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|  | **NATIONAL AGRICULTURAL STATISTICS**  **SERVICE** | **TELEPHONE QUALITY**  **CONTROL WORKSHEET**  **for**  **VEGETABLE CHEMICAL USE SURVEY** | Form Approved  OMB Number 0535-0218  Approval Expires XX/XX/XXXX  Project code 136 |
| U.S. Department of Agriculture  Rm 5829, South Building  1400 Independence Avenue, S.W.  Washington, D.C. 20250-2000  1-800-727-9540  Fax: 202-690-2090  E-mail: nass-dc@nass.usda.gov | |  |

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| State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | Farm, Ranch, or  Operation Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Version: |  | Operator’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| ID/POID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Enumerator: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
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| Interview Date & Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | Telephone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Survey Respondent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Operator/Mgr  Spouse  Accountant/  Partner  Other  Bookkeeper | |
| Current Respondent: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Operator/Mgr  Spouse  Accountant/  Partner  Other  Bookkeeper | |

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| **INTRODUCTION:**  [*Introduce yourself, and ask for the survey respondent. Rephrase in your own words*.]  Recently you should have been contacted by one of our interviewers, Mr./Ms. ,  for the Vegetable Chemical Use Survey. This telephone call is part of our survey quality assurance measures  to verify that personal contact was actually made with you for that purpose. Your response is voluntary and not required by law, but your cooperation will be appreciated. Facts about your farm/ranch will be kept confidential. |

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| **1. During the past few days, do you recall an interview with Mr./Ms. , for the purpose of obtaining information about your farming or ranching operation?** |
| **YES** - [*Go to item 3.*]  **NO** - [*Go to item 2.*]  **DON'T REMEMBER** - [*Go to item 2.*] |
| **2. During the past few days, did any other person from the Agricultural Statistics Service, NASS, or USDA, interview you to obtain information about your farm or ranch?** |
| **YES** - [*Go to item 3.*]  **NO** - [*Conclude interview.*]  **DON'T REMEMBER** - [*Conclude interview.*] |
| **3. Did the person conducting the interview ask you to verify the spelling of your name, address**  **and the operation name?** |
| **YES**  **NO**  **DON'T REMEMBER** |
| [*Continue on back.*] |

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| **4. Now I need to verify items that are critical to our survey procedures.** | | | | | | | | | | | | |
|  | **Reported** | | | | | | **Verified** | | | | |  |
| a. Total acres of all vegetables (*Section* ***A****, item* ***4***) | |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |  |
| b. Chemical applications to target vegetables |  | | | None, Positive |  | |  | | None, Positive |  | |  |
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| **5. Did Mr./Ms. conduct the interview in a knowledgeable and professional manner?** | |
| **YES**  **NO** – Explain: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
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| **6. Do you have any additional comments you would like to make concerning our survey contact?** | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
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| **This concludes the interview. Thank you for your help.** | |
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| **Signature:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |