

Application Feedback Form

Thank you for applying for the Collections Assessment for Preservation Program! In order to help us improve the application process, we ask that you take 5-10 minutes to let us know how you heard about CAP and provide feedback about the application process. Your responses will be anonymous and will not affect your application.

We thank you in advance for your feedback!

Where did you get the information that prompted your interest in applying for the CAP Program? Check all that apply. ■ AIC/FAIC (Foundation of the American Institute for Conservation) website □ Discussion with CAP staff person (in person or by phone) □ IMLS (Institute of Museum and Library Services) website ■ IMLS publications □ Discussion with an IMLS () staff person □ CAP printed material □ LISTSERV posting (please specify which Listserv): □ Social media (Facebook, Twitter, LinkedIn, etc.) (please specify): ☐ From a colleague ☐ From an assessor or other conservation professional ☐ From a museum association (American Alliance of Museums, state or regional museum association, etc.) (please specify): ■ Professional

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association meeting or event

IMLS-CLR-F-0047

(please specify):	
■ My organization previ	ously participated in CAP
□ Other:	
If more than one, which was	most influential in encouraging you to apply?
AIC/FAIC (Foundation website	of the American Institute for Conservation)
■ Discussion with CAP	staff person (in person or by phone)
☐ IMLS (Institute of Mu	seum and Library Services) website
IMLS publications	
☐ Discussion with an I	MLS () staff person
☐ CAP printed materia	I
■ LISTSERV posting	(please specify which Listserv):
■ Social media(Facebo	ook, Twitter, LinkedIn, etc.) (please specify):
☐ From a colleague	
■ From an assessor or	other conservation professional
☐ From a museum ass regional museum	sociation (American Alliance of Museums, state or
association, etc. specify):association meeting or	□ Professional
(please specify):	
	ously participated in CAP
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Rate the CAP application package by placing an "X" in the appropriate column below.

Excelle nt				Poor
5	4	3	2	1

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Did you contact FAIC staff while completing the application? □ Yes □ No

If yes, please answer the question in the chart below.

	Complet ely satisfied				Comple te unsatis fied
	5	4	3	2	1
How satisfied were you with the assistance you received?					

What could we have done to better assist you (optional)?

Approximately how many hours did it take you to complete this application hours	?
How many staff members participated in gathering all of the information?	

Please share any additional comments on the application process below (optional).

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