

WAGE THEFT SURVEY

This survey will ask you questions about your experience being paid at present and past jobs. Please take a few minutes to answer the following questions:

1. What work industry do you work in/have you worked in? (Circle more than one if applicable)

- a) Construction b) Service sector c) Cleaning services d) Food service e) Manufacturing f) Other

On the job, have you ever:	Yes	No	Not sure
1. Had part or all of your tips taken by the employer?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Been paid less than the minimum wage?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Not been paid overtime or paid for fewer hours than you actually worked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Not received a final paycheck?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Regularly worked through lunch hours and breaks unpaid?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Had your employer change your timesheet to show fewer hours worked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Do you know friends and/or family members who have had their wages stolen?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you answered **NO** to **ALL** of the previous questions, please skip to number 13.

8. How recently did any of these happen to you?

- a) Previous 6 months b) Previous year c) 1 year to 3 years d) More than 3 years

9. How much income do you estimate you did not receive?

- a) \$100-\$500 b) \$500-\$1000 c) \$1000-\$3000 d) More than \$3000

10. Did you try to recover your lost wages? Yes No

11. If yes, did you: (Circle more than one if applicable)

- a) Contact a non-profit organization b) Contact the Department of Labor or other agency
 c) Contact a labor union d) Other (please explain) _____

12. Were your wages recovered?

- a) Yes b) No c) Case still open d) Gave up e) Other _____

13. Do you consider yourself to be:

- a) African American b) Asian c) Caucasian d) Hispanic/Latino e) Other _____

14. Age: a) 15-25 years old b) 26-35 years old c) 36-50 years old d) 50 + years old

15. Gender (circle one): Male Female Other

16. City: _____ State: _____

Optional: Name: _____ Address: _____ Email: _____