

## Appendix: Survey Questions Not Including the Volunteer Functions Inventory

### Section II: COVID-19 and clinic participation

There are a total of 10 questions in this section concerning the COVID-19 pandemic and your university or university partner's pro bono clinic.

How did your university's or university partner's pro bono clinic provide services to the patient population between January 2020 and December 2020? Check all that apply.

- Face to face/ in person
- Telehealth via video platform
- Telehealth via phone call
- Unsure
- Other \_\_\_\_\_

Did you participate (volunteer or required) at your university's or university partner's pro bono clinic between January 2020 and December 2020?

- Yes
- No

If you were mandated to participate by a course or service requirement, did you volunteer past that requirement at your university's or university partner's pro bono clinic between January 2020 to December 2020?

- Yes
- No
- I was not mandated to participate at my university or university partner's pro bono clinic for a class or program requirement

Approximately how many times did you participate at your university's or university partner's pro bono clinic between January 2020 and December 2020?

- \_\_\_\_\_

Did you participate at your university's or university partner's pro bono clinic prior to the COVID-19 pandemic (between January 2020 and February 2020)?

- Yes
- No

Did you participate at your university's or university partner's pro bono clinic during the COVID-19 pandemic (between March 2020 and December 2020)?

- Yes
- No

Did the COVID-19 pandemic impact your ability to participate at your university's or university partner's pro bono clinic?

- Yes
- No

Did the COVID-19 pandemic impact your willingness to participate at your university's or university partner's pro bono clinic?

- Yes
- No

Did your university's or university partner's pro bono clinic change the type of services they delivered during the COVID-19 pandemic (between March 2020 and December 2020)?

- Yes
- No
- Unsure

What changes to services did your university or university partner's pro bono clinic make during the COVID-19 pandemic (between March 2020 and December 2020)? Check all that apply:

- Switch from in-person to telehealth (video platform)
- Switch from in-person to telehealth (phone call)
- Temporarily paused treatment for a period of time
- Other \_\_\_\_\_

Section III: Demographics

There are a total of 8 questions in this section concerning your demographics and your school.

What is your age (years)?

- \_\_\_\_\_

What is your race? (select all that apply)

- American Indian or Alaskan Native
- Asian
- Black or African American
- Native Hawaiian
- White or Caucasian
- Chinese
- Filipino
- Vietnamese
- Pacific Islander
- Korean
- Samoan
- Asian Indian
- Japanese
- Chamorro
- Other Asian (for example: Pakistani, Cambodian, Hmong, etc.)
- \_\_\_\_\_
- Other Pacific Islander (for example: Tongan, Fijian, Marshallese, etc.)
- \_\_\_\_\_
- Some other race \_\_\_\_\_
- Prefer not to answer

Are you of Hispanic, Latino, or Spanish origin?

- No, not of Hispanic, Latino, or Spanish origin
- Yes, Mexican, Mexican American, Chicano
- Yes, Puerto Rican
- Yes, Cuban
- Yes, another Hispanic, Latino, or Spanish origin (for example: Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.)

\_\_\_\_\_

What is your sex?

- Male
- Female
- Non-binary / third gender
- Prefer not to say

What state is your physical therapy program located in?

○ \_\_\_\_\_

Is your university a public or private university?

- Public
- Private
- Unsure

What is your anticipated graduation date?

- 2021
- 2022
- 2023