

South Carolina College Personnel Association (SCCPA) - 2001 Survey

The South Carolina College Personnel Association (SCCPA) strives to better serve the professional Student Affairs community of South Carolina. To accomplish this goal, SCCPA collects data from its membership bi-annually.

<p>Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male</p> <p>Race: <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> Black or African American <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Multi-racial <input type="checkbox"/> White or Non-Hispanic <input type="checkbox"/> Other</p> <p>Years In Student Affairs: <input type="checkbox"/> Graduate Student <input type="checkbox"/> 0 – 5 <input type="checkbox"/> 6 – 10 <input type="checkbox"/> 11 – 15 <input type="checkbox"/> 16 – 20 <input type="checkbox"/> 21 – 25 <input type="checkbox"/> 26+</p> <p>Work Setting: <input type="checkbox"/> 4 year private</p>	<p style="text-align: right;"><input type="checkbox"/> 4 year public <input type="checkbox"/> 2 year private <input type="checkbox"/> 2 year public</p> <p>Size of Institution: <input type="checkbox"/> 0 - 500 <input type="checkbox"/> 500-1000 <input type="checkbox"/> 1001-2000 <input type="checkbox"/> 2001-3500 <input type="checkbox"/> 3501-5000 <input type="checkbox"/> 5001-7500 <input type="checkbox"/> 7501-10,000 <input type="checkbox"/> 10,000+</p> <p>Position Level: <input type="checkbox"/> Graduate Student <input type="checkbox"/> Entry Level <input type="checkbox"/> Mid Level <input type="checkbox"/> Senior Level</p>
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Please indicate the number of years you have been a member of SCCPA (if none, please indicate): _____

What topics or professional areas of focus are of most interest to you? (please check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Academic Affairs/Administration/Faculty | <input type="checkbox"/> Gay/Lesbian/Transgendered Students |
| <input type="checkbox"/> Admissions | <input type="checkbox"/> Greek Life |
| <input type="checkbox"/> Adult Learners | <input type="checkbox"/> International Students |
| <input type="checkbox"/> Alcohol and Other Drug Issues | <input type="checkbox"/> Judicial Affairs/Legal Issues |
| <input type="checkbox"/> Assessment and Research | <input type="checkbox"/> Multicultural Affairs/Services |
| <input type="checkbox"/> Campus Ministry | <input type="checkbox"/> Orientation/New Student Programs |
| <input type="checkbox"/> Career Development/Career Services | <input type="checkbox"/> Professional Preparation Programs |
| <input type="checkbox"/> Community Service/Service Learning | <input type="checkbox"/> Residence Life/Housing |
| <input type="checkbox"/> Commuter Students | <input type="checkbox"/> Safety/Security |
| <input type="checkbox"/> Counseling/Psychological Services | <input type="checkbox"/> Student Activities/Student Unions |
| <input type="checkbox"/> Disability Services | <input type="checkbox"/> Wellness/Health Education |
| <input type="checkbox"/> Financial Aid | <input type="checkbox"/> Other: _____ |

Why did you join SCCPA? (please check all appropriate answers)

- A colleague encouraged me to join
- I received an application in the mail
- I joined when I registered for a drive-in workshop
- I joined when I registered for the annual state conference
- I wanted to be professionally involved at the state level
- Other (please explain) _____

Do you attend and participate in SCCPA activities?

- I am a new member
- Yes, I am a very active member
- Yes, but not on a regular basis
- No, I find it difficult to find the time to attend
- No, I do not receive any professional support to attend activities
- No, I am not interested in the activities typically offered
- Other (please explain) _____

If you answered "Yes" to the question above, what activities do you participate in? (please check all appropriate answers)

- SCCPA drive-in workshops/conferences
- Annual State Conference
- Read the newsletter or journal
- Other (please explain) _____

Do you read the SCCPA on-line journal, the Palmetto Practitioner?

- Yes
- No

If yes, what do you find most beneficial about the journal? _____

Do you read the SCCPA newsletter?

- Yes
- No

If yes, what do you find most beneficial about the newsletter? _____

What suggestions do you have regarding SCCPA publications? _____

Do you feel that SCCPA is welcoming to all student affairs colleagues (men, women, gay/lesbian, people of color, etc.)?

- Yes
- No (please tell us why) _____

Do you feel that SCCPA is welcoming to all functional areas of student affairs?

- Yes
- No (please tell us why) _____

Are you a member of ACPA(American College Personnel Association)?

- Yes
- No

In what other professional organizations do you have membership? _____

What influences your decision to attend a conference? (please check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Cost | <input type="checkbox"/> Session topics |
| <input type="checkbox"/> Keynote Speakers | <input type="checkbox"/> Time of year |
| <input type="checkbox"/> Length of Conference | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Location | |

Listed below are services currently provided by SCCPA to its members. Which do you think should be continued?

- | | |
|---|--|
| <input type="checkbox"/> Annual Awards | <input type="checkbox"/> Professional Development Sessions |
| <input type="checkbox"/> Fall Drive-In Conference | <input type="checkbox"/> focused on special interest areas |
| <input type="checkbox"/> Newsletter | <input type="checkbox"/> Spring Conference |
| <input type="checkbox"/> Palmetto Practitioner | <input type="checkbox"/> State Student Affairs Directory |
| <input type="checkbox"/> Committees | <input type="checkbox"/> Website/Listserv |

Please list any additional services you would like to see SCCPA consider adding for its members.

How well do you feel your professional needs and issues are addressed by: (please respond to each item)

1 = Ineffective 2 = Needs Improvement 3 = Meets Expectations 4 = Exceeds Expectations 5 = Highly Effective

SCCPA mission, goals and objectives	1	2	3	4	5
SCCPA committees	1	2	3	4	5
SCCPA annual conference program/activities	1	2	3	4	5
SCCPA newsletter and journal	1	2	3	4	5
SCCPA website/listserv	1	2	3	4	5

Do you feel you have enough information about SCCPA's role/mission, organization, services, and opportunities?

- Yes
 No (*please list below what areas you would like to know more about*)
-
-

Do you plan to renew your membership for 2002-2003?

- Yes
 No (*please tell us why*) _____
-
-

What issues/concerns do you think that SCCPA should address

A. Within the next year?

B. Within the next three years?

C. Within the next 5 years?

Are there any general comments you would like to add about SCCPA? _____

Thank you so much for completing this survey. Your feedback was most welcome and will be forwarded to the SCCPA Executive Board.

Please survey return to:

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