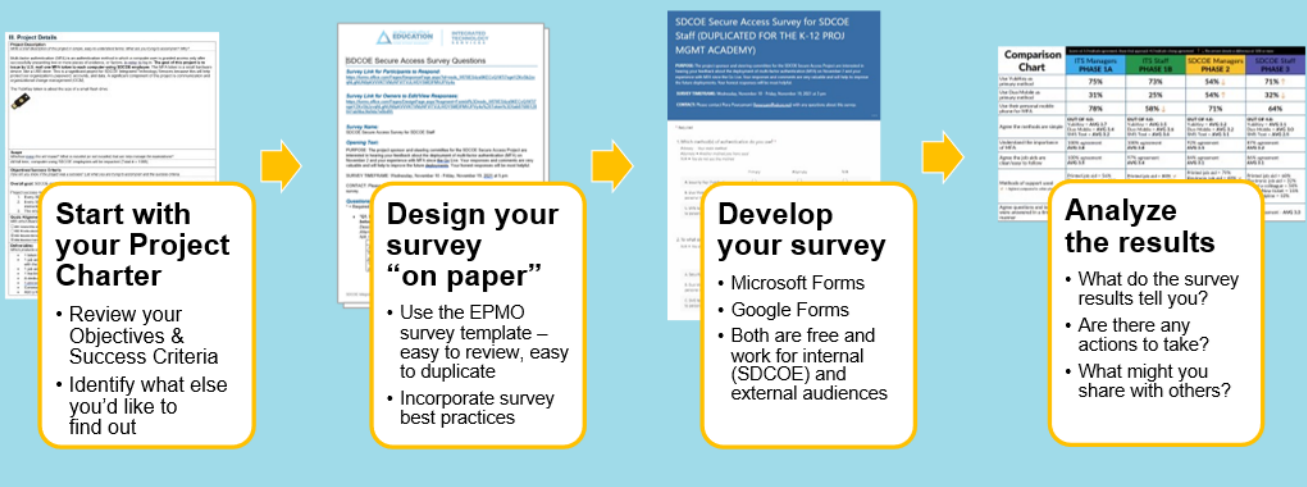


STAKEHOLDER SURVEY

Our recommendations...
SDCOE EPMO Survey Tips

Start with your Project Charter

- Review your Objectives & Success Criteria
- Identify what else you'd like to find out

Design your survey "on paper"

- Use the EPMO survey template – easy to review, easy to duplicate
- Incorporate survey best practices

Develop your survey

- Microsoft Forms
- Google Forms
- Both are free and work for internal (SDCOE) and external audiences

Analyze the results

- What do the survey results tell you?
- Are there any actions to take?
- What might you share with others?

A survey helps you assess project success from your stakeholders' perspective. It helps you measure how well you met your goals, gather insights, and inform your final report. Use a survey after project implementation or after key phases.

Things to Consider Before Creating Your Project Survey

- What do I want to learn from this survey?** Think about project success, challenges, or user experience. TIP: Include the Objectives & Success Criteria you listed in the Project Charter.
- Who should take the survey?** (Stakeholders, end users, project team, etc.)
- Which questions should I ask?** Keep questions clear, neutral, and focused.
- Will I include both quantitative (ratings) and qualitative (open-ended) questions?**
- How long should the survey be to respect people's time?**
- What tool will I use to build the survey?** (Microsoft Forms, Google Forms, etc.)
- Who can help me preview/test the survey before sending it out?**
- How will I analyze and use the results?**
- Who will I share the results with, and how will they be documented?** (Final report, project artifacts, lessons learned, etc.)

Quantitative vs. Qualitative Questions

Quantitative Questions: These are closed-ended questions that give you measurable data, like numbers, ratings, or yes/no answers. Examples: “Rate your satisfaction (1-4)” “Which department are you in? (dropdown list)”

Qualitative Questions: These are open-ended questions that let people share their thoughts in their own words, giving you insights, stories, or suggestions. Examples: ““What could we improve next time?” “Please explain why you selected that value.”

Sample Survey Design Document

COPY/PASTE INTO A WORD DOC

Filename: Survey Design Doc for [Project Name]

Survey Questions for [Project Name]

Links

- Survey Link for Participants to Respond: X
- Survey Link for Owners to Edit/View Responses: X

Opening Text:

- Survey Name: X
- Purpose: X
- Survey Timeframe: X
- Contact: X

Questions

[Insert questions and answer sets here.]

Settings

Thank You Message (Upon Submit)

Settings

- Only people in my organization can respond = X
- Record name = X
- One response per person = X
- End date = X/XX/XX at X:XX pm
- Allow receipt of responses after submit = X

See the next pages for guidance on how to fill in your survey design document.

Survey Design Document

Survey link to email or publish

**Survey link for Owners only –
DO NOT EMAIL THIS LINK!**

Survey Name

- Seen at the top of the screen when people take the survey

Opening Text

- Purpose, timeframe, contact info
- Displayed at the top of your survey
- You can include it in your email message

[Insert Project Name] Survey Questions

Survey Link for Participants to Respond:
[Insert Link]

Survey Link for Owners to Edit/View Responses:
[Insert Link]

Survey Name:
[Insert Project Name] Survey

Opening Text:
 PURPOSE: The ITS division is interested in hearing your feedback about the [Insert Project Name]. [Insert Purpose of Project]. How did we do? Your input will help us improve our service and future projects.
 SURVEY TIMEFRAME: [Insert Date Range]
 CONTACT: Please contact [Insert Name] ([Insert Email Address]) with any questions about this survey.

Questions:
* = Required

- *Q1. Which division are you in? [DROP-DOWN]
 - Administration
 - Business Services
 - Human Resource Services
 - Innovation
 - Integrated Technology Services
 - Learning and Leadership Services
 - Student Services and Programs
- *Q2. Which training opportunities did you participate in between [Insert Start Month] and [Insert End Month]? (Mark all that apply) [MULTIPLE CHOICE]
 - One-hour online live training in [Insert Month] to learn the basics
 - One-hour online live training in [Insert Month] to learn tips and tricks
 - Self-Study – Read a job aid
 - Self-Study – Watched a recorded video
 - COMET workshop in [Insert Month] to learn about the project rollout
 - Other _____
 - None of these

Survey Questions

- Write your survey questions, the item type, and the choices
- **Multiple Choice** – if 4 or fewer choices, generally present as radio buttons; for longer lists, use dropdown
- **Likert Scale (on a scale of 1-4, for example...)** – consider how/if you will use “Neutral” as a value; use N/A if there is a chance the question won’t pertain to the respondent
- **Text Box** – for open-ended responses
- **Required?** – Identify which questions are required versus optional; you might want to label the item “OPTIONAL” for the optional ones

[Insert Project Name] Survey Questions

Survey Link for Participants to Respond:
[Insert Link]

Survey Link for Owners to Edit/View Responses:
[Insert Link]

Survey Name:
[Insert Project Name] Survey

Opening Text:
 PURPOSE: The ITS division is interested in hearing your feedback about the [Insert Project Name]. [Insert Purpose of Project]. How did we do? Your input will help us improve our service and future projects.
 SURVEY TIMEFRAME: [Insert Date Range]
 CONTACT: Please contact [Insert Name] ([Insert Email Address]) with any questions about this survey.

Questions:
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- *Q1. Which division are you in? [DROP-DOWN]
 - Administration
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 - Integrated Technology Services
 - Learning and Leadership Services
 - Student Services and Programs
- *Q2. Which training opportunities did you participate in between [Insert Start Month] and [Insert End Month]? (Mark all that apply) [MULTIPLE CHOICE]
 - One-hour online live training in [Insert Month] to learn the basics
 - One-hour online live training in [Insert Month] to learn tips and tricks
 - Self-Study – Read a job aid
 - Self-Study – Watched a recorded video
 - COMET workshop in [Insert Month] to learn about the project rollout
 - Other _____
 - None of these

Thank You Message

- Displayed on screen after the person submits their survey

Settings

- Review the settings, take a screenshot
- For internal surveys, use “Only people in my organization can respond” and turn on “Record name” (if it’s not anonymous) and “One response per person”
- **IMPORTANT:** If this is for people outside of SDCOE, make sure you set it to “Anyone can respond” – you might want/need to add Name/Organization questions
- If it’s important to close (lock) your survey, set an end date and time

Thank You Message (Upon Submit):

Thank you for providing us your feedback about the [Insert Project Name]. All responses will be reviewed by our project team. Your input will help us improve our service and future projects. If you have any questions about this survey, please contact [Insert Project Manager's Name], [Insert Project Manager's Job Title], [Insert Department Name].

Settings (Adjust As Needed):

Who can fill out this form

- Anyone can respond
- Only people in my organization can respond
 - Record name
 - One response per person
- Specific people in my organization can respond

Customize thank you message

Thank you for providing us your feedback about the Unified Communications (Microsoft Teams) Project. All responses will be reviewed by our project team. Your input will help us improve our service and future projects. If you have any questions about this survey, please contact Peyri Herrera, Sr. Director, Enterprise Project Management Office (EPMO).

Response receipts

- Allow receipt of responses after submission
- Get email notification of each response

Adobe Sign Implementation Project Survey Questions

Survey Link for Participants to Respond:

<https://forms.office.com/X>

Survey Link for Owners to Edit/View Responses:

<https://forms.office.com/Pages/DesignPageABCDE> (DO NOT DISTRIBUTE THIS LINK – ONLY FOR PROJECT TEAM)

Survey Name:

Adobe Sign Implementation Project Survey

Opening Text:

PURPOSE: The ITS division is interested in hearing your feedback about the Adobe Sign Implementation Project to implement the Adobe Sign software across the organization. How did we do? Your input will help us improve our service and future projects.

SURVEY TIMEFRAME: Monday, September 19 - Friday, September 23, 2022 at 5 pm

CONTACT: If you have any specific comments or concerns you would like to address outside of this survey, please contact Reesa Fickett.

Questions

* = Required

- ***Q1. Which division are you in? [DROP-DOWN]**
 - Administration
 - Business Services
 - Human Resource Services
 - Innovation
 - Integrated Technology Services
 - JCCS
 - Learning and Leadership Services
 - Student Services and Programs

- ***Q2. On a scale of 1 star (lowest) to 5 stars (highest), how would you rate the level of support you received during the project? [RATING SCALE: STARS]**

- ***Q3. How did you receive support/information during the project? Mark all that apply. [MULTIPLE CHOICE]**
 - 1:1 meetings with App Dev team (Haison, Ivan, Ruaa, Angela)
 - Division Lead
 - Office Hours
 - Others in your division/unit
 - SDCOE Learning Hub > Adobe Acrobat Sign
 - Status Reports
 - Trainings
 - N/A; I did not receive support/information
 - Other _____

- ***Q4. Did you attend Office Hours? [MULTIPLE CHOICE]**
 - Yes
 - No

- **Q5. If you attended Office Hours, please let us know what you found helpful or would like to see improved. (OPTIONAL) [TEXT BOX]**

• ***Q6. Adobe Sign... [LIKERT SCALE]**

	4 - Strongly Agree	3 - Agree	2 - Disagree	1 - Strongly Disagree	N/A - Not Applicable
A. Reduces paper waste					
B. Reduces printing costs					
C. Reduces time spent tracking form status					
D. Improves accuracy and compliance					

• ***Q7. What 2 adjectives would you use to describe using Adobe Sign?**

Please separate the adjectives with a comma. Examples: quick, easy [TEXT BOX]

• **Q8. Do you have any additional comments or questions about the project? Is there a particular success story you are willing to share? (OPTIONAL) [TEXT BOX]**

Thank You Message (Upon Submit):

Thank you for providing us your feedback about the Adobe Sign Implementation Project. All responses will be reviewed by our project team. Your input will help us improve our service and future projects. If you have any questions about this survey, please contact Reesa Fickett, Sr. Project Manager, Enterprise Project Management Office (EPMO).

Settings

- Only people in my organization can respond = YES
- Record name = YES
- One response per person = YES
- End date = 9/23/22 at 5 pm
- Allow receipt of responses after submit = YES