

**ORGANIZATIONAL ASSESSMENT©**

**ADMINISTRATION AND MANAGEMENT /  
SPACE, FACILITIES, SYSTEMS, TECHNOLOGY QUESTIONNAIRE**

To be completed by:

- Executive

1. Does the organization keep detailed records of all leased property and equipment?

Yes \_\_\_\_\_ No \_\_\_\_\_

2. Is there a detailed record of all owned property, plant and equipment?

Yes \_\_\_\_\_ No \_\_\_\_\_

3. Is there a periodic physical inventory or inspection of property, plant and equipment?

Yes \_\_\_\_\_ No \_\_\_\_\_

4. Does the organization have a regular maintenance plan for any buildings and/or vehicles?

Yes \_\_\_\_\_ No \_\_\_\_\_

5. Does the organization have an annual space and facilities plan that relates to the program plan and budget and ensures that the organization will have adequate and appropriate space and facilities for its current and anticipated programs and administrative needs?

Yes \_\_\_\_\_ No \_\_\_\_\_

6. Has an energy audit been performed within the past 12 months at each facility where the organization pays utility costs?

Yes \_\_\_\_\_ No \_\_\_\_\_

7. Does the organization use information technology to support any of the following:

Basic office functions –  
word processing, spreadsheets                      Yes \_\_\_\_\_                      No \_\_\_\_\_

Fiscal management                                      Yes \_\_\_\_\_                      No \_\_\_\_\_

Fund development/donor tracking                      Yes \_\_\_\_\_                      No \_\_\_\_\_

Internal communication, information sharing                      Yes \_\_\_\_\_                      No \_\_\_\_\_

**ADMINISTRATION AND MANAGEMENT /  
SPACE, FACILITIES, SYSTEMS, TECHNOLOGY QUESTIONNAIRE (continued)**

Research and information gathering                      Yes \_\_\_\_\_                      No \_\_\_\_\_

Client tracking / service reporting                      Yes \_\_\_\_\_                      No \_\_\_\_\_

Other: \_\_\_\_\_

8. Have computer software and hardware, telephone systems, etc. been considered for upgrading within the past two years?

Yes \_\_\_\_\_                      No \_\_\_\_\_

Please describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

9. Does the organization utilize:

e-mail                      Yes \_\_\_\_\_                      No \_\_\_\_\_

If yes, please describe and indicate who the users are: \_\_\_\_\_

\_\_\_\_\_

The Internet                      Yes \_\_\_\_\_                      No \_\_\_\_\_

If yes, please describe and indicate who the users are: \_\_\_\_\_

\_\_\_\_\_

10. Do staff receive training in the use of technology?

Yes \_\_\_\_\_                      No \_\_\_\_\_

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

11. Does the organization have a technology plan?                      Yes \_\_\_\_\_                      No \_\_\_\_\_

If yes, is it:

related to the strategic plan and budget                      Yes \_\_\_\_\_                      No \_\_\_\_\_

**ADMINISTRATION AND MANAGEMENT /  
SPACE, FACILITIES, SYSTEMS, TECHNOLOGY QUESTIONNAIRE (continued)**

updated annually	Yes _____	No _____
dealing with programmatic, administrative, connectivity and staff training issues	Yes _____	No _____
setting forth the organization's technology needs and means for meeting those needs	Yes _____	No _____

*(Any questions that were answered "no" indicate that this item should be given attention.)*