## Appendix 11: CATI Script Used to Follow-up with Nonrespondents after Wave 2

**CRT**

**FINAL DRAFT – JULY 6, 1999**

(Columns are "card/column")

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<table>
<thead>
<tr>
<th>AC</th>
<th>THE GALLUP ORGANIZATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>PROJECT REGISTRATION #114590</td>
<td>__ APPROVED BY CLIENT</td>
</tr>
<tr>
<td>NATIONAL SCIENCE FOUNDATION</td>
<td>__ APPROVED BY PROJECT MANAGER</td>
</tr>
<tr>
<td>Washington, DC</td>
<td></td>
</tr>
<tr>
<td>Study of Nonprofits Funding and Performance - Prompting Script</td>
<td></td>
</tr>
<tr>
<td>Max Larsen/Barbara Wells</td>
<td></td>
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<tr>
<td>Julie Trausch, Specwriter</td>
<td></td>
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<tr>
<td>July, 1999</td>
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</tbody>
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| I.D.#: | 0 (1-6) |

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****AREA CODE AND TELEPHONE NUMBER:**

| ____________________________ | ________________________________ | (32 - 41) |
| ____________________________ | | |

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**INTERVIEW TIME:**

| ____________________________ | (2/49 - 2/54) |
| ____________________________ | | |

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S1. **CONTACT NAME:** *(Code from "Fone" file)*

| ____________________________ | (13/12 - 13/51) |
| ____________________________ | | |

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S1a. **TITLE:** *(Code from "Fone" file)*

| ____________________________ | (14/12 - 14/66) |
| ____________________________ | | |

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S2. **ORG NAME:** *(Code from "Fone" file)*

| ____________________________ | (15/12 - 15/51) |
| ____________________________ | | |

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S3. **EIN:** *(Code from "Fone" file)*

| ____________________________ | ( / - / ) |
| ____________________________ | | |
S4. SURVEY: (Code from "Fone" file)
   1  Funder
   2  Performer  ____ ( / )

S5. PASSWORD: (Code from "Fone" file)
   ________________________________  ( / - / )  __  __

S6. ADDRESS #1: (Code from "Fone" file)
   ________________________________  (16/12 - 16/61)  __  __

S7. ADDRESS #2: (Code from "Fone" file)
   ________________________________  (22/12 - 22/51)  __  __

S8. CITY: (Code from "Fone" file)
   ________________________________  (17/12 - 17/42)  __  __

S9. STATE: (Code from "Fone" file)
   ________________________________  (17/43)  (17/44)  __  __

S10. ZIP CODE: (Code from "Fone" file)
     ________________________________  (22/52 - 22/62)  __  __

S11. PHONE NUMBER: (Code from "Fone" file)
     ________________________________  (17/50 - 17/59)  __  __

S12. FAX NUMBER: (Code from "Fone" file)
     ________________________________  (17/60 - 17/69)  __  __

S13. E-MAIL ADDRESS: (Code from "Fone" file)
     ________________________________  (18/34 - 18/73)  __  __

S14. M STATUS: (Code from "Fone" file)
    0  Non-medical
    1  Medical  ____ ( / )
S15. BRIEFING SCREEN FOR INTERVIEWER:

(If code "0" in S14:) Ask for name from "Fone" file, if available. If no name, ask to speak with the President/Executive Officer/Financial Officer.

(If code "1" in S14:) Ask for name from "Fone" file, if available. If no name ask to speak with anyone in administration.

Hello, this is __________________, from The Gallup Organization. May I please speak with (response in S1)? I am calling on behalf of the National Science Foundation. We are conducting a study for NSF about the research and development activities of nonprofit organizations.

1   Respondent available - (Continue)
4   No such person - (Thank and Terminate)
7   Respondent not available - 
   (Set time to call back)
9   (Refused) - (Thank and Terminate/ Verify name and title of person you are speaking to)  ____ ( )

1. Recently, we sent you a study questionnaire in a USPS priority mail envelope. Did you receive the questionnaire?
   1   Yes - (Skip to #6)
   2   No (Continue)
   3   Received, but misplaced (Continue)
   4   (DK) (Continue)
   5   (Refused/Reluctance expressed) - (Continue)  ____ (5/13)

2. (If code "2", "3", "4" OR "5" in #1, ask:) We would really appreciate it if you would participate in the study, and the easiest way to do that is over the Internet. I can tell you the web site address and your confidential password, OR if you prefer, I can mail you another copy of the questionnaire. Would you prefer to complete it on the Internet or on paper?
   1   Prefer Internet - (Continue)
   2   Prefer paper - (Skip to #5)
   3   (DK) - (Continue)
4. (Refused) - (Thank and Terminate/ Verify name and title of Person you are speaking to) _____ ( / )

3. (If code "1" or "3" in #2, ask:) The web site address is: (If code "1" in S4, say:) www.dot nsffunder dot gallup dot com/(If code "2" in S4, say:) www.dot nsfperformer dot gallup dot com.] Your password for access to the survey is (password from fone file).

4. I can also fax you a one page instruction sheet for completing the questionnaire over the Internet. Would you like me to fax this instruction sheet to you?
   1 Yes - (Verify fax number and Skip to #6)
   2 No (Skip to #6)
   3 (DK) (Skip to #6)
   4 (Refused) (Skip to #6) _____ ( / )

5. (If code "2" in #2, ask:) I would be happy to send you another copy of the questionnaire. Please let me verify that we have the correct mailing information. (NOTE TO SURVENT: List on screen all mailing information) (NOTE TO INTERVIEWER: Update any missing or incorrect information. Be sure to ad fax number or e-mail address. Make sure that a street address gets collected - NO P.O. Boxes. Enter address in "upper" and "lower" case letters)
   1 Information correct - (Skip to #6)
   2 Information incorrect - (Update) _____ (5/14)

CONTACT NAME:
____________________________________________________ (6/12 - 6/51)   

TITLE:
____________________________________________________ (7/12) (7/61)

ORGANIZATION NAME:
____________________________________________________ (8/12 - 8/51)

ADDRESS #1:
____________________________________________________ (9/12 - 9/61)
ADDRESS #2:  
____________________________________________________  (10/12 - 10/51)  

CITY:  
______________________________________  ______________ (11/12 - 11/51)  

STATE:  
____________________________________________________ (11/52)  (11/53)  

ZIP CODE:  
____________________________________________________ (11/55 - 11/65)  

PHONE NUMBER:  
____________________________________________________ (17/50 - 17/59)  

FAX NUMBER:  
____________________________________________________ ( /   -   /  )  

E-MAIL:  
____________________________________________________ (20/12 - 20/51)  

INTERVIEWER READ: We will be sending you a replacement questionnaire. You should receive this questionnaire within three business days.

READ: (If code "1" in #1, read:) We have not yet received this questionnaire from you.

6. Because we are collecting information that will be used by policymakers to address issues regarding the research and development activities of nonprofit organizations, it is important that we receive this questionnaire back from you as soon as possible.

VALIDATE PHONE NUMBER AND THANK RESPONDENT BY SAYING: Again, this is _____, with the Gallup Organization of _____. I would like to thank you for your time. Our mission is to “help people be heard” and your opinions are important to Gallup in accomplishing this.
INTERVIEWER I.D. #: _____(2/41-2/44)