

**CREATIVE COMMUNITIES PROGRAMME: ARTIST SURVEY**

This questionnaire aims to see what impact our project has had on you, working as part of the project delivery team.

As our project is supported by Hull 2017, there are also a few questions that will help them to evaluate the impact of the year that we have been asked to include. It should take no more than five minutes to complete.

Please be assured that all responses provided to this questionnaire are anonymised for the purposes of evaluation and treated with the strictest confidence. No names will be assigned to the results. Hull 2017 and all evaluation partners adhere to the Market Research Society's Code of Conduct and follow the data protection principles set out in the Data Protection Act 1998.

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1. **On a scale of 0-10, where 0 is 'Not at all' and 10 is 'Completely', how much did Hull being UK City of Culture 2017 influence your decision to work on [Hear in Hull]?**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **0 -**  **Not at all** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10 -**  **Completely** |
| 🞏 | 🞏 | 🞏 | 🞏 | 🞏 | 🞏 | 🞏 | 🞏 | 🞏 | 🞈 | 🞏 |

1. **Has working on [Hear in Hull]?] enabled you to build new relationships with other individuals and / or organisations you have not come across before (e.g. other creatives, artists, professionals, museums, archives)?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 🞈 | Yes | 🞏 | No |  |  |  |

1. **Has working on [Hear in Hull]?] enabled you to develop existing relationships with other individuals and / or organisations (i.e. a deepening of those partnerships that pre-date the project)?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 🞏 | Yes | 🞈 | No |  |  |  |

1. **Have you increased existing skills / knowledge through working on []?**

|  |  |
| --- | --- |
| 🞈 | Yes, I have increased existing skills / knowledge |
| 🞏 | Not sure |
| 🞏 | No, I have not increased existing skills / knowledge |

1. **Have you gained new skills / knowledge through working on [Hear in Hull]?**

|  |  |
| --- | --- |
| 🞈 | Yes, I have gained new skills / knowledge |
| 🞏 | Not sure |
| 🞏 | No, I have not gained new skills / knowledge |

1. **Which of the following skills / knowledge do you feel you have gained or increased as a result of working on this project?**(Please tick **all** that apply)

|  |  |
| --- | --- |
| 🞈 | Project Development |
| 🞈 | Creative / Artistic skills (e.g. art forms, artistic techniques) |
| 🞏 | Museums, Libraries and Archive skills (e.g. researching, cataloguing, conservation, interpretation) |
| 🞏 | Project Management |
| 🞏 | Audience Development |
| 🞏 | Marketing and / or Social Media |
| 🞈 | Production and / or Technical skills |
| 🞏 | Health and Safety |
| 🞏 | None of the above |
| 🞏 | Other (please specify below) |
|  |  |

1. **Thinking of your experience on [Hear in Hull], how has the way you would describe Hull to someone else changed, if at all?**(Please select **one** answer only)

|  |  |
| --- | --- |
| 🞈 | I would speak more positively about Hull to someone else, as a result of my experience working on **[Hear in Hull]** |
| 🞏 | I would not change the way I describe Hull to someone else, as a result of my experience working on **[insert name of event]** |
| 🞏 | I would speak more negatively about Hull to someone else, as a result of my experience working on **[insert name of event]** |

**NB: If your project does not present or explore history or heritage then delete Q9 to Q11.**

1. **Have you worked with heritage or commemoration as a source of inspiration for a project before?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 🞏 | Yes | 🞈 | No |  |  |  |

**ABOUT YOU (NB: This should also start on a separate page)**

The following information is to enable us to understand the diversity of our creative teams. Please be assured that this information will be treated sensitively. It will remain completely anonymous and will not be linked to any individual.

1. **What is your post code?**(This will be used for evaluation purposes only, to map where people have come from to work on projects). If you are from outside the UK, please enter your country of residence.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| HU17 7RL | |  |  | |
|  | |  | | |  | |  |  |

1. **Which of the following best describes your employment status?**   
   (Please select **one** answer only)

|  |  |  |  |
| --- | --- | --- | --- |
| 🞈 | Employed / working full or part time | 🞏 | Unable to work |
| 🞏 | Self-employed | 🞏 | Retired |
| 🞏 | Unemployed | 🞏 | Student |
| 🞏 | On a government scheme for employment training | 🞏 | Prefer not to say |
| 🞏 | Looking after family / home |  |  |

1. **How would you define your gender?**(Please select **one** answer only)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| 🞈 | Male | 🞏 | Gender non-conforming | 🞏 | Transgender |  |
| 🞏 | Female | 🞏 | Prefer not to say |  |  |

1. **How would you define your ethnic background?**(Please select **one** answer only)

|  |  |
| --- | --- |
| 🞈 | White: English / Welsh / Scottish / Northern Irish |
| 🞏 | White: Irish |
| 🞏 | White: Polish |
| 🞏 | White: any other white background |
| 🞏 | Mixed/multiple ethnic groups: White and Black Caribbean |
| 🞏 | Mixed/multiple ethnic groups: White and Black African |
| 🞏 | Mixed/multiple ethnic groups: White and Asian |
| 🞏 | Mixed/multiple ethnic groups: Any other Mixed/multiple ethnic background |
| 🞏 | Asian/Asian British: Bangladeshi |
| 🞏 | Asian/Asian British: Indian |
| 🞏 | Asian/Asian British: Pakistani |
| 🞏 | Asian/Asian British: Chinese |
| 🞏 | Asian/Asian British: Any other Asian background |
| 🞏 | Black/African/Caribbean/Black British: African |
| 🞏 | Black/African/Caribbean/Black British: Caribbean |
| 🞏 | Black/African/Caribbean/Black British: Any other Black/African/Caribbean background |
| 🞏 | Other: Arab |
| 🞏 | Other: Any other ethnic background |
|  | *Please specify your ethnic background in the box below if you wish:* |
|  |  |

1. **Which of the following age groups are you?**(Please select **one** answer only)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 🞏 | 16-17 years | 🞏 | 18-19 years | 🞏 | 20-24 years |
| 🞏 | 25-29 years | 🞏 | 30-34 years | 🞏 | 35-39 years | |
| 🞈 | 40-44 years | 🞏 | 45-49 years | 🞏 | 50-54 years | |
| 🞏 | 55-59 years | 🞏 | 60-64 years | 🞏 | 65-69 years | |
| 🞏 | 70-74 years | 🞏 | 75+ years | 🞏 | Prefer not to say | |

1. **Are your day-to-day activities limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months?**(Please select **one** answer only)

|  |  |  |  |
| --- | --- | --- | --- |
| 🞏 | Yes – limited a lot | 🞏 | Yes – limited a little |
| 🞈 | No | 🞏 | Prefer not to say |