

Taking Off

Questionnaire

The purpose of this questionnaire is to help you focus as you explore the idea of taking off. Most people have never seriously asked themselves what they would do if they had time off so the answers may not be as easy as you think. Part of our service if you choose to move forward with Taking Off is to help you define the parameters below that will determine where, when, and how you spend your time. Use the multiple-choice and short (very short!) essay questions as your guide. Think about experiences that you have enjoyed in the past, as well as things you would like to do in the future. Please add anything you feel is pertinent on the back of this form or another piece of paper. **Remember, there are no right or wrong answers; this is not a test.**

Name _____ Home phone _____
Home address _____ Current phone _____
_____ Fax _____
Current address _____
Current school and grade _____ E-mail _____
Parent's names _____
Parent's address/phone if different from above _____
Mother's occupation _____ Work number _____
Father's occupation _____ Work number _____
Siblings names/ages _____
Your age _____ Date of birth _____

How did you hear about Taking Off?

Do you have a sense of your budget for whatever time you will be taking off?

Where do you want to go?

If you have specific locations in mind, please write them down: _____

Africa	Alaska	Amazon	Antarctica	Asia	Australia
Bali/Fiji	Belize	Brazil	Canada	Caribbean	Central America
China	Costa Rica	Cuba	Eastern Europe	Ecuador	England
Europe	France	French speaking	Germany	Greece	Hawaii
India	Ireland	Israel	Italy	Latin American	Mediterranean
Mexico	Mideast	Midwest	Nepal	New Zealand	Northeast
Northwest	Ocean	Peru	Philippines	Scotland	South America
Southeast	Southwest	Spain	Spanish speaking	Thailand	Pacific
USA	Vietnam	Wales	Worldwide		

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What type of lifestyle would you prefer?

Use categories below to describe the lifestyle that best suits your needs. Add other categories or descriptive words that are important to you: _____

academic	rural	wilderness	need a hot shower	nonacademic	cultural immersion
ocean	roughing it	live in one place	outdoors	office	home stay
travel	indoors	physical labor	dormitory	learn a language	adventure
college credit	urban	on your own	with Americans	part of a group	people your age

Please rate the following factors in terms of their importance to you. (1 = most important; 10 = least important)

Where you go _____ What you do _____ Whether you are with people your age _____

What do you want to do? Circling an interest does not have to indicate ability.

Animals	Anthropology	Archaeology	Architecture	Art History	Big Game
Boat Building	Botany	Buddhism	Business	Ceramics	Chemistry
Children	Computers	Construction	Cooking	Creative Writing	Dance
Dolphins	Drawing	Engineering	Environment	Farming	Film
Finance	Fresco Painting	Gardening	Government	Guitar making	Health Care
Hiking	Historical Restoration	History	Horses	Hotels	Jewelry
Journalism	Languages	Law	Marine Biology	Martial Arts	Media
Museums	Music	Painting	Photography	Politics	Publishing
Rain forest	Sailing	Science	Scuba Diving	Sculpture	Social Justice
Social Service	Special Needs	Spiritual	Sports	Teaching	Theater
Tourism	Vet. Medicine	Whales	Wildlife	Women's Issues	Yoga

Add any interests not listed above: _____

Are you just starting to explore the possibilities and do you need help in doing so or do you have a clear sense of how and where you want to spend your time? Need help/Clear sense

How do you hope to spend your time off? Please use as much space as you need to describe your vision. If you don't have one yet then we are here to help.

How many different experiences do you hope to have? _____

When do you want to leave and for how long? _____

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Have you done much traveling? Please explain. _____

Do you have a dual citizenship and if so, with what country? _____

What languages have you studied and for how long? _____

Are you interested in learning a language and if so which one?

Where did you go to high school? _____

Are you currently in school and if so, where and in what grade or year at university? _____

Do you plan to return to school and if so, where and when? _____

What are your strengths? _____

What gets in your way? _____

Who referred you to *TAKING OFF*? _____

Do you have a budget? _____

If you have anything else that you think we need to know then please use the remaining space.

Please mail or fax your questionnaire to the address below

Once we receive your questionnaire Taking Off will be in touch.

Taking Off

**A service for students who are taking time off from the traditional classroom
to pursue experiential learning.**

**A process designed to help students clarify interests, define goals, identify options
and implement a meaningful and well thought out plan.**

Taking responsibility for your future.

Taking the time to figure out where you are going.

Taking the time to figure out why.

**The difference between stopping out and dropping out is the ability
to create a meaningful and well thought out plan.**