

AmeriCorps Program Director Survey

Project Name: _____ Date: _____

Name: _____

Please answer the following questions to the best of your knowledge. The purpose of this survey is to identify, in a confidential manner, areas of project operation and training/technical assistance that should be improved or corrected. Your cooperation is greatly appreciated. If you require more space to explain your responses, please feel free to use the back of the pages. Thank you.

1. How do you ensure that each participant is eligible to enroll?

2. Please describe your screening and selection process.

3. Please describe your orientation process for AmeriCorps Members or attach an orientation agenda.

4. How do you determine the project-specific or other training needs of the corpsmembers?

5. Who provides corpsmember training, and how do you evaluate the training?

6. What would you change about the orientation and training for your next class of corpsmembers?

7. How do you ensure that corpsmembers are treated like AmeriCorps Members rather than employees?

8. How do you monitor the service sites to ensure that corpsmembers are satisfactorily completing their service?

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9. How do you monitor the satisfaction of acquirers of service and community partners?

10. How do you monitor the satisfaction of the corpsmembers?

11. How do you ensure that the program is a "Drug-Free Workplace" and that corpsmembers do not engage in prohibited activities (including fundraising, political activities, lobbying, religious activities, union activities, or service to for-profit organizations)? Have you ensured that all corpsmembers and staff are aware of these policies and understand them?

12. What has been done in your program to provide reasonable accommodation to qualified individuals with disabilities? (if there are no individuals who qualify for special accommodation, write "N/A")

13. Have you ever experienced what you would call discrimination (gender, racial, etc.) by any AmeriCorps Members, staff, or anyone else connected with the AmeriCorps program?

14. What training/technical assistance provided to you by the KsOCS staff has been helpful to you?

15. What could the KsOCS do to improve the quality of its program monitoring and oversight activities?

16. Do you have any other comments or suggestions regarding KsOCS monitoring, evaluation, and/or oversight activities?

SAMPLE

18. Has the program provided corpsmembers with orientation training and safety training?

Comments: _____

19. Has the program provided corpsmembers with training in communication, first aid/CPR, and conflict resolution? *(This is optional training for the year 1996-97 program year)*

Comments: _____

20. How do you ensure that each participant is provided with an ample amount of time to complete his or her service hours?

21. Have you read your program's grantprovisions, mission statement, and annual objectives?

22. Is there any training you would like to have to further assist you in your role in the AmeriCorps program? Is there any training you think would further assist the corpsmembers in their service to the community?

23. Are there any ongoing or unresolved issues that you feel you, or the program, could address more efficiently or effectively through assistance from the KsOCS?

24. What could your director or the KsOCS do to improve the quality of program monitoring and evaluation?

SAMPLE

AmeriCorps Member Survey

Project Name: _____ Date: _____

Name (Optional): _____ Term of Service: _____ through _____ /
(MM/YY) (MM/YY)

Circle One: Full-time or Part-time

How were you recruited into the AmeriCorps program?

_____ National Recruit _____ Local Recruit _____ Other (Please Specify) _____

TO BE READ TO EACH CORPSMEMBER

Please answer the following questions to the best of your knowledge. The purpose of this survey is to identify, in a confidential manner, areas of project operation and training/technical assistance that should be improved or corrected. Your cooperation is greatly appreciated. If there are any questions you would prefer not to answer, please indicate this. Thank you for your time and cooperation.

1. What did your program do to make sure you understood that you are an AmeriCorps Member instead of an employee?

Comments: _____

2. Do you do secretarial work or clerical work, such as filing papers, doing research, or answering the telephone for the AmeriCorps program or your service site?

Comments: _____

3. Have you ever engaged in any of the following activities during your AmeriCorps service hours:

- . fundraising
- . lobbying
- . political activities
- . religious activities, union activities
- . providing service to a for-profit organization

Comments: _____

4. What activities does your program do to build a sense of togetherness among the corpsmembers?

Comments: _____

At your service site, is the AmeriCorps name or logo displayed?

Comments: _____