

COLLEGE CHEMISTRY CONSULTANTS SERVICE* (C₃S) POST-VISIT QUESTIONNAIRE

Name of institution _____

Address _____

C₃S applicant name _____

C₃S consultant name(s) _____

The purpose of this survey is to collect information about C₃S-related activities. This information will be aggregated with other consultants' activities to demonstrate utilization of the service to ACS and funding agencies, and will be used as training materials for new consultants in the program.

1. With whom did the consultant meet while visiting your institution?

Person or group	Yes	No
President	<input type="checkbox"/>	<input type="checkbox"/>
Vice president or provost	<input type="checkbox"/>	<input type="checkbox"/>
Dean	<input type="checkbox"/>	<input type="checkbox"/>
Chair or head of department	<input type="checkbox"/>	<input type="checkbox"/>
Faculty	<input type="checkbox"/>	<input type="checkbox"/>
Professional staff	<input type="checkbox"/>	<input type="checkbox"/>
Support staff	<input type="checkbox"/>	<input type="checkbox"/>
Students (majors)	<input type="checkbox"/>	<input type="checkbox"/>
Students (non-majors)	<input type="checkbox"/>	<input type="checkbox"/>
Others	<input type="checkbox"/>	<input type="checkbox"/>

2. Who has seen the report the consultant provided, and how useful has it been for initiating changes?

Person or group	Check if you circulated the report to this person or group	How useful was the report in initiating changes for this person or group?			
		Not useful			Very useful
		1	2	3	4
President	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vice-president or provost	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chair or head of department	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Faculty	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Professional staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Support staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students (majors)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Students (non-majors)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Others _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. Was the preliminary organization for the visit satisfactory?
 Yes No
4. Was the length of the visit sufficient?
 Yes No
5. Based on your initial request for consultation services, did the visit meet your expectations?
 Yes No
 If no, please elaborate on how we can improve our service.
6. Was a date for receiving the consultant's report agreed upon during the visit?
 Yes No
7. Was the report received on or before the agreed upon date?
 Yes No
8. Would you recommend C₃S to other institutions?
 Yes No
 If yes, please indicate the benefits of receiving this service.
9. What new or additional concerns or interests do you have as a result of the consultant's visit?
10. What types of short-term follow-up did the consultant provide, and how useful was it to your situation?

Short-term follow-up	Not provided	Very helpful			Not helpful
		1	2	3	
Copies of journal articles or publications focusing on our particular need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The names of other individuals who might provide additional information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phone call from the consultant after the visit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. How accurate was the report in portraying your situation and providing suggestions?

Aspect of the report	Strongly disagree			Strongly agree
	1	2	3	
The report gives an accurate overview of our institution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The report gives an accurate overview of our own departmental situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The report provides an accurate listing of our departmental strengths	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The report gives specific recommendations for improvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The report gives manageable recommendations that might work in our situation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall, the report was useful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

12. What immediate consequences can you see arising from the consultants visit and report?

13. What actions will be taken during the next year as a result of the visit and report?

14. Based on the consultation:

Overall, how useful was the consultant's visit and report in addressing your issues?

Very useful		Not useful	
1	2	3	4
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other comments:

Please return questionnaire to Susan Greer, ACS Division of Chemical Education, Purdue University, 560 Oval Drive, West Lafayette, IN 47907-2084; sgreer@purdue.edu.

*A service to college chemistry departments coordinated by the ACS Division of Chemical Education, Inc.