

# CalWORKs Student Services Technology Needs Assessment

Name: \_\_\_\_\_

Date: \_\_\_\_\_

The CalWORKs Student Services Program wants to help you get your technology needs met. Please take this short survey so that we can better understand your needs and how to help you be more successful in school.

## COMPUTER

1. Do you own a computer? Please Specify:

- DESKTOP COMPUTER
- LAPTOP COMPUTER
- I do not own a computer

2. Do you own a tablet? Please Specify:

- IPAD
- KINDLE
- NOOK
- SAMSUNG
- OTHER: \_\_\_\_\_
- I do not own a tablet.

## PRINTER

3. Do you own a printer?  YES  NO

4. If you do not own a printer, do you need a printer?

- YES  NO  MAYBE: Please explain: \_\_\_\_\_
- \_\_\_\_\_

5. Can you afford ink for a printer?  YES  NO

## INTERNET

6. Do you have internet access at home?  YES  NO

7. If you answered yes to the question above, what internet provider do you use?

- COX
- AT&T
- SPECTRUM
- VIASAT
- OTHER: \_\_\_\_\_

8. Can you afford your internet plan?  YES  NO

**CELL PHONE**

9. Do you have a cell phone?  YES  NO

10. If you answered "YES" to the question above, what provider?

- |   |                                       |
|---|---------------------------------------|
| <input type="checkbox"/> Assurance Wireless                           | <input type="checkbox"/> Sprint       |
| <input type="checkbox"/> California Lifeline Program ("Obama Phones") | <input type="checkbox"/> T-Mobile     |
| <input type="checkbox"/> AT&T   | <input type="checkbox"/> TracFone     |
| <input type="checkbox"/> Cricket                                      | <input type="checkbox"/> Verizon      |
|   | <input type="checkbox"/> Other: _____ |

11. Can you afford your cell phone plan?

- YES  NO  I don't have a cell phone.

**TRANSPORTATION**

12. How do you get to school? Please check all that apply:

- |  |   |
|--|---|
| <input type="checkbox"/> I drive my own car            | <input type="checkbox"/> I rely on friends/family for rides |
| <input type="checkbox"/> I drive a borrowed/shared car | <input type="checkbox"/> I use Uber/Lyft                    |
| <input type="checkbox"/> I don't have a car            | <input type="checkbox"/> I don't like to drive              |
| <input type="checkbox"/> I plan to get a car soon      | <input type="checkbox"/> I don't like to use Uber/Lyft      |
| <input type="checkbox"/> I take the bus/trolley        | <input type="checkbox"/> Other (Please Specify): _____      |

13. Do you rely on others for transportation?

- YES  NO  Sometimes

14. If you do rely on others for transportation, what do you do when that person is not able to take you to school? Please explain:

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15. Do you know how to use public transportation (bus/trolley)?

- YES  NO  I would like to learn how to use public transportation.

**Other needs?**

16. Is there anything else that the CalWORKs Student Services Program can do to help you be successful in school? Please explain:

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