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| **Survey questionnaire for Better Work Jordan – Financial Manager**  Better Work Impact Assessment | |
| **Question Number/Label** | **Question/Instruction** |
| Intro | In 2008, the Better WorkProgram was introduced in apparel factories like yours. Tufts University in Medford Massachusetts (USA) has been selected by the International Labour Organization and the International Finance Corporation to conduct an impact evaluation of Better Work. |
| Purpose | The evaluation is designed to identify program impact on factory organization, productivity, profitability and business opportunities. |
| Benefit | Your participation in our evaluation will help us identify aspects of the Better Work Program that are effective and those that need to be revised. |
| Confide | All of your answers will remain confidential. Your answers will only be used to assess the effectiveness of the Better Work Program. No individual factory responses will be released. Reports based on the analysis of the data provided by factories will only summarize the responses of all participating factories. |
| Voluntary | Please understand that participation in this survey is voluntary. You may refuse to participate. |
| Risk | You may not know the answers to some of our questions. If that is the case, you can click on the red button that says “I do not know,” then click on the green forward arrow to go to the next question.    Some of our questions may make you feel uncomfortable. You can skip uncomfortable questions by clicking on the red button that says “I do not want to answer,” then click on the green forward arrow to go to the next question.  Some of our questions may have more than one right answer. In these cases, we will ask you to check all of the choices that apply to your factory.  At some points, you may feel that you answered incorrectly. To correct an answer click on the button that says “Revise Response.” To return to a previous question, click on the green back arrow. |
| Follow | After you have completed the survey you may have some questions or concerns. We will provide you with contact information for Better Work Jordan and the name of a person who can help you. |
| Co1 | Do you consent to participate in our evaluation of the Better Work Program? |
|  | 1. Yes 2. No |
|  |  |
| Decline | *If “yes” on Consent go to A01. If “no” on Consent”:* You selected that you do not want to participate. Remember, all your answers are kept confidential and are very important to us.  Do you consent to participate in our evaluation of the Better Work Program? |
|  | 1. Yes 2. No |
|  | *If “yes” on Decline go to A01. If “no” on Decline*: Thank you for your time.  *Terminate.* |
| A01 | Thank you for agreeing to participate.  Click on the green forward button to begin. |
| FID1 | In the e-mail that asked you to participate in this survey, you were given a confidential factory identification number. Please enter that number below. |
| FID2 | The number you entered is \_\_. Is this correct?  Yes  No |
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| A2 | What is your job title? Please note that if you have more than one job title we are interested in the title or responsibilities that you regard as the most important. |
|  | 1. Chief Executive/President/Vice President 2. Owner or Proprietor 3. Partner 4. Chairman of the Board of Management 5. General Director or Manager 6. Vice or Deputy General Director or Manager 7. Manager or Director 8. Deputy or Vice Manager 9. Production Manager 10. Sales Manager 11. Purchasing Manager 12. Industrial Engineer/Mechanical Engineer 13. Finance Officer 14. Human Resource Manager or Director 15. Human Resource Assistant Manager 16. Chairman of Trade Union 17. Compliance Manager |
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| B1 | What was the net book value, the value of assets after depreciation, of the following at the end of Month xx 20xx? |
|  | Machinery, vehicles, and equipment  Land and buildings |
|  |  |
| B2A | For the time period Month x to Month x 20xx, please record the number of new employees. |
|  | Newly recruited employees within the quarter  Total new employees  New male employees |
|  |  |
| B2B | For the time period Month x to Month x 20xx, please record the number of reduced employees. (Include employees that left the establishment in all cases of retirement, contract termination, fire, resign, quit…) |
|  | Total reduced employees  Reduced male employees |
|  |  |
| B2C | Please record the number of current employees hired before x Month x, 20xx. |
|  | Total employees one quarter or longer  Male employees one quarter or longer |
|  |  |
| B3 | Please record employees' compensation and the establishment's contribution to other labor payments such as an insurance or trade union fund for the time period Month x to Month x 20xx. |
|  | Employees' compensation  Enterprise's contribution to other labor payments such as an insurance or trade union fund |
|  |  |
| B4 | For the time period Month x to Month x 20xx, please provide the following information about this establishment: |
|  |  |
|  | Total cost of raw materials and intermediate goods used in production  Total cost of electricity  Total cost of communications services    Total cost of fuel  Total cost of transport for goods (not including fuel)    Total cost of water  Total cost of rental of land/building, equipment, furniture |
| Debrief | You have now completed the survey! We want to thank you very much for taking the time to answer our questions. We will keep your answers private. Your answers will only be used to assess how the Better Work Program affects factory organization and performance.  After today, you may have some questions or concerns about this survey. You can contact [contact info] to talk about your concerns. |