

## Appendix “A”

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### A. Institutional Identifying Information

A1. Name: \_\_\_\_\_

A2. Address 1: \_\_\_\_\_

A3. Address 2: \_\_\_\_\_

A4. Address 3: \_\_\_\_\_

A5. City, State, Country and Zip: \_\_\_\_\_

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### Connecting to Collections Survey Instructions

#### Submitting the Survey

We encourage you to submit your responses after completing the paper questionnaire. Please return your survey to: College of Micronesia-FSM, LRC, attn: Connecting to Collections, P.O. Box 159, Kolonia, Pohnpei FM 96941

#### Confidentiality

The College of Micronesia-FSM will keep your individual responses completely confidential. Only the aggregate data will be reported; your individual responses will never be published or identified by COM-FSM, the Institute of Museum and Library Services (IMLS), or any organization cooperating in this project.

#### Why Should You Participate?

The data you provide will communicate the scope and nature of the preservation needs of collections in the FSM and will guide the efforts of decision-makers and funders to address those needs. The results of the Connecting to Collections survey will show you your preservation needs in the context of those of your peers in a form that can be used as a tool for raising institutional awareness and promoting long-range planning for the care of collections.

#### Scope of the Questionnaire

- Complete the questionnaire for the collection/institution identified above in question A1.
- Fill out the survey only for your own holdings, not those of any other collecting entities in your parent institution. They may receive their own surveys.
- Complete the questionnaire for collections that are a permanent part of your holdings or for which you have accepted preservation responsibility.

#### How to Complete the Questionnaire

- For questions that ask for a number or dollar amount, please provide your best estimate. Remember, these figures will constitute a national profile, so even a rough estimate is useful.
- For questions about issues such as institutional budget and staffing, you may need to consult your colleagues.
- If your responses will not fit in the spaces provided, please write them on the attached blank page.
- Do not leave questions blank. If there are questions that you cannot answer, select “Don’t Know.” If there are questions that are not applicable to your institution, select “Not Applicable.”

#### More Information

For questions about the survey, contact Lucy Oducado at 691-320-2480, extension 124 or at [loducado@comfsm.fm](mailto:loducado@comfsm.fm)

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## B. Description of Collecting or Holding Institution

B1. For purposes of comparing you with your peers, which of the following most closely describes your **primary function** or service? (*select one*)

- a. Archives
- b. Public library
- c. Academic library
- d. School library
- e. Special library
- f. Museum
- g. Other, please specify one function: \_\_\_\_\_

B2. Which **additional functions or services** do you provide? (*select all that apply*)

- a. Archives
- b. Library
- c. Other, please specify: \_\_\_\_\_
- d. None

B3. Does your institution have Internet access?

- a. Yes
- b. No

B4. Does your institution have a Web site?

- a. Yes
- b. No

c. If yes, please provide the URL: \_\_\_\_\_

B5. Which of the following most closely describes your institution's governance? (*select one*)

- a. College, university or other academic entity
- b. Non-profit, non-governmental organization (NGO) or foundation
- c. Corporate or for-profit organization
- d. National government
- e. State government
- f. Local village/municipality
- g. Other: \_\_\_\_\_

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## C. Environment

C1. Do you use environmental controls to meet **temperature, relative humidity, and light level** specifications for the preservation of your collection through the use of air conditioners, dehumidifiers, etc.? (*select one*)

- a. Yes, in all areas
- b. In some, but not all areas
- c. No, in no areas
- d. Don't know
- e. Not applicable

C2. What estimated percentage of your collection is stored in areas you consider to be **adequate** (large enough to accommodate current collections with safe access to them and appropriate storage furniture, if necessary)? (*select one*)

- a. 0 %
- b. 1-19%
- c. 20-39%
- d. 40-59%
- e. 60-79%
- f. 80-99%
- g. 100%
- h. Don't know

C3. For the storage areas that are not adequate, indicate the degree of improvement needed in each of the following categories. If all of your storage areas are adequate, select "no need."

	No need	Need	Urgent need	Don't know	Not applicable
a. Additional on-site storage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Renovated storage space	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. New or improved storage furniture/ accessories (e.g., shelves, cabinets, racks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### D. Preservation Activities

D1. Does the **mission** of your institution include preservation of your collection? (*select one*)

- a. Yes
- b. No
- c. Don't know
- d. Our institution does not have a mission statement

D2. Does your institution have a **written, long-range preservation plan** for the care of the collection (a document that describes a multi-year course of action to meet an institution's overall preservation needs for its collection)? (*select one*)

- a. Yes
- b. Yes, but it is not up-to-date
- c. No, but one is being developed
- d. No
- e. Don't know

D3. Does your institution have a **written emergency/disaster plan** that includes the collection? (*select one*)

- a. Yes
- b. Yes, but it is not up-to-date
- c. No, but one is being developed
- d. No
- e. Don't know
- f. We only have the pocket plan developed at the Tinian workshop in 2007

D4. If you **have a written emergency/disaster plan**, is your staff trained to carry it out? (*select one*)

- a. Yes
- b. No
- c. Don't know
- d. Have no written emergency/disaster plan

D5. Are copies of **vital collection records** (e.g., *inventory, catalog, server backups*) stored offsite? (*select one*)

- a. Yes
- b. Some, but not all
- c. No
- d. Do not have copies
- e. Don't know
- f. Do not have collection records

D6. Do you have adequate **security systems** (e.g., *security guard, staff observation, intrusion detection*) to help prevent theft or vandalism of collections? (*select one*)

- a. Yes
- b. In some, but not all areas
- c. No
- d. Don't know

D7. Which of the following most closely describes your current **staffing for conservation/preservation**? (*select all that apply*)

- a. Paid conservation/preservation staff (full-time or part-time)
- b. Volunteers (full-time or part-time)
- c. Conservation/preservation duties assigned to various staff as needed
- d. No staff person has conservation/preservation responsibilities

D8. What does your conservation/preservation program include? (*select all that apply*)

	Done by institution staff	Not done currently, but planned	Not done	Not applicable
a. Preventive conservation ( <i>e.g., housekeeping, holdings maintenance, rehousing, environmental monitoring</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Preservation management ( <i>e.g., administration, planning, assessment</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Conservation treatment ( <i>e.g., repair, mass deacidification, specimen preparation</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Preservation reformatting ( <i>e.g., preservation photocopying, microfilming</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Preservation of audio-visual media and playback equipment ( <i>e.g., preservation copies of media, maintaining equipment</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Preservation of digital materials and electronic records collections ( <i>e.g., migrating data to current software</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D9. Does your institution's conservation/preservation mission or program include the **responsibility to preserve digital collections** (*computer based representation of text, numbers, images, and/or sound, e.g., optical discs, Web sites, electronic books*)? (*select one*)

- a. Yes
- b. No
- c. Don't know
- d. Not applicable

D10. Please indicate your institution's **level of need** in the following areas related to conservation/preservation.

	No Need	Need	Urgent Need	Don't know	Not applicable
a. Finding aids or cataloging of collections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Condition surveys or assessments of collection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Staff training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Security	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Environmental controls ( <i>e.g., air conditioning, de-humidifying</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Improvements to reduce collections' exposure to light	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Conservation treatment ( <i>include specimen preparation</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Preservation of digital collections ( <i>digitized and born-digital</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Integrated pest management ( <i>approaches to prevent and solve pest problems in an efficient and ecologically sound manner</i> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D11. For all your collections that are **currently in need of treatment** identify all the causes of the damage or loss of access to them.

	No damage or loss	Some damage or loss	Significant damage or loss	Don't know
a. Handling (e.g., by researchers, staff, in shipping)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Water or moisture (e.g., mold, stains, warping)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Light (e.g. fading, discoloration)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Airborne particulates or pollutants (e.g., dust, soot)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Fire	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Improper storage or enclosure (e.g., bent, creased, adhered together)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Pests	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Vandalism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Physical or chemical deterioration (due to temperature, humidity, aging, e.g., brittle paper, flaked paint, cracked leather, degradation of electronic media)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Outdated media, equipment, hardware, software, disk drives	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k. Prior treatment(s) or restoration (e.g. use of cellophane tape for book repairs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D12. Do you **promote awareness** of conservation/preservation activities using the following?

	Yes	No	Not done currently, but planned	Don't know	Not applicable
a. Educating collection users about preservation activities (e.g., in tours, demonstrations)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Presenting preservation activities to collection users (in educational programming, printed/promotional materials)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Highlighting preservation activities in exhibitions or other programs for the public	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Serving as a source for conservation/preservation information to the public (e.g., responding to queries)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Featuring preservation work on Web site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## E. Expenditures and Funding

E1. Do you have funds specifically allocated for **conservation/preservation activities** in your annual budget? (select one)

- a. Yes. Approximately how much? \_\_\_\_\_
- b. No specific line-item in budget, but other budgeted funds are available
- c. No
- d. Don't know

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## F. Collections and Holdings

F1. Does your institution have a catalog of any kind?

a. Yes  b. No  c. Don't know

d. If YES, what kind? (e.g. online, card, Excel, Access) \_\_\_\_\_

F2. What estimated percentage of the collection is accessible through a **catalog**? (*select one*)

- a. 0%
- b. 1-19%
- c. 20-39%
- d. 40-59%
- e. 60-79%
- f. 80-99%
- g. 100%
- h. Don't know

F3. What estimated percentage of the collection's **catalog** is accessible **online**?

- a. 0%
- b. 1-19%
- c. 20-39%
- d. 40-59%
- e. 60-79%
- f. 80-99%
- g. 100%
- h. Don't know

F4. Do you provide **online** access to the **content** of any of your collections or holdings (*e.g., online exhibitions, interactive resources, digital art, digitally scanned photographs, documents, books, and other artifacts*)?

- a. Yes
- b. No, but will have access within the next year
- c. No
- d. Don't know

F5. Does your institution hold collections of the following types?

	Yes	No
a. <b>Books and Bound Volumes</b> — <i>monographs, serials, newspapers, scrapbooks, albums, pamphlets</i>	<input type="checkbox"/>	<input type="checkbox"/>
b. <b>Unbound Sheets</b> — <i>archival records, manuscripts, maps, oversized items, ephemera</i>	<input type="checkbox"/>	<input type="checkbox"/>
c. <b>Photographic Collections</b> — <i>microfilm, microfiche, photographic prints, negatives, slides, transparencies</i>	<input type="checkbox"/>	<input type="checkbox"/>
d. <b>Moving Image Collections</b> — <i>motion picture film, video tape, laser disc, CD, DVD</i>	<input type="checkbox"/>	<input type="checkbox"/>
e. <b>Recorded Sound Collections</b> — <i>phonodisc, cassette, open reel tape, CD, DVD, MP3</i>	<input type="checkbox"/>	<input type="checkbox"/>
f. <b>Digital Material Collections</b> — <i>floppy discs, CD-R, DVD-R, data tape, online collections</i>	<input type="checkbox"/>	<input type="checkbox"/>
g. <b>Art Objects</b> — <i>paintings, prints, drawings, sculpture, decorative arts</i>	<input type="checkbox"/>	<input type="checkbox"/>
h. <b>Historic and Ethnographic Objects</b> — <i>textiles (including flags, mats), ceramics, ethnographic artifacts (e.g., baskets, bark), domestic artifacts (including household tools/machines, toys, musical instruments), scientific artifacts</i>	<input type="checkbox"/>	<input type="checkbox"/>
i. <b>Archaeological Collections</b>	<input type="checkbox"/>	<input type="checkbox"/>
j. <b>Natural Science Specimens</b> — <i>zoological, botanical, geological</i>	<input type="checkbox"/>	<input type="checkbox"/>

F6. In the following chart, please indicate the estimated number **for each type of collection you hold**.

- Include only collections that are a permanent part of your holdings or for which you have accepted preservation responsibility.
- **Estimate** your total holdings in each category. For types of collections not listed, record under the appropriate “other” category. If possible, please specify what you have included.
- **Do not leave any category blank**; where applicable, check “have no holdings” or “quantity unknown.”
- For each collection, note the **estimated percentage that is in need of preservation**. It is not necessary for your institution to have done a condition survey on all or part of your collections to provide this estimate. If you do not know the condition of your materials and cannot even provide an estimate, enter 100% in “unknown condition.”
- On each line, the percentages indicating condition **should total 100%**.

	Have no holdings	Approx. # of units	Quantity unknown	% in unknown condition	% in no need	% in need	% in urgent need
a. Books and bound volumes	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____ %	_____ %	_____ %	_____ %
b. Unbound sheets	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____ %	_____ %	_____ %	_____ %
c. Photographic collections	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____ %	_____ %	_____ %	_____ %
d. Moving Image collections	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____ %	_____ %	_____ %	_____ %

## G. Respondent Information

G1. How many **staff are currently employed** in your collecting institution (as identified on page 1, question A1)? Do not express in full-time equivalents (FTEs). Indicate “0” if you have no staff in a category.

	Number of staff	Don't know
a. Full-time paid staff	_____	<input type="checkbox"/>
b. Part-time paid staff	_____	<input type="checkbox"/>
c. Full-time unpaid staff	_____	<input type="checkbox"/>
d. Part-time unpaid staff	_____	<input type="checkbox"/>

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G2. How many **visitors or users** did you serve last year? Indicate "0" if you had no visitors or users in a category.

	<b>Number of visitors or users</b>	<b>Don't know</b>
a. On site	_____	<input type="checkbox"/>
b. Off site ( <i>e.g., traveling exhibitions, bookmobiles, educational programs</i> )	_____	<input type="checkbox"/>
c. Electronic ( <i>e.g., visits to Web site, electronic distribution lists, electronic discussion groups</i> )	_____	<input type="checkbox"/>

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**To be completed by lead person completing or coordinating the survey.**

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This information will be used only if COM-FSM needs to clarify a response. COM-FSM will keep this information, like all the information you provided in this survey, completely confidential. Only aggregate data will be reported. Your individual responses will never be published or identified by COM-FSM, the Institute of Museum and Library Services, or any other organization cooperating in this project.

G3. Name of lead person completing or coordinating survey (*will remain confidential*) \_\_\_\_\_

G4. Title \_\_\_\_\_

G5. Responsibility for preservation activities \_\_\_\_\_

G6. Phone number \_\_\_\_\_ G7. Fax number \_\_\_\_\_

G8. Email address \_\_\_\_\_

G9. Did more than one person complete this survey?

a. Yes     b. No

G10. May we have permission to include the name of your institution on a published list of survey participants? Your survey responses will not be linked to your name; results will be reported only in aggregate.

a. Yes     b. No

G11. (*optional*) Use the space below to explain your most pressing conservation/preservation need.

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**THANK YOU!**