

SCREEN 1

BCSSEville State University cares about how you are doing.

Let us know how your first few weeks have been going. Your participation is voluntary and confidential. Information from the survey is used by your advisors, faculty and other staff who provide student services at your institution. See the [informed consent](#) for more details. Click on the "agree to participate" statement below to continue.

I have read the informed consent and agree to participate.

Continue

SCREEN 2

How are things going so far this semester?



Are you concerned about your personal safety on campus?

Yes

A little

No

Are you concerned about your mental health?

Yes

A little

No

SCREEN 2 (continued)

Are you considering withdrawing from school?

Yes

A little

No

Are you concerned about having adequate food or housing?

Yes

A little

No

Are you concerned about being able to afford to stay in college?

Yes

A little

No

Submit

SCREEN 3



BCSSEville State University is here to help.

Please contact us if you need any assistance.

Contact: Your campus URL where students can seek help