



HLC Accreditation Evidence

Title: Accreditation: Student Survey Results

URL:

Office of Origin: Vice President of Instruction

Contacts:

- Coordinator of Workforce Training Projects and Events

Barton Community College 2022 Student Survey Results

Results from the Student Survey indicate students are satisfied with the training they received from the College. Most students felt they received excellent or very good technical training while at Barton. Students who responded were graduates of the Medical Administrative Technology, Dietary Manager, Advanced EMT (AEMT), Occupational Safety & Health, Medical Laboratory Technology, EMS Instructor/Coordinator, and Registered Nurse programs.

Return Statistics: 701 student surveys sent out -- 53 returned -- return rate 8%
What is your overall rating of the technical training you received from Barton?
Excellent (29 out of 53 = 55%)
Very Good (20 out of 53 = 38%)
Satisfactory 4 out of 53 = 7%)
Poor (0 out of 53)
Very Poor (0 out of 53)
Blank (0 out of 53)
Would you recommend BCCC to a colleague or friend?
Yes (51 out of 53 = 96%)
No (2 out of 53 = 4%)



Student Survey Follow-Up 2021

Please return this survey by December 10th

Name: _____ Major: _____

Address: _____ City: _____ State: ____ Zip: _____

Phone (____) _____ email address: _____

1. What is your overall rating of the technical training you received from Barton?
 Excellent Very Good Satisfactory Poor Very Poor
2. Would you recommend BCCC to a colleague or friend? Yes No
3. Did you sit for a certification/licensing exam associated with your program
a. If Yes, Name of Exam: _____
b. Did you pass the exam? Yes No
4. What is your overall rating of the student services you received while at Barton?
(Example: Counseling, Library, Testing Center, School Nurse, Advisement, etc)
Excellent Very Good Satisfactory Poor Very Poor

Are You: ____ in Military service, full-time	Are You: ____ Employed, but in unrelated field
Are You: ____ Employed, related to field of study	Are You: ____ Continuing your education
Are You: ____ Not in labor force or pursuing education	Are You: ____ Unemployed
Are You: ____ Furthering your Education, employed in field	Are You: ____ Disabled

Required Employment Data (If employed, please complete each item):

Company Name: _____ Department: _____
Supervisor: _____ Supervisor Email: _____
Company Address: _____ City: _____ State: ____ Zip: _____
Company Phone: (____) _____

Additional Comments:

THANK YOU FOR COMPLETING THIS SURVEY.