



**International Partnerships Among Museums
2003 - 2005 Cycle**

Final Report

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- †† This report must be submitted within 30 days of completion of all travel.
 - †† Participants should reserve time to work together on their reports at the end of the second partner's visit.
 - †† This information will be used in IPAM's reports to its funders.
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Participant: _____

Participant's Position: _____

Participant's Institution: _____

City: _____ State/Country: _____

Dates of Travel: _____

Partner Participant: _____

Partner's Position: _____

Partner's Institution: _____

City: _____ State/Country: _____

Dates of Travel: _____

Participant's signature: _____ Date: _____

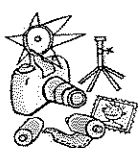
I have read and agree with this report.

Director's signature: _____ Date: _____

FINAL REPORT

Please answer all of the following questions. Be specific in your description of projects and activities; avoid overly-technical terminology.

1. Provide a brief summary of the original project as stated in your Phase II application and describe any changes to your goals and objectives that occurred during the exchange.
2. Describe the project-related activities in which you engaged that helped you and your partner achieve or make progress towards the objectives of your IPAM project.
3. Describe the impact of the IPAM program on your institution and its community.
Focus on:
 - How your IPAM project relates to the role of your institution in the community.
 - How your participation in the IPAM program furthered your institution's goals.
 - How other staff members of your institution, as well as other institutions in your community, were able to become involved in your IPAM project.
 - How your participation in the IPAM program increased international knowledge and awareness in your institution and its community.
4. List any plans to continue the working relationship between your institution and your IPAM partner. Include ongoing activities related to your project and ideas for other collaborative activities or projects in the future.
5. List and include when possible any press releases, articles, and TV or radio interviews related to your partnership.



* We strongly encourage the submission of any **photos, video, or digital images** from your exchange. We would particularly like to receive "action shots" of both IPAM participants working together on-site. With your permission, submitted items will be used to promote project outcomes to IPAM funders and other museums.

PROGRAM EVALUATION

Please answer all of the following questions. Responses will be used to identify areas in which the IPAM program may be improved and to evaluate the program's effectiveness in meeting its goals of facilitating international linkages, providing a basis for long-term cooperation between participating institutions, and increasing international awareness in their communities.

1. What was the subject of your IPAM project? (Choose the one that best applies)

- | | |
|---|--|
| <input type="checkbox"/> a. administration | <input type="checkbox"/> f. exhibit development and design |
| <input type="checkbox"/> b. collections stewardship | <input type="checkbox"/> g. interpretation |
| <input type="checkbox"/> c. community outreach | <input type="checkbox"/> h. marketing |
| <input type="checkbox"/> d. cultural tourism | <input type="checkbox"/> i. research |
| <input type="checkbox"/> e. education | <input type="checkbox"/> j. other (specify) |
-

2. Which of the following best describes your institution's situation *before* applying to IPAM?

- a. already collaborating with our partner institution prior to the IPAM program
- b. in contact with our partner institution regarding the possibility of engaging in a collaborative project
- c. had desire to undertake an international project -- found our partner in the Phase II book

3. What is your institution's operating budget?

- a. less than \$180,000
- b. \$180,000 to \$750,000
- c. \$750,000 to \$2.5 million
- d. over \$2.5 million

4. Was your IPAM project part of a larger project or initiative? No Yes

a. If so, did your project receive funding from other sources? No Yes

b. Did receipt of an IPAM grant increase your ability to raise these funds? No Yes

5. Was the funding provided through the IPAM program sufficient to meet your living expenses during your program? No Yes

6. Please check the response that most accurately describes **your experience at your host institution.**

	<i>Strongly Agree</i>		<i>Neutral</i>		<i>Strongly Disagree</i>
	1	2	3	4	5
a. My partner was a good match for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The host staff was welcoming and supportive.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. My host institution was prepared for my visit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. My accommodation arrangements were satisfactory.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Language barriers were not an issue.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I felt safe throughout my visit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. The length of the exchange was adequate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Please expand on any concerns identified above and offer suggestions on possible solutions.					

7. Please check the response that most accurately describes **your partner's visit to your institution.**

	<i>Strongly Agree</i>		<i>Neutral</i>		<i>Strongly Disagree</i>
	1	2	3	4	5
a. My partner was well prepared for his/her visit.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. I easily arranged accommodation for my partner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The responsibilities associated with hosting my partner were reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Language barriers were not an issue.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. My partner's visit was beneficial to my institution.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. The length of the exchange was adequate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Please expand on any concerns identified above and offer suggestions on possible solutions.					

8. Please check the response that most accurately completes the following statements:

What is the likelihood of your institution...	<i>Highly Likely</i>	<i>Possible</i>			<i>Not Likely</i>
	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
a. continuing activities directly related to your IPAM project?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. initiating a similar partnership with another institution?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. proceeding onto other international projects?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. re-applying for another IPAM grant in the future?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. What is the level of impact your IPAM partnership had on the following?

	<i>Extensive</i>	<i>Moderate</i>		<i>Almost None</i>	
	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
a. Your professional life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Your institution as a whole	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Your institution's community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Please check the response that most accurately describes your **overall impressions of the IPAM experience.**

	<i>Strongly Agree</i>	<i>Neutral</i>			<i>Strongly Disagree</i>
	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
a. The IPAM program provided a unique opportunity to execute a project that otherwise would not have been possible.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. My institution benefited from IPAM.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The program was mutually beneficial to both institutions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I was satisfied with the IPAM program.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. The IPAM program exceeded my expectations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. I would recommend the IPAM program to a colleague or other institution.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

11. Please check the response that most accurately describes your reaction to the following statements regarding the **management** of the IPAM program.

	<i>Strongly Agree</i>		<i>Neutral</i>		<i>Strongly Disagree</i>
	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
a. The two-phase application process was easy to understand.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. The length of time in between deadlines was reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. The information contained in the Phase II Book accurately represented potential partner institutions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. I received timely updates regarding my progress in the selection process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. The instructions and forms were clear.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Communication with IPAM staff was smooth and efficient.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. The travel arrangements made for me by IPAM staff were satisfactory.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. The IPAM staff was involved and helpful throughout the process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. The embassy or consulate staff was involved and helpful throughout the process.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. What suggestions can you offer to address any management concerns you identified?					

12. We welcome any comments on specific issues that can aid the IPAM staff in an objective assessment of this program.