

SURVEY OF ORGANIZATIONAL COMMUNICATIONS

SAMPLE NETWORK  
SURVEY FROM  
"CAPITAL  
PARTNERS"

I. BACKGROUND INFORMATION

Please respond to the questions in this section by filling in the blanks as appropriate. For some questions, you may check the most appropriate response. If a question is not applicable, please write N/A and skip to the next question.

1. Your name: \_\_\_\_\_
2. Your title/position: \_\_\_\_\_
3. What is your sex ?  
☐ male ☐ female
4. What is your marital status ?  
☐ single ☐ married ☐ remarried  
☐ divorced ☐ widowed
6. When did you begin working at \_\_\_\_\_ ?  
(month/year)
7. Which area of \_\_\_\_\_ do you mainly work in ?  
(industrial, office, accounting, etc.)
8. Where is your main location ? (check one)  
☐ office ☐ \_\_\_\_\_ ☐ other \_\_\_\_\_  
☐ office ☐ office
9. Where did you work before joining \_\_\_\_\_ ?  
(name of firm)
10. When did you begin working at your previous place of employment ?  
(month/year)
11. What is your highest educational degree ?  
\_\_\_\_\_
12. What was the subject of your highest educational degree ?  
\_\_\_\_\_  
(business, economics, real estate, engineering, etc. )
13. Overall, how many years of experience do you have in the real estate industry ?  
\_\_\_\_\_
14. What do you like best about working at \_\_\_\_\_ ?  
\_\_\_\_\_
15. If there was one thing that you could change at \_\_\_\_\_ what would it be ?  
\_\_\_\_\_

II. ORGANIZATIONAL COMMUNICATIONS

The next three pages contain questions about your communications with other members of  
Please circle your response or fill in the box next to each person's  
name using the codes listed under each question.

PLEASE CONTINUE ON THE NEXT PAGE.

SURVEY OF ORGANIZATIONAL COMMUNICATIONS

		Question #1					Question #2				
		About HOW OFTEN do you have these discussions with this person in order to get your job done ?					How IMPORTANT are these discussions for getting your job done ?				
		5 = Several times a day 4 = Daily 3 = Several times a week 2 = Weekly 1 = Several times a month 0 = Monthly or less					5 = Crucial 4 = Very helpful 3 = Helpful 2 = Somewhat helpful 1 = Rarely helpful 0 = Not at all				
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PLEASE CONTINUE ON THE NEXT PAGE.

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	Question #3 Have you talked with this person about decisions to promote a leasing agent to partner?  if yes, place a X in the box	Question #4 If you had an idea for developing a property, would you feel that you should consult with this person ?  if yes, place a X in the box (If not applicable, skip to next question)	Question #5 If you wanted to use outside brokers to lease a property, would you feel you had to get this person's approval to do so ?  if yes, place a X in the box (If not applicable, skip to next question)
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	Question #6 During the past few weeks, did you socialize with this person after work or on a weekend ?  if yes, place a X in the box	Question #7 Did you work with or know personally this person prior to the establishment of ?  if yes, place a X in the box	Question #8 Have you gone to this person for advice on handling a difficult business decision ?  if yes, place a X in the box	Question #9 Has this person come to you for advice on handling a difficult business decision ?  if yes, place a X in the box
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PLEASE RETURN THE ENTIRE QUESTIONNAIRE IN THE ENCLOSED ENVELOPE.  
THANK YOU FOR YOUR PARTICIPATION AND COOPERATION !