

EXAMPLE OF POST-EVENT QUESTIONNAIRE FOR FAMILIES



THIS QUESTIONNAIRE HAS BEEN
DESIGNED, VALIDATED AND USED BY
THE FESTIVAL OF CURIOSITY

**The Festival
•f Curi•sity***



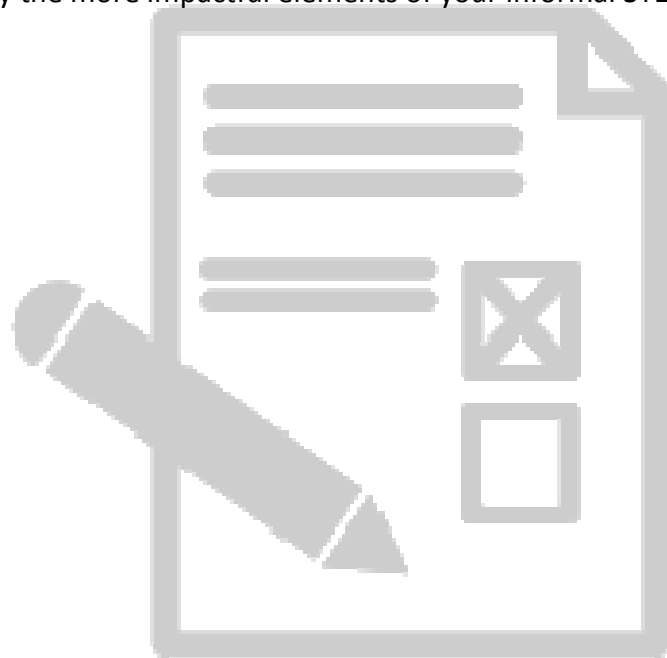
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QUESTIONNAIRE GUIDELINES TITLE: CALIBRI, CAPITAL LETTER, 13, LIGHT ORANGE BACKGROUND

The questionnaire outlined below can be delivered online to attendees of informal STEAM initiatives a number of months after the interaction, e.g. three months, to identify the longer-term impact of the initiative on self-efficacy.

In tandem with a survey for attendees directly after the event, you can use this questionnaire to understand how the self-efficacy of attendees changes over time and to identify the more impactful elements of your informal STEAM initiative.





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**MODULE TITLE: CALIBRI, CAPITAL LETTER, 13, ORANGE
BACKGROUND**

Q. Did you attend any of our events this year?

Yes

No

Q. What event did you attend?

Q. Please indicated the number of events you attended this year?

	None	1-2	3-4	5+	Can't remember
NAME OF EVENT					

Q. How many other science-related events have you attended in the past 6 months?

None

1-2

3-4

5+

Can't remember

Q. How do you rate your interest in science and technology?

Actively interested

Somewhat interested

Not very interested

Not at all interested

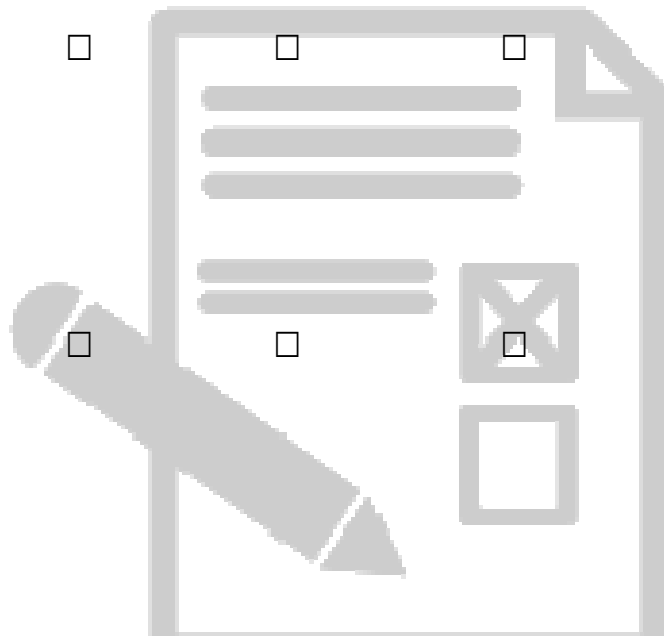
Don't know/ Not sure

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Q. Please tell us how much you agree or disagree with each of the following statements about your attendance at the Festival of Curiosity

	Strongly Agree	Somewhat Agree	Somewhat Disagree	Strongly Disagree	Don't know/Unsure
Attendance has made me curious to find out more about science in general	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance has helped me to be more confident when talking about science and technology with family and friends	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attendance has made me feel that science is relevant to my life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Q. Has the festival stimulated your curiosity or your family, friends or colleague's curiosity in science and technology in any way after the festival? If so, please share your story in a few words.

Q. Which of the following have you done as a result of attending events?

	Yes	No
Discussed ideas from festival event(s) with friends or family who have not been to the festival.	<input type="checkbox"/>	<input type="checkbox"/>
***Attended other science or technology related events or festivals	<input type="checkbox"/>	<input type="checkbox"/>



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Found out more about the topic or issue covered at this event*

**Contacted a school, college or university about doing a
science or technology course

*IF FIND OUT MORE ASK:

Q. Where did you look to find more information? (Mark all that apply)

Online

Newspapers

TV

Radio

Library

College or university

Friends, family or colleagues

Other (Specify)

****IF CONTACTED EDUCATIONAL INSTITUTION** You said you've contacted a school, college or university about doing a science or technology course, have you signed up for or started a related course?

YES

NO

*****IF ATTENDED ANOTHER SCIENCE/TECHNOLOGY EVENT OR FESTIVAL:**

Q. What kind were they?

Performance

Exhibition

Talk/debate

Workshop

Other (Specify)

Q Did the Festival events you attended prompt you to do any science related activities either at home or elsewhere.

e.g. tried an experiment with your family at home or in your community.

YES

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NO

Q Did you attend any Festival of Curiosity events with children (under 16)?

Yes

No

Q To your knowledge, what, if any, of the following have one or more of these accompanying children done since attending Festival of Curiosity event or events?

	Yes	No	Don't know/Unsure
Talked about their experience at the event to people who didn't go	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Attended other science or technology related events or festivals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Found out more about the topic or issue covered at this or other events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tried to conduct experiments or activities at home or with family and friends that they experienced at the event	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Talked about their experience at the event to people who didn't go

Attended other science or technology related events or festivals

Found out more about the topic or issue covered at this or other events

Tried to conduct experiments or activities at home or with family and friends that they experienced at the event

Q. How likely are you to attend our next event?

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- Very likely
- Quite likely
- Not very likely
- Not at all likely
- Don't know/ Not sure/ Too soon to say

Q. In a few words, what aspects of the event do you most remember?

Q. Choose 3 words to describe your experience.

Now just some questions about you.

Q. Where do you live?

- City
- Region
- Country
- Outside Ireland (EU)
- Outside Ireland (Rest of the world)

Q. Which age group do you belong to?

- 16 or under
- 17-29
- 30-45
- 46-60
- 61+

Q. Are you...?

- Male
- Female

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Q. What is your highest education qualification?

Leaving Cert (or equivalent)

Certificate/diploma

BA/BSc

Graduate diploma/ Masters

PhD

No education qualification

Other

