1. Approximately how many times have you EVER visited the Student Health Center?
   
   □ 1-2 times  □ 3-4 times  □ 5-6 times  □ 7-8 times  □ 9 times or more

   1  2  3  4  5

2. For your most recent visit, how satisfied were you with the ease of getting the appointment?
   
   □ Not at all satisfied  □ Somewhat satisfied  □ Satisfied  □ Very satisfied  □ Extremely satisfied

   1  2  3  4  5

3. How would you rate the care and service provided by the following during your most recent visit? (For each category A-I, please put an “X” in the appropriate box. Mark only ONE box per category.)

<table>
<thead>
<tr>
<th></th>
<th>Poor 1</th>
<th>Fair 2</th>
<th>Good 3</th>
<th>Very Good 4</th>
<th>Excellent 5</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Receptionist</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Nursing Staff</td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Physician/Nurse Practitioner</td>
<td></td>
<td></td>
<td></td>
<td>4.22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Laboratory</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>E. X-Ray Department</td>
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<td></td>
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<tr>
<td>F. Pharmacy</td>
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<tr>
<td>G. Health Educator</td>
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<td></td>
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<tr>
<td>H. Physical Therapist</td>
<td></td>
<td></td>
<td></td>
<td>4.56</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I. Nutritionist</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

4. How satisfied were you with your overall waiting time for services after you arrived for your most recent visit?
   
   □ Not at all satisfied  □ Somewhat satisfied  □ Satisfied  □ Very satisfied  □ Extremely satisfied

   1  2  3  4  5

5. During your most recent visit with a health care provider (e.g. physician, nurse practitioner, physical therapist, nutritionist, etc.), please rate the following

<table>
<thead>
<tr>
<th></th>
<th>Poor 1</th>
<th>Fair 2</th>
<th>Good 3</th>
<th>Very Good 4</th>
<th>Excellent 5</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Their explanation of your condition</td>
<td></td>
<td></td>
<td></td>
<td>4.30</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Their concern for your condition</td>
<td></td>
<td></td>
<td></td>
<td>4.29</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Your understanding of the medical advice</td>
<td></td>
<td></td>
<td></td>
<td>4.40</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

6. Overall, how satisfied were you with your most recent visit to the Student Health Center?
   
   □ Not at all satisfied  □ Somewhat satisfied  □ Satisfied  □ Very satisfied  □ Extremely satisfied

   1  2  3  4  5

7. How important is it for you to have health services available for you on the campus?
   
   □ Extremely unimportant  □ Somewhat important  □ Important  □ Very important  □ Extremely important

   1  2  3  4  5

Please See Other Side
8. What can the Student Health Center do to improve the services you receive?

9. Do you live on or off campus?  
   - On-Campus: 58 (23%)
   - Off-Campus: 181 (74%)
   - No Answer: 7 (3%)

10. Do you have any outside medical insurance?  
    - Yes: 138 (56%)
    - No: 99 (40%)
    - No Answer: 9 (4%)
    
    a. If yes, is your health insurance purchased through your parents', your employer, SJSU/Associated Students, directly by you, or _________________________?
    
    - Parents: 91 (37%)
    - SJSU: 13 (5%)
    - Self: 19 (8%)
    - Employer: 4 (2%)
    - Other: 5 (2%)
    - Other (includes Spouse, Uncle, Government, County/State, & CSU Healthlink): 114 (46%)

    b. If yes, what is your best guess as to the name of your insurance?

11. Additional Comments:

   The following questions are for demographic purposes.

12. How old are you? _________ Average Age: 23

   - Female: 154 (63%)
   - Male: 78 (32%)
   - No Answer: 14 (5%)

13. How do you describe your ethnicity? (Check all that apply)
   
   - Black, having origins in any black racial groups of Africa. (14)
   - Asian, having origins in Japan, China, Korea, Vietnam, Asian India. (73)
   - Hispanic, having origins in Puerto Rico, Cuba, Central or South America or Other Spanish culture except Mexican, regardless of race. (17)
   - Mexican American, having origins in Mexico. (27)
   - Native American, having origins in or cultural identification through tribal affiliation or community recognition of the original peoples. (6)
   - Pacific Islander, having origins in the Pacific Islands, such as Hawaii, Samoa, Guam (Chamorro). (4)
   - Filipino, having origins in the Philippines. (19)
   - Other Non-White, having origins in areas not covered elsewhere. (5)
   - White, having origins in any of the original peoples of Europe, North Africa, the Indian Subcontinent, or the Middle East. (101)

14. What is your academic year?
   
   - Freshman (1)
   - Sophomore (2)
   - Junior (3)
   - Senior (4)
   - Graduate (5)
   - Other (6)

15. What is your college major?