OMB Control Number: **0925-0648**

Expiration Date: **1/2015**

*Public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching exiting data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.* ***An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a current valid OMB control number.*** *Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to NIH, Project Clearance Branch, 6705 Rockledge Drive, MSC 7974, Bethesda, MD 20892-7974, ATTN:PRA (0924-0648). Do not return the completed form to this address*

**Traveling Exhibition Host Survey**

**Host Institution & Contact:** Please review and update your contact information. [The information will be pre-populated by the Exhibition program for each venue.]

Host Institution Name:

Primary Contact:

Name:

Email:

Telephone:

Traveling Exhibition Display location:

(if different from the Host Institution location)

Display dates:

Days and hours open to the public:

**Exhibition Visitors**

1. How many people do you estimate have visited the exhibition on display at your institution?

 of visitors. Please indicate the estimation method:

* Actual count
* 20% of all institution visitors
* Other, please specify:
1. Who were the primary audiences for the exhibition? Please check all that apply.
	* College and university faculty and students
	* K-12 teachers and students
	* General public
	* Allied health professionals
	* Other, please specify:
2. Did the exhibition help you bring ‘new’ audiences to your institution?
	* No
	* Yes, please identify the new audiences

**Supplementary Public Programs**

1. Did your institution sponsor and create a special display of items from your own collections to supplement the traveling exhibition display?
	* No, please go to Question 5
	* Yes, please provide details about the special display

Types of items on display:

Describe briefly how the display was related to the exhibition:

1. Did your institution organize any public programs in conjunction with the traveling exhibition?
	* No, please go to Question 6
	* Yes, please select all types of programs that apply and note the estimated number of attendees.
		+ Children and/or Youth events (No. of attendees: )
		Comments:
		+ Family events (No. of attendees: )
		Comments:
		+ Lecture(s) open to public: (No. of attendees: )
		Comments:
		+ K-12 Teacher events (No. of attendees: )
		Comments:
		+ Receptions (No. of attendees: )
		Comments:
		+ Other, please describe and provide estimated number of attendees.

Please mark all online NLM and exhibition resources that you used in the public programs for the exhibition:

* Exhibition website
* Digital Gallery (digitized items online)
* Online exhibition educational resources (e.g., lesson plans, higher education module, online activities, other resources)
* NLM health resources and other databases (e.g., MedlinePlus, Images from the History of Medicine, Human Genome Resources, etc.)

**Public Relations**

1. Which of the online “host venue resources” did you use? Please mark all that apply.
	* exhibition brochure
	* exhibition poster
	* Public Relations information
	* Others, please describe.
2. Please let us know if your institution promoted the exhibition through social media or local media outlets. Please mark all that apply.
	* Institution’s newsletter
	* Institution’s Social media: blog, Facebook, YouTube, others
	* Local newspapers
	* Local TV
	* Community blogger(s)
	* Community organizations or groups
	* Others, please describe

**Additional Comments**

1. Please tell us about your community’s experience in your offering of the traveling exhibition(s) from the National Library of Medicine.
2. Which of the following community partner kit resources would be helpful in your developing supplementary public programs along with hosting the exhibition? Please check all that applies.
	* Evaluation/survey templates
	* Programming resources (ideas, how-tos)
	* Publicity resources
	* Online educational resources for local K-12 teachers
	* Sample press kit
	* Other, please specify:

**Thank you for completing the Traveling Exhibition Host Survey!**

**Please feel free to submit additional digital and/or hard copies of publicity and program materials you created for the traveling exhibition and its supplementary events.**

**Script for the Follow-up Phone Call**

1. Hi, my name is . I am calling about the Traveling Exhibition Host survey that was sent to you from the Exhibition Program at the National Library of Medicine. Do you have a moment for me to verify that you have received the survey?
	1. If yes, [Go to #2 below]
	2. If no, When may be a good time for me to call back to follow up on the survey? [Schedule a call back date/time and follow up with a revised introduction and starting from #2 below.]
2. Did you receive the email with the survey?
	1. If yes, Do you have any questions at this time? Your feedback is really important for us to improve our traveling exhibition services to you and other hosts. If you prefer I am happy to take your feedback over the phone, or we will look forward to receiving your completed survey on the mail. [If phone feedback go to #3; if paper feedback go to #4]
	2. If no, I am happy to resend the email with the survey. Should I send the email to you or another person? Record the information. I will send it right after this call. Thank you and have a great day!
3. If the participant prefers to respond over the phone, Thank you. This may take about 10 minutes for me to read you each question and record your responses. I will start with verifying the contact information. [Read the survey and record the responses] I appreciate your time to respond to the survey over the phone. Thank you and have a great day!
4. Thank you in advance for completing and returning the survey to the Exhibition Program by 2 weeks after the phone call. If you have any questions as you complete the survey, please call or email me at phone # or email address. Have a great day!