Convio Go!™ Volunteer Inquiry 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](mailto: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 link to review within five business days.  *Your subject line should contain your organization’s Convio short name, the word “Volunteer Inquiry Survey Guide”, and your content submission date. For example: AHS – Volunteer Inquiry 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** |
| This survey will help your organization collect information from prospective volunteers and enable you to begin the screening process.  The Volunteer Inquiry is not to serve as a full volunteer application, but a short form to gather basic information from prospective volunteers. The survey includes 11 questions, 5 of which you can customize and an autoresponder to confirm receipt. |
| WHAT’S PROVIDED? |
| Convio will provide the survey, a snippet and a confirmation page. Results of the survey can be downloaded using the Survey Reporting tool. |

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| |  |  | | --- | --- | | **SURVEY TITLE** |  | | |
| *Requirements - 10 words or less* | Example:   * Volunteer Inquiry * Prospective Volunteer Application |
| [enter content here] |
| **Do you want a survey snippet?** 🞏 Yes 🞏 No | |
| |  |  | | --- | --- | | **INSTRUCTION TEXT** |  | | |
| *Requirements - 50 words or less* | Example:  [Organization name] welcomes individuals in the community who want to support our efforts through volunteering.  We offer volunteer opportunities in the areas of tutoring, mentoring, coaching, special events, administrative support, and more. Please complete and submit the Volunteer Inquiry Form and someone will contact you within 7 business days.  Thank you again for your interest in [Organization name]. |
| [enter content here] |
| |  |  | | --- | --- | | **PERSONAL DATA** |  | | |
| *REQUIRED* | This information is standard and *required* on the Volunteer Inquiry Survey. |
| Title  First Name  Last Name  Preferred Email  Daytime telephone number  Home Address, City, State, Zip |
| *Below are the suggested survey questions. 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** |  | | |
| *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 did you learn about [Organization name]?**   1. A friend or colleague 2. School 3. Radio 4. Newspaper 5. TV 6. Other \_\_\_\_\_\_\_\_\_\_\_\_ |
| |  |  | | --- | --- | | **QUESTION 2** |  | | |
| *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) |
| **Why do you want to volunteer at [Organization name]?**  [Fill in the blank] |
| |  |  | | --- | --- | | **QUESTION 3** |  | | |
| *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 can you volunteer?**   1. Once a year 2. Once a month 3. Once a week 4. As often as I can 5. Other |
| |  |  | | --- | --- | | **QUESTION 4** |  | | |
| *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) |
| **Have you ever volunteered at [Organization name]?**   1. Yes 2. No |
| |  |  | | --- | --- | | **QUESTION 5** |  | | |
| *Requirements – limit your question to one, succinct sentence* | Your organization might have unique information it needs to collect from prospective volunteers, if you need to add an additional question, please fill in the blank to the left. |
| [Enter content here] |
| **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:  Thank you again for your interest in volunteering at [Organization name]. Through the dedication of our volunteers, we can broaden our impact and change the future of [community name].  Please tell a friend about our organization or join us on Facebook and help us spread the news about the great work we’re doing.  Someone will contact you within 7 business days.  Thanks!  Return to our homepage. |
| [enter content here] |