

## ANNEXE B

### FRENCH IMMERSION GRADUATE FOLLOW-UP SURVEY

Manitoba Education and Training is conducting a study on the quality of the French Immersion program offered in Manitoba. Your participation in this survey will provide valuable information to help facilitate the improvement and enhancement of Manitoba's French Immersion program. All information will be treated as confidential, with no results reported at an individual level.

1. In general, how would you evaluate your French language skills now, as compared to when you completed high school? (Check **one** answer only.)

Greatly improved	Somewhat improved	Stayed the same	Somewhat decreased	Greatly decreased
<input type="checkbox"/>				

2. After you completed high school, how important was maintaining your French language skills? (Check **one** answer for each category.)

	Very important	Somewhat important	Uncertain	Somewhat unimportant	Not at all important
In your opinion	<input type="checkbox"/>				
In your parents' or guardians' opinions	<input type="checkbox"/>				
In your friends' opinions	<input type="checkbox"/>				

3. Please list what efforts, if any, you have taken to maintain or improve your French since leaving high school.

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4. Please indicate the level to which you agree or disagree with each of the following statements about your high school French Immersion program. (Check **one** answer for each category.)

	Strongly agree	Somewhat agree	Uncertain	Somewhat disagree	Strongly disagree
Increased your appreciation of French culture	<input type="checkbox"/>				
Increased your appreciation of other cultures	<input type="checkbox"/>				
Increased your appreciation of the francophone presence in the Canadian identity	<input type="checkbox"/>				
Increased your interest to learn languages	<input type="checkbox"/>				
Enabled you to pursue advanced study in the French language	<input type="checkbox"/>				
Improved your job opportunities	<input type="checkbox"/>				
Improved your writing skills	<input type="checkbox"/>				
Improved your chances of entrance to post-secondary institutions	<input type="checkbox"/>				
Improved your chances of being awarded scholarships	<input type="checkbox"/>				
Enabled you to communicate with French speaking people	<input type="checkbox"/>				

5. In your opinion, what were the most positive aspects of being in the French Immersion program in high school?

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6. If you were to go to high school again, what improvements would you recommend to the French Immersion program ?

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7. Thinking back to your experiences in high school, indicate the extent to which you agree or disagree with each of the following statements. (Check **one** answer for each statement.)

	Strongly agree	Somewhat agree	Uncertain	Somewhat disagree	Strongly disagree
I was pleased with the French course options available to me in high school.	<input type="checkbox"/>				
Speaking French in class discussions was an important part of my Immersion education.	<input type="checkbox"/>				
My Immersion teachers helped me to improve my French language skills.	<input type="checkbox"/>				
My school provided me with adequate resource materials in the French language.	<input type="checkbox"/>				
My high school provided academic support services in French (e.g. resource teachers, counsellors).	<input type="checkbox"/>				

8. a) Did you experience transition difficulties in high school when you went from taking courses in the French language to taking them in English?  
 No (please go onto Q 9)      Yes (please complete parts b and c)      Does not apply (please go on to Q 9)

b) Please describe the nature of your difficulties.

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c) Please specify the duration of your difficulties in number of weeks or months.

\_\_\_\_\_ week(s) or \_\_\_\_\_ month(s)

9. a) Please indicate your current ability to complete the following activities **using the French language**. (Check **one** answer for each task),

b) Circle whether or not you have actually performed these tasks **in the French language over the last four months**. ↓

In the French Language	PART A				PART B	
	Do without any difficulty	Do with some difficulty	Do with considerable difficulty	Unable to do	Completed in French in last 4 months	
Read a newspaper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Write a letter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Write a report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Talk with friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Engage in a group discussion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Talk with francophones from Canada	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Talk with francophones from outside Canada	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Participate in an interview	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Listen to a news broadcast	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Listen to the radio	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Watch a movie	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No

10. a) Please specify which computer technology tools you have access to and identify in which language you use them. (Check **one** answer for each task).

b) Circle whether or not you have actually used these tools **in the French language over the last four months**. ↓

	PART A				PART B	
	In English	In French	In both	No access	Used in French in last 4 months	
Internet e-mail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Internet Web search	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Internet chat groups	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Word processing software (e.g. Word)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Spread sheet software (e.g. Lotus)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Data base software (e.g. Access)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No
Presentation software (e.g. PowerPoint)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Yes	No

11. Please indicate what it has meant for you personally to have been in the French Immersion program.

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**POST-SECONDARY EDUCATION AND/OR TRAINING:**

If you have pursued or are currently pursuing a post-secondary education or training program, please answer the following questions. If you have never enrolled in a post-secondary program or training program, please go to **Question 19**.

12. Did you begin a post-secondary education or training program the same year you graduated from high school?

- Yes       No

13. Are you currently attending a post-secondary or training institution?

- Yes, full-time     Yes, part-time       No

14. Please specify your most recent post-secondary or training institution.

Institution Name	City	Country
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15. Please specify your most recent program(s) of study. \_\_\_\_\_

16. With regards to your career aspirations, what would you like to be doing five years from now?

\_\_\_\_\_

\_\_\_\_\_

17. Have you taken any post-secondary courses or training in the French language?

- Yes > a) How adequate were the French language skills you obtained from high school to handle the post-secondary courses in French? (Check **one** answer.)
- more than adequate  
 adequate  
 less than adequate

b) Please specify courses you have taken so far in your post-secondary education or training within each of the following categories. (Check **all** that apply.)

- \_\_\_\_\_ French language courses (as a subject of study)
- \_\_\_\_\_ Other courses taught in French
- \_\_\_\_\_ Courses taught in English
- \_\_\_\_\_ Courses taught in a language other than French or English. **If so,** which language(s)? \_\_\_\_\_

- No > Please provide your main reasons for not continuing your education in the French language.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

18. a) Did you experience difficulties in making the transition from taking courses in the French language in high school to taking them in English in your post-secondary education or training program?

- No (please go onto Q19)       Yes (please complete parts b, c and d)

b) For each of the following subject areas, what level of difficulty did you experience? (For each course, check **one** level.)

	No difficulty	Minor difficulty	Major difficulty	Not applicable
Mathematics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Science (eg, Physics, Chemistry, Biology)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Language Arts (eg, Literature)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Technology (eg, Computer Science)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify): _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

c) Please describe the nature of your difficulties.

\_\_\_\_\_

\_\_\_\_\_

d) Please specify the duration of your difficulties in number of weeks or months.

\_\_\_\_\_ week(s) **or** \_\_\_\_\_ month(s)

**EMPLOYMENT:**

If you are currently employed, please answer the following questions. If you are not currently employed, please go to **Question 22**.

19. Describe your employment status. (Check only **one** answer.)

- Full-time (35-40 hours)    Part-time (1-20 hours)    Two part-time jobs    Other, specify \_\_\_\_\_

20. Which statement best describes the role that your knowledge of the French language played in your ability to obtain your current position(s)? (Check only **one** answer.)

- French was not required.  
 French was not required, but considered an asset.  
 Knowledge of French was a specific requirement.

21. How often do you use French in your work? (Check only **one** answer.)

- Daily    Weekly    Monthly    Rarely    Never

**GENERAL COMMENTS:**

22. With regards to your future use of the French language, which of the following statements best describes your intentions? (Check **one** answer.)

- It is **important** for me to keep on using French.  
 It is **somewhat important** for me to keep on using French.  
 **Neutral**  
 It is **somewhat unimportant** for me to keep on using French.  
 It is **not important** for me to keep on using French.

23. Considering your overall experience within the French Immersion high school program, how would you rate your degree of satisfaction? (Check **one** answer.)

- | Very satisfied           | Somewhat satisfied       | Neutral                  | Somewhat unsatisfied     | Very unsatisfied         |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> |

24. Please make any other comment about your French Immersion education that you feel is relevant in the space provided.

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**Thank you for taking the time to complete this survey. If you are interested in receiving the results of this study, please provide the following information.**

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

Current Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**Please return in self-addressed stamped envelope. Thank you!**