

CAP Assessor Feedback Form

Thank you for your participation in the CAP Program!

The Foundation for Advancement in Conservation relies on your feedback to help us understand your experience, improve the program for future years, and track additional in-kind work toward assessments. Please share your experience with us by completing this CAP Assessor Feedback Form.

Please answer the questions regarding your experiences with your most recent CAP assessment. If you conducted more than one this year, please complete one evaluation for each site.

Only aggregate results will be shared outside of FAIC and IMLS staff. We thank you in advance for your feedback and appreciate any comments you may have. First and Last Name: _____

Name of Institution Assessed: _____

1. Was this your first time serving as an assessor for FAIC's Collections Assessment for Preservation program?

 \Box Yes \Box No (If no, skip to Question 4.)

2. Did you visit the FAIC website for information about the CAP Program?

 \Box Yes \Box No

If yes, indicate your level of agreement with the following statements about the **CAP INFORMATION ON THE FAIC WEBSITE** by placing an "X" in the appropriate box:

	Strongly Agree	Somew hat Agree	Neither Agree nor Disagr ee	Somewh at Disagre e	Strongl y Disagre e
The FAIC website clearly explained the CAP program.					
The FAIC website was easy to navigate.					

What could we do to improve the CAP website? (optional)

3. Indicate your level of agreement with the following statements about the *CAP ASSESSOR HANDBOOK* by placing an "X" in the appropriate box:

Str gl Agr	/	Somew hat Agree	Neithe r Agree nor Disagr ee	Somewh at Disagree	Strong ly Disagr ee
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The Handbook clearly outlined my role and responsibilities.			
The Handbook provided useful resources for completing the report.			

What could we do to improve the CAP Assessor Handbook? (*optional*)

4. Indicate your level of agreement with the following statements about the **SITE QUESTIONNAIRE AND PRE-VISIT CALL** by placing an "X" in the appropriate box:

	Strong ly Agree	Somew hat Agree	Neither Agree nor Disagre e	Somewh at Disagre e	Strong ly Disagr ee
The site questionnaire helped me prepare for the site visit.					
The pre-visit call helped me prepare for the site visit.					

5. What additional question(s) or information should be included in the Site Questionnaire, if any? (*optional*)

6. Indicate your level of agreement with the following statements about the **SITE VISIT** by placing an "X" in the appropriate box:

Strongl y Agree		Neither Agree nor	Somew hat Disagre	Strongly Disagree
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		Disagre e	е	
Staff was well prepared for the visit.				
I was provided sufficient access to all relevant spaces.				
I had enough time to effectively assess all buildings and/or collections.				
Staff provided me with all information needed for an effective report.				

What could be done to improve site visits? (optional)

7. Did you contact FAIC staff during the process?

 \Box Yes \Box No

If yes, how would you rate:

	Exceeded Expectati ons		Met Expectati ons		Did Not Meet Expectati ons
	5	4	3	2	1
FAIC staff's ability to answer questions					

What could we have done to better answer your questions? (optional)

8. Did you work with another assessor on this project?

 \Box Yes \Box No

If yes, please indicate your level of agreement with the following statement.

	Strongl y Agree	Somew hat Agree	Neither Agree nor Disagre e	Somewh at Disagree	Strongl y Disagre e
My co-assessor performed his/her responsibilities in accordance with CAP program standards, as outlined in the CAP Assessor Handbook.					

If you answered Somewhat Disagree or Strongly Disagree above, please explain why. (*optional*)

9. OVERALL, how would you rate:

	Exceeded Expectati ons		Met Expectati ons		Did Not Meet Expectati ons
	5	4	3	2	1
Your overall experience with CAP.					
Information and training provided by FAIC.					

What could we do to improve your overall experience? (optional)

10. Did you contribute time to the project beyond that covered by the FAIC allocation and museum payment?

 \Box Yes \Box No

If yes, please estimate the value of the **additional** time

contributed to the CAP process. \$_____

Did you absorb project expenditures (e.g., travel costs, supplies) beyond those reimbursed by the institution?

If yes, please estimate the value of the **additional** resources

contributed to the CAP process. \$_____