Convio Go!™ DONOR SURVEY GUIDE for American Lung Association

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| **Charter:** [your organization’s full name] |
| **Center Name:** [your Convio center name] |
| **Notification email address:** [email address for notification]*(HINT: A notification is sent to this email address each time a constituent submits the survey. Make sure it is one that is checked often.)* |
| **SUBMISSION INSTRUCTIONS**  |
| Send this completed form to getready@convio.com. You should receive a confirmation of your submission within one business day. If you do not receive a confirmation, please check in with us. You should receive a test message that contains your content within five business days.*Your subject line should contain your organization’s Convio short name, the word “Donor Survey Guide”, and your content submission date. For example: AHS – Donor Survey Guide – 2/17/2012.* If you submit your content multiple times prior to a deadline, all but your most recent submission will be ignored. **Please note that if you miss your submission deadline, submit an incomplete document, or if the subject line of your email submission is not clear, production could be delayed or canceled.** |
| **BEST PRACTICES**  |
| What would inspire your donors to give more or more often? Why did they give originally? Where do you rank and why among the charities they give to? Today’s donors are much more independent in their giving and donor research can help you focus your resources for maximum impact. By using Convio’s Donor Survey, your constituents are given the opportunity to share their opinions and thoughts about your organization, their giving preferences and more.One very important best practice for surveys is the ability to read and complete it in a relatively short amount of time. Keeping this in mind, the Donor Survey has 9 questions and a comments area.  |
| WHAT’S PROVIDED?  |
| Convio will provide the survey, a snippet and a submission confirmation page. Results of the survey can be downloaded using the Survey Reporting tool.  |

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| **SURVEY TITLE** |  |

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| *Requirements - 10 words or less* | Example:* Donor Satisfaction Survey
* Donor Questionnaire
 |
| [enter content here] |
| **Do you want a survey snippet?** 🞏 Yes 🞏 No |
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| **INSTRUCTION TEXT** |  |

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| *Requirements - 50 words or less* | Example:As a loyal supporter of XYZ organization, your thoughts and opinions on the organization are important. Please complete the following short survey so we can serve you better. All questions are optional. Your responses and personal information will not be shared, rented or sold to any 3rd party organizations.Thank you very much for your time and support.  |
| [enter content here] |
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| **PERSONAL DATA (optional)** |  |

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| *Requirements – 4 items or less* | Your survey can be anonymous and these questions can be omitted. Please limit the amount of personal data you collect to 4, too much and the respondent may not complete the form.Examples of personal information:* First Name
* Last Name
* Daytime Telephone Number
 |
| [enter content here] |
| *Below are the suggested survey questions. If you choose to replace some or all, keep in mind a few things:* *First, take a hard look at what you want to learn and about the uses to which you intend to put their response.  If you’re not going to use the information, don’t ask the question. The last thing you want to do is ask if a donor is interested in learning about your planned giving program, then never follow up. Although some questions are "standard," you will be more productive if you develop a survey tailored to your organization's specific needs.****Options for types of questions: fill in the blank, multiple choice, true/false, rating scale, yes/no*** |
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| **QUESTION 1** |  |

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| *Requirements – limit your question to one, succinct sentence* | If you want to replace the question, please enter the new question in the cell to the left. If it is a multiple choice question, include the choices (no more than 6 choices) |
| **When deciding to donate to an organization, what characteristics do you look for and consider?** [fill in the blank] |
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| **QUESTION 2** | S2\_A |

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| *Requirements – limit your question to one, succinct sentence* | If you want to replace the question, please enter the new question in the cell to the left. If it is a multiple choice question, include the choices (no more than 6 choices) |
| **What is the most important factor that motivates you to give to an organization?** 1. Mission and vision
2. Leadership (Board & Staff)
3. Personal involvement or connection
4. The organizations impact on the community
5. Asked by a friend or colleague
6. Other
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| **QUESTION 3** | S2\_A |

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| *Requirements – limit your question to one, succinct sentence* | If you want to replace the question, please enter the new question in the cell to the left. If it is a multiple choice question, include the choices (no more than 6 choices) |
| **How often do you typically give to an organization in one year?**1. 1-2 times
2. 3-4 times
3. 5+ times
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| **QUESTION 4** | S2\_A |

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| *Requirements – limit your question to one, succinct sentence* | If you want to replace the question, please enter the new question in the cell to the left. If it is a multiple choice question, include the choices (no more than 6 choices) |
| **What is your preferred method of giving?**1. Credit Card
2. Check
3. Stock
4. Online
5. By Mail
6. Planned Gift
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| **QUESTION 5** | S2\_A |

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| *Requirements – limit your question to one, succinct sentence* | If you want to replace the question, please enter the new question in the cell to the left. If it is a multiple choice question, include the choices (no more than 6 choices) |
| **What circumstance/appeal first motivated you to give to [organization’s name]?** [fill in the blank] |
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| **QUESTION 6** | S2\_A |

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| *Requirements – limit your question to one, succinct sentence* | If you want to replace the question, please enter the new question in the cell to the left. If it is a multiple choice question, include the choices (no more than 6 choices) |
| **Please describe the most compelling reason the community should support us?**[fill in the blank] |
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| **QUESTION 7** | S2\_A |

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| *Requirements – limit your question to one, succinct sentence* | If you want to replace the question, please enter the new question in the cell to the left. If it is a multiple choice question, include the choices (no more than 6 choices) |
| **What aspects of our organization would you like to learn more about?** a. volunteer opportunitiesb. special eventsc. programs and servicesd. giving opportunitiese. impact of my gift |
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| **QUESTION 8** | S2\_A |

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| *Requirements – limit your question to one, succinct sentence* | If you want to replace the question, please enter the new question in the cell to the left. If it is a multiple choice question, include the choices (no more than 6 choices) |
| **Do you have any other feedback you’d like to share with the organization?** [fill in the blank] |
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| **QUESTION 9** | S2\_A |

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| *Requirements – limit your question to one, succinct sentence* | If you want to replace the question, please enter the new question in the cell to the left. If it is a multiple choice question, include the choices (no more than 6 choices) |
| **What is your age?**1. Under 25 years
2. 25-34 years
3. 35-44 years
4. 45-54 years
5. 55-64 years
6. 65+ years
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| **ON SCREEN SUBMISSION CONFIRMATION TEXT** |
| *Requirements – 50 words or less* | Your constituents see this page right after they submit the survey. It should confirm submission was successful.Example:Dear [salutation],Thank you! We appreciate your willingness to complete the donor feedback survey.If you’re not already on our eNews mailing list, please sign up now to stay in touch. You can also follow us on twitter and Facebook.Thanks again for your support of our mission and programs!Sincerely,NameTitleReturn to our homepage. |
| [enter content here] |