



Palestinian Central Bureau of
Statistics

Palestinian Authority
The Status of Cultural Institutions
Survey, 2010
Radio and Television Stations

وزارة الثقافة

All information in this questionnaire is only for statistical purposes only. It is considered confidential in accordance with the General Statistics Law of 2000.

Introductory data:

ID00	Questionnaire's serial number in the sample	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	ID01	Name of institution:
ID02	Governorate: Code:	<input type="text"/> <input type="text"/>	ID03	Locality: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
ID04	Division:		ID05	Street:

Interview record:

IR01	Visits' schedule	Day	Month	Year	Visit number
		<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1 st visit
		<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	2 nd visit
		<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	3 rd visit
IR02	Total number of visits	<input type="text"/>			
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:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
IR06	Supervisor's name:	IR07	Supervisor's number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
IR08	Editor's name:	IR09	Editor's number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
IR10	Coder's name:	IR11	Coder's number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
IR12	Data entry personal name:	IR13	Data entry personal number:	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Q1	Establishing year	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Q2	Mobile:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Q3	Tel:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Q4	Fax:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Q5	is the Institution have an e-mail?	1. Yes 2. No (<i>skip to Q7</i>)			<input type="checkbox"/>
Q6	E-mail:.....				
Q7	is the Institution have a web-site?	1. Yes 2. No (<i>skip to Q9</i>)			<input type="checkbox"/>
Q8	Web-site:.....				
Q9	Is the Stations officially licensed?	1. Yes 2. No (<i>go to Q11</i>)			<input type="checkbox"/>
Q10	Year of licensed?	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Q11	Is the Stations?	1. independent	2. branch of other organization.		<input type="checkbox"/>
Q12	Type of the Stations?	1. Radio Stations 2. Television Stations 3. Radio and Television Stations			<input type="checkbox"/>

Employees in the Institution							
	Q13	Q14	Q15	Q16	Q17	Q18	Q19
	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 media	Position in the institution 1. Full-time 2. Part-time	Specialized in the area of work: 1. Yes 2. No
1.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
11.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
12.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
13.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
14.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
15.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="checkbox"/>	Please check the box with X if an additional questionnaire has been used.						

Q20	Hour of daily transmission?	
	Number of daily transmission in morning	1. <input type="text"/> <input type="text"/>
	Number of daily transmission in evening	2. <input type="text"/> <input type="text"/>
Q21	Who owns the building? <input type="checkbox"/>	
	1. Leased 2. Owned by the institution 3. Donated by another party 4. Others (please specify)	
Q22	Has the building ever been renovated? 1. Yes 2. No <input type="checkbox"/>	
Q23	Number of Room <input type="text"/> <input type="text"/>	
Q24	Number of Furnish halls <input type="text"/>	
Q25	Area of Building <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Q26	Number of Studios in Stations <input type="text"/> <input type="text"/>	
Q27	Is there Sharing program with other? 1. Yes 2. No <input type="checkbox"/>	
Q28	Is the Station transmission local program? 1. Yes 2. No <input type="checkbox"/>	
Q29	Percentage of production of local program <input type="text"/> <input type="text"/> %	
Q30	Is local program production from the Station? 1. Yes 2. No (go to Q32) <input type="checkbox"/>	
Q31_1:	Is the following production of local program 1. Yes 2. No	
	<i>If the answer is No, skip to next item</i>	
	1. Political programs	1. <input type="checkbox"/>
	2. Entertaining programs	2. <input type="checkbox"/>
	3. Religious programs	3. <input type="checkbox"/>
	4. cultural programs	4. <input type="checkbox"/>
	5. educational programs	5. <input type="checkbox"/>
	6. Social programs	6. <input type="checkbox"/>
	7. Health programs	7. <input type="checkbox"/>
	8. Children programs	8. <input type="checkbox"/>
	9. advertisement	9. <input type="checkbox"/>
10. Others (please specify)	10. <input type="checkbox"/>	
Q31_2:	average number of monthly hour	
	1.	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>
	2.	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>
	3.	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>
	4.	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>
Q32	Is the following reason for not production local program ? 1. Yes 2. No	
	1. No Need (Alternative Source)	1. <input type="checkbox"/> 4. Shortage of Financial 4. <input type="checkbox"/>
	2. No specialized staff	2. <input type="checkbox"/> 5. Others (please specify) 5. <input type="checkbox"/>
	3. Shortage of equipment	3. <input type="checkbox"/>
	Answer.....code	
Q33	Main reason for not producing local programs (from the options above in Q32) <input type="checkbox"/>	
Q34	Does the local community take part in financial and in kind support of the Station? 1. Yes 2. No (go to Q37) <input type="text"/> <input type="text"/>	
Q35	Does the local community take part in supporting the Station in any of the following? 1. Yes 2. No	
	1. Voluntary work	1. <input type="checkbox"/> 4. Financial and in kind donations 4. <input type="checkbox"/>
	2. Property/ land	2. <input type="checkbox"/> 5. Others (please specify) 5. <input type="checkbox"/>
	3. Covering Expenditures	3. <input type="checkbox"/>

Q36	What are the resources of the budget? 1. Yes 2. No	
	1. Fees for advertising	1. <input type="checkbox"/> 4. NGOs 4. <input type="checkbox"/>
	2. Donations and grants from individuals	2. <input type="checkbox"/> 5. Donors 5. <input type="checkbox"/>
	3. Government agencies	3. <input type="checkbox"/> 6. Others (please specify) 6. <input type="checkbox"/>
Q37	Did you face problems? 1. Yes 2. No (<i>go to Q39</i>)	
Q38	State the obstacles that face the development of the Stations?	(for code)
	1:.....	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	2:.....	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
	3:.....	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Q39	Has the Stations prepared a study or assessed its work? <input type="checkbox"/>	
Q40	For Interviewer: Please Fill the Following Table Regarding to Building Status: 1. Good 2. SoSo 3. Bad	
	1. Ceiling	1. <input type="checkbox"/>
	2. Walls	2. <input type="checkbox"/>
	3. Doors	3. <input type="checkbox"/>
	4. Windows	4. <input type="checkbox"/>
	5. Ground	5. <input type="checkbox"/>