

First Name	Middle Name	Last Name	Suffix (e.g., Jr.)

Cross reference: Birth name or former name legally changed

Name of Doctoral Institution	City	Date Degree Granted (mm/yyyy)
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To the respondent:

Statistics Canada is conducting the Survey of Earned Doctorates in partnership with all Canadian institutions.

The survey collects data about your post-secondary academic path, funding sources, field of study and your immediate post-graduate plans. The collected data is then combined and disseminated in aggregate form, in such a way that it cannot identify you. These disseminated data are of interest to your doctoral institution and to all other doctoral institutions, to organizations such as the Canadian Association for Graduate Studies (CAGS) and the Association of Universities and Colleges of Canada (AUCC), as well as to government bodies such as Natural Sciences and Engineering Research Council (NSERC), the Canadian Institutes of Health Research (CIHR), the Medical Research Council (MRC), the Social Sciences and Humanities Research Council (SSHRC), Industry Canada and Human Resources Development Canada (HRDC). This information will help them to better understand and respond to the financial and program needs of doctoral students.

While your participation is voluntary, your assistance is essential to ensure that the results are meaningful. Your answers will be kept strictly confidential and used for statistical purposes only.

When you have completed the questionnaire, please seal it within the return envelope provided and mail directly to Statistics Canada, or return it to your institution's office of graduate studies.

OFFICE USE ONLY

Case ID	Instit. Code:	Grad Date:
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INSTRUCTIONS

Thank you for taking the time to complete this questionnaire. Directions are provided for each question.

- If you have not already done so, please print your name on the front cover.
- When answering questions that require marking a box, please use an "X."

PART A – Education

A1. a. What is the title of your dissertation or thesis?

- Please mark (X) this box if the title below refers to a performance, project report, or a musical or literary composition required instead of a dissertation.

Title

b. Was your doctoral degree research-oriented?

- 1 Yes 2 No

A2. Please write the name of the primary field of your dissertation.

Name of Field

Using the list on page 8, choose the code that best describes the primary field of your dissertation.

Number of Field

If your dissertation was interdisciplinary, list the name and number of your secondary field.

Name of Field

Number of Field

If there were more than two fields, please continue on page 7.

A3. Please name the department(s) (or interdisciplinary committee, centre, institute, program, etc.) to which you were affiliated during your doctoral studies.

Department/Committee/Centre/Institute/Program

A4. If you received full or partial tuition remission (waiver) during the course of your doctoral studies, was it:

- 0 I did not receive any tuition remission
1 for less than 1/3 of tuition
2 between 1/3 and 2/3 of tuition
3 more than 2/3 of tuition but less than full
4 full tuition remission

A5. Which of the following were sources of financial support during graduate school?

Mark ALL that apply

FELLOWSHIP, SCHOLARSHIP

01. From NSERC
02. From SSHRC
03. From MRC/CIHR
04. From your institution
05. From a provincial source – Specify:
06. From another source – Specify:
07. From an unknown source

TEACHING ASSISTANTSHIP

08. Funded by NSERC
09. Funded by SSHRC
10. Funded by MRC/CIHR
11. Funded by your institution
12. Funded by a provincial source – Specify:
13. Funded by other source – Specify:

RESEARCH ASSISTANTSHIP (including stipends)

14. Funded by other unknown source
15. Funded by NSERC
16. Funded by SSHRC
17. Funded by MRC/CIHR
18. Funded by your institution
19. Funded by a provincial source – Specify:
20. Funded by other source – Specify:
21. Funded by other unknown source

OTHER SOURCES OF SUPPORT

22. Loans (from any source)
23. Foreign (non-Canadian) support
24. Personal savings
25. Personal earnings during graduate school (other than sources listed above)
26. Spouse's, partner's or family earnings or savings
27. Employer reimbursement/assistance
28. Other – Specify:

A6. Which TWO sources listed in A5 provided the most support?

Enter letters of primary and secondary sources

1. Primary source of support

2. Secondary source of support

- Mark (X) if no secondary source

A8. The next few questions ask about the degrees you have received. Starting with this doctorate degree, please provide the following information for the most recent master's degree and your first bachelor's degree.

	This doctorate degree	Most recent master's degree (e.g. MSc, MA, MBA) or equivalent	First bachelor's degree (e.g. BA, BSc) or equivalent
a. Have you received a degree of this type?.....	1 Yes <input checked="" type="checkbox"/> 2 No <input type="checkbox"/>	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>
b. Month/year that you started your degree	Month <input type="checkbox"/> <input type="checkbox"/> Year <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Month <input type="checkbox"/> <input type="checkbox"/> Year <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Month <input type="checkbox"/> <input type="checkbox"/> Year <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
c. Month/year of degree award	Month <input type="checkbox"/> <input type="checkbox"/> Year <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Month <input type="checkbox"/> <input type="checkbox"/> Year <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Month <input type="checkbox"/> <input type="checkbox"/> Year <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
d. Primary field of study	<input type="text"/>	<input type="text"/>	<input type="text"/>
e. Field number from list on page 8	<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. Institution name	<input type="text"/>	<input type="text"/>	<input type="text"/>
g. City	<input type="text"/>	<input type="text"/>	<input type="text"/>
h. Province or Territory (if Canada)	<input type="text"/>	<input type="text"/>	<input type="text"/>
i. State (if U.S.)	<input type="text"/>	<input type="text"/>	<input type="text"/>
j. Country	<input type="text" value="CANADA"/>	<input type="text"/>	<input type="text"/>

A9. Excluding those above, have you obtained any additional postsecondary degree(s), diploma(s) or certificate(s)? 1 Yes 2 No

A10. Was a master's degree a prerequisite for admission to your doctoral program? 1 Yes 2 No

A11. In what year did you first enter graduate school in any program or capacity, in any university? Year

A12. How many months or years were you taking courses or preparing for exams for this doctorate degree (including a master's degree, if that was a part of your doctoral program)?

Months OR Years ← Round to whole years

A13. After coursework and exams, how many months or years did you work on your dissertation or thesis (non-course related preparation or research, writing, and defense)?

Mark (x) box if no dissertation or thesis required

Months OR Years ← Round to whole years

A14. Are you earning, or have you earned, a professional medical or dental degree (e.g. MD, DDS), in addition to the doctorate? 1 Yes 2 No

If yes, please list the additional degree(s), diploma(s) or certificate(s), granting institution(s), and years.

Type of degree, diploma or certificate _____

Field of study _____

Year Granted _____

Institution _____

City _____

Province or Territory (if Canada) _____

State (if U.S.) _____

Country _____

Type of degree, diploma or certificate _____

Field of study _____

Year Granted _____

Institution _____

City _____

Province or Territory (if Canada) _____

State (if U.S.) _____

Country _____

If necessary, please continue this list on page. 7.

A15. a. When you receive your doctoral degree, how much money will you owe that is directly related to your undergraduate education?

Mark (X) one

- | | |
|--|--|
| 0 <input type="checkbox"/> None | 4 <input type="checkbox"/> \$30,001-\$40,000 |
| 1 <input type="checkbox"/> \$10,000 or less | 5 <input type="checkbox"/> \$40,001-\$50,000 |
| 2 <input type="checkbox"/> \$10,001-\$20,000 | 6 <input type="checkbox"/> \$50,001 or more |
| 3 <input type="checkbox"/> \$20,001-\$30,000 | |

b. When you receive your doctoral degree, how much money will you owe that is directly related to your graduate education?

Mark (X) one

- | | |
|--|--|
| 0 <input type="checkbox"/> None | 4 <input type="checkbox"/> \$30,001-\$40,000 |
| 1 <input type="checkbox"/> \$10,000 or less | 5 <input type="checkbox"/> \$40,001-\$50,000 |
| 2 <input type="checkbox"/> \$10,001-\$20,000 | 6 <input type="checkbox"/> \$50,001 or more |
| 3 <input type="checkbox"/> \$20,001-\$30,000 | |

PART B – Postgraduation Plans

B1a. In what country do you intend to live after graduation (within the next year)?

- 0 in Canada → Province or Territory → **SKIP TO B2**
- 1 in U.S. → State → **GO TO B1b**
- 2 other country → Specify

B1b. Do you plan on returning to Canada to live or work in the future

- 1 Yes 2 No 3 I don't know

B2. Do you intend to take a "postdoc" position?

(A "postdoc" is a temporary position primarily for gaining additional education and training in research, usually awarded in academe, industry, or government.)

- 1 Yes 2 No

B3. What is the status of your postgraduate plans (in the next year)?

Mark (X) one

- 0 Am returning to, or continuing in, same employment/position as prior to PhD completion → **GO TO B4**
- 1 Have signed contract or made definite commitment for other work or study → **GO TO B4**
- 2 Am negotiating with one or more specific organizations
- 3 Am seeking position but have no specific prospects → **SKIP TO B14**
- 4 Do not plan to work or study
- 5 Other – Specify

B4. What best describes your (within the next year) postgraduate plans? (If more than one activity, answer for the one at which you will spend the most hours).

Mark (X) one

Further Training or Study

- 0 Postdoctoral fellowship
- 1 Postdoctoral research associateship
- 2 Traineeship
- 3 Intern, clinical residency
- 4 Other study – Specify → **SKIP TO B10**

or Employment or Other

- 5 Employment (other than 0, 1, 2, 3, 4)
- 6 Other – Specify → **GO TO B5**

Note:

Questions B5 to B9: If more than one job, answer for the one at which you will spend **the most hours**.

B5. What kind of business, industry or service is this?

Please be specific. For example:

municipal government, secondary school, private research laboratory, etc.

B6. What will be your work or occupation?

Please be specific. For example:

urban planner, secondary school teacher, manager of biological research department, etc..

B7. In this work, what will be your main activities?

Please be specific. For example:

teaching geography, managing a research lab, etc.

B8. How many hours a week will you usually work at this job?

hours per week (round to the nearest hour)

B9. What will be your annual wage or salary?

- 1 Under \$25,000
- 2 \$25,000 - \$34,999
- 3 \$35,000 - \$44,999
- 4 \$45,000 - \$54,999 → **SKIP TO B11**
- 5 \$55,000 - \$64,999
- 6 \$65,000 - \$74,999
- 7 \$75,000 and over

B10. What will be the main source of financial support for your postdoctoral study/research within the next year?

Mark (X) one

- 0 Funding agencies – Specify _____
- 1 Industry/Business
- 2 College or university
- 3 Private foundation
- 4 Nonprofit, other than private foundation
- 5 Other – Specify _____
- 6 Unknown

B11. For what type of employer will you be working or in training within the next year?

Mark (X) one

EDUCATION

- a. Canadian university other than medical school
- b. Canadian medical school (including university affiliated hospital or medical centre)
- c. Canadian community college, CEGEP or technical institute
- d. Canadian pre-school, elementary, or secondary school
- e. U.S. educational institution
- f. Educational institution in other country
- g. Canadian university-affiliated research institute

or GOVERNMENT

- h. Canadian federal government
- i. Canadian provincial government
- j. Canadian municipal government
- k. U. S. government
- l. Government of other country

or PRIVATE SECTOR

- m. Not for profit organization
- n. Industry or business (for profit)

or OTHER

- o. Self employed
- p. Other – Specify _____

B12. Please name the organization and geographic location where you will work or study.

Name

Province or Territory (if Canada)

OR State (if U.S.)

Country

B13. What will be your primary and secondary work activities?

Mark (X) one in each column

	a. Primary	b. Secondary
Research and development	1 <input type="checkbox"/>	1 <input type="checkbox"/>
Teaching	2 <input type="checkbox"/>	2 <input type="checkbox"/>
Management or administration	3 <input type="checkbox"/>	3 <input type="checkbox"/>
Professional services	4 <input type="checkbox"/>	4 <input type="checkbox"/>
Other – Specify _____	5 <input type="checkbox"/>	5 <input type="checkbox"/>

Mark (X) if no secondary work activities.

B14. In the last year, have you been directly approached or contacted by employers/head hunters for recruitment purposes in connection with your field of study?

- 1 Yes
- 2 No

PART C – Background Information

C1. Are you ...

- 1 Male
- 2 Female

C2. What is your marital status?

Mark (X) one

- 1 Never legally married (single)
- 2 Legally married (and not separated)
- 3 Separated, but still legally married
- 4 Divorced
- 5 Widowed

C3. Are you living with a common-law partner?

Common law refers to two people of the opposite sex or the same sex who live together as a couple but who are not legally married to each other.

- 1 Yes
- 2 No

C4. Not including yourself or your spouse/partner, how many dependents do you have – that is, how many others receive at least one half of their financial support from you?

Mark (X) box if none.

	Number
5 years of age or younger	<input type="text"/>
6 to 18 years	<input type="text"/>
19 years or older	<input type="text"/>

C5. What is the highest educational attainment of your mother and father (or guardians)?

Mark (X) one for each parent.

	a. Mother	b. Father
Less than high-school (or secondary school)	1 <input type="checkbox"/>	1 <input type="checkbox"/>
High school (or secondary school) graduate	2 <input type="checkbox"/>	2 <input type="checkbox"/>
Some post-secondary education	3 <input type="checkbox"/>	3 <input type="checkbox"/>
Trade/Vocational diploma or certificate	4 <input type="checkbox"/>	4 <input type="checkbox"/>
College diploma or certificate (including CEGEP, Nursing school, etc.)	5 <input type="checkbox"/>	5 <input type="checkbox"/>
Bachelor's degree	6 <input type="checkbox"/>	6 <input type="checkbox"/>
Professional degree (i.e. M.D., L.L.B., D.D.S.)	7 <input type="checkbox"/>	7 <input type="checkbox"/>
Master's Degree	8 <input type="checkbox"/>	8 <input type="checkbox"/>
Doctoral Degree	9 <input type="checkbox"/>	9 <input type="checkbox"/>
Not applicable	10 <input type="checkbox"/>	10 <input type="checkbox"/>

C6. What is your place of birth?

- 1 Born in Canada Specify Province or Territory
- 2 Born outside Canada Specify Country

C7. What is your date of birth?

Year Month Day

C8. Of what country are you a citizen?

Indicate more than one citizenship, if applicable

"Canada, by naturalization" refers to the process by which an immigrant is granted citizenship of Canada, under the Citizenship Act.

- 1 Canada, by birth
- 2 Canada, by naturalization
- 3 Other country, Specify

C9. Are you now, or have you ever been, a landed immigrant?

A **"landed immigrant"** is a person who has been granted the right to live in Canada permanently by immigration authorities.

- 1 Yes
- 2 No (skip to C11)

C10. In what year did you first become a landed immigrant?

Year If exact year is not known, enter best estimate.

C11. When you first registered in your doctoral program, were you a visa or foreign student in Canada?

- 1 Yes
- 2 No

C12. What language do you speak most often at home?

- 1 English
- 2 French
- 3 Other – Specify

C13. In what province, territory, state or country was the high school/secondary school that you last attended?

Province or Territory (if Canada)

OR State (if U.S.)

Country

C14. Do you have any difficulty hearing, seeing, communicating, walking, climbing stairs, bending or doing any similar activities?

- 1 Yes, sometimes
- 2 Yes, often
- 3 No

C15. Does a physical condition or health problem reduce the kind or amount of activity you can do:

- ...at home?
- 1 Yes, sometimes
 - 2 Yes, often
 - 3 No
- ...at work or at school?
- 1 Yes, sometimes
 - 2 Yes, often
 - 3 No
- ...in other activities such as transportation or leisure?
- 1 Yes, sometimes
 - 2 Yes, often
 - 3 No

C16. Ethno-cultural information is collected to support programs that promote equal opportunity for everyone. Are you ...

Mark ALL that apply

- 1 White
- 2 North American Indian
- 3 Métis
- 4 Inuit
- 5 Chinese
- 6 South Asian (e.g., East Indian, Pakistani, Sri Lankan etc.)
- 7 Black
- 8 Filipino
- 9 Latin American
- 10 Southeast Asian (e.g., Cambodian, Indonesian, Laotian, Vietnamese etc.)
- 11 Arab (e.g., Saudi, Egyptian etc.)
- 12 West Asian (Afghan, Iranian etc.)
- 13 Japanese
- 14 Korean
- 15 Other – Specify

C17. To which ethnic or cultural group(s) did your ancestors belong?

For example, Canadian, French, English, Chinese, Italian, German, Scottish, Irish, Cree, Micmac, Métis, Inuit, East Indian, Ukrainian, Dutch, Polish, Portuguese, Filipino, Jewish, Greek, Jamaican, Vietnamese, Lebanese etc.

Specify as many groups as applicable.

C18. In case we need to clarify some of the information you have provided, please list an e-mail address, and telephone numbers where you could be reached.

E-mail address

Daytime telephone

Evening telephone

C19. In case there are difficulties reaching you, we would like the name of a friend or relative we could call. This would only be used to help us make contact with you.

Contact Person

Name

Number Street

City Province, Territory or State Postal or Zip Code

Phone Number

E-mail Address

C20. Statistics Canada is conducting the Survey of Earned Doctorates in cooperation with all doctoral-granting institutions in Canada. By signing below, you authorise Statistics Canada to release all information provided in this questionnaire, with your personal identifiers, to your doctoral institution. The institution may combine your responses with other data they have about you. The institutions have undertaken to keep this information confidential and to use it only for research and statistical purposes. The release of any information by the institutions will only be in aggregate form.

Signature

Date (dd/mm/yyyy)

Thank-you for having taken the time to complete the Survey of Earned Doctorates.

Please use the space below to make any additional comments you may have about this survey.

Additions to questions

A2 (continued)

Name of field

Number of field

Name of field

Number of field

A9 (continued)

Type of degree, diploma

or certificate _____

Field of study _____

Year Granted _____

Institution _____

City _____

Province or Territory (if Canada) _____

State (if U.S.) _____

Country _____

Type of degree, diploma

or certificate _____

Field of study _____

Year Granted _____

Institution _____

City _____

Province or Territory (if Canada) _____

State (if U.S.) _____

Country _____

Comments about the survey

For information only

Please use the envelope provided to mail your completed questionnaire to Statistics Canada or to return it to your institution's office of graduate studies.

If you have questions or concerns about the survey, you may contact us by phone at 1-877-540-3973.

