Palestinian Central Bureau of Statistics

Palestinian Authority
The Status of Cultural Institutions
Survey, 2010
Museums

وَزَارَةُ الثَّقَافَةِ

Introductory data:

ID00	Questionnaire's serial number in the sample	☐☐☐☐	ID01	Name of institution: ……………..
ID02	Governorate: ………………… Code: ..…… ☐☐		ID03	Locality: …………… ☐☐☐☐☐☐
ID04	Division: …………………		ID05	Street: ……………….

Interview record:

IR01	Visits' schedule	Day	Month	Year	Visit number
		☐☐	☐☐	☐☐☐☐	1st visit
		☐☐	☐☐	☐☐☐☐	2nd visit
		☐☐	☐☐	☐☐☐☐	3rd visit
IR02	Total number of visits	☐			
IR03	Final result of the interview	1	Completed		
		2	Permanently closed		
		3	Temporarily closed		
		4	Repeated		
		5	Not cultural institution		
		6	Refused to cooperate		
		7	No Information		
		8	Other / specify ………………………………..		

IR04	Interviewer's name:	IR05	Interviewer's number:	☐☐☐☐
IR06	Supervisor's name:	IR07	Supervisor's number:	☐☐☐☐
IR08	Editor's name:	IR09	Editor's number:	☐☐☐☐
IR10	Coder's name:	IR11	Coder's number:	☐☐☐☐
IR12	Data entry personal name:	IR13	Data entry personal number:	☐☐☐☐

Q1	**Establishing year**	☐☐☐☐			
Q2	**Mobile:** ☐☐☐☐–☐☐☐☐☐		**Q3**	**Tel:** ☐☐–☐☐☐☐☐☐	
Q4	**Fax:** ☐☐–☐☐☐☐☐☐				
Q5	**Is the Museums have an e-mail?** 1. Yes 2. No *(go to Q7)*				☐
Q6	**E-mail:………………………………………**				
Q7	**Is the Museums have Web-site?** 1. Yes 2. No *(go to Q9)*				☐
Q8	**Web-site:…………………………………**				
Q9	**Is the Museums officially licensed?** 1. Yes 2. No				☐
Q10	**Is the Museums?** 1. independent 2. branch of other organization.				☐

	Q11	Q12	Q13	Q14	Q15	Q16
	Name	**Age**	**SEX** 1. Male 2. Female	**Qualification** 1. Lower than Secondary 2. Secondary 3. Associate diploma 4. Bachelor 5. Master 6. PhD	**Years of Experience in the museums work?**	**Position in the institution** 1. Full-time 2. Part-time
1.		☐☐	☐	☐	☐☐	☐
2.		☐☐	☐	☐	☐☐	☐
3.		☐☐	☐	☐	☐☐	☐
4.		☐☐	☐	☐	☐☐	☐
5.		☐☐	☐	☐	☐☐	☐
6.		☐☐	☐	☐	☐☐	☐
7.		☐☐	☐	☐	☐☐	☐
8.		☐☐	☐	☐	☐☐	☐
9.		☐☐	☐	☐	☐☐	☐
10.		☐☐	☐	☐	☐☐	☐
11.		☐☐	☐	☐	☐☐	☐
12.		☐☐	☐	☐	☐☐	☐
13.		☐☐	☐	☐	☐☐	☐
14.		☐☐	☐	☐	☐☐	☐
15.		☐☐	☐	☐	☐☐	☐

☐ Please check the box with X if an additional questionnaire has been used.

Q17	**Is the Museums Open?** 1. Yes 2. No		**Q18: Number of Hour**
	1. In Morning ☐		☐☐
	2. In Evening ☐		☐☐
Q19	**Who owns the building where the Museums is located?** ☐		
	1. Leased 2. Owned by the institution 3. Donated by another party 4. Others (please specify)		
Q20	**Has the building ever been renovated?** 1. Yes 2. No ☐		
Q21	**Number of Room** ☐☐		

Q22	**Number of Furnish halls**		
Q23	**Areas in square meters for halls designated for performance**		☐☐☐☐

Q24	**Is any of the following among basic requirements of the buildings? 1. Yes 2. No**		
	1. Building/ refurbishment	1. ☐	3. Furnish halls 3. ☐
	2. Building/ refurbishing playgrounds	2. ☐	4. Others (please specify) 4. ☐

Q25	**What is the basic need of most importance at the buildings?**	Answer………………………………..code **(from the options above in Q24)**	☐

Q26	**Does the local community take part in financial and in kind support of the center?** 1. Yes 2. No *(go to Q28)*	☐

Q27	**Does the local community take part in supporting the center in any of the following? 1. Yes 2. No**		
	1. Voluntary work	1. ☐	4. Financial and in kind donations 4. ☐
	2. Property/ land	2. ☐	5. Transportation 5. ☐
	3. Costs and spending	3. ☐	6. Others (please specify) 6. ☐

Q28	**What are the resources of the budget? 1. Yes 2. No**		
	1. Joining the activities of the center	1. ☐	4. NGOs 4. ☐
	2. Donations and grants from individuals	2. ☐	5. Donors 5. ☐
	3. Government agencies	3. ☐	6. Others (please specify) 6. ☐

Q29		29_1	29_2
	Exhibits?	**(for code)**	**Number**
1			☐☐☐
2			☐☐☐
3			☐☐☐
4			☐☐☐
5			☐☐☐
6			☐☐☐
7			☐☐☐
8			☐☐☐
9			☐☐☐
10			☐☐☐
11			☐☐☐
12			☐☐☐
13			☐☐☐
14			☐☐☐
15			☐☐☐
☐	Please check the box with X if an additional questionnaire has been used.		

Q30	Did you face problems? Yes 2. No *(go to Q32)*	☐
Q31	State the obstacles that face the development of the museums:	**(for code)**
	1:………………………………………………………………….	☐☐
	2:………………………………………………………………….	☐☐
	3:………………………………………………………………….	☐☐
Q32	Has the Museums prepared a study or assessed its work? 1. Yes 2. No	☐
Q33	For Interviewer: Please Fill the Following Table Regarding to Building Status: 1. Good 2. SoSo 3. Bad	
	1. Ceiling	1. ☐
	2. Walls	2. ☐
	3. Doors	3. ☐
	4. Windows	4. ☐
	5. Ground	5. ☐