SELECT COMMITTEE ON GOVERNMENT RESEARCH

U.S. HOUSE OF REPRESENTATIVES

900 Independence Avenue SW.
Washington, D.C. STOP 291
Telephone: WO 2-7991

PART 2.

(TO BE COMPLETED BY DIRECTOR OF INFORMATION FACILITY)

The Select Committee on Government Research has been directed by the House of Representatives to make a complete, full, and thorough investigation of the numerous research and development programs being conducted by the Federal Government. The documentation, dissemination, and use of research and development results are crucial elements to the success of this program. It is with this understanding that the committee is assimilating information about the scientific and technical information processes within the Federal Government in order to make its recommendations to Congress. Part I of this survey concerns present department or agency policies and objectives of their information programs. Part II concerns the specific operation of information facilities, both inhouse and by contract. It is felt that you, as directors of the on-going programs, are most knowledgeable and best able to guide this committee. Your cooperation and thoughtful response is appreciated and will assist the committee in developing its recommendations.

Please type responses to the following questions. (Use additional sheets should space for responses not be adequate.)

IDENTIFICATION OF FACILITY

1. Parent or supporting agency _____

2. Bureau or division of parent agency responsible for information facility _____

_____

3. Name and address of information facility _____

_____

4. Supervisor of facility _____

(name and title)

5. Name and title of person completing questionnaire _____

6. a. If your information facility is operated by contract, please give full name and

   address of contractor _____

   _____

   b. Please indicate the type of contractor listed above:

   Check one

   1. Nonprofit organization   _____
   2. Profit-making organization   _____

7. What is the total number of personnel at your information facility as of December 1963?

_____

(Please indicate military personnel if applicable)

SCGR Form 100-5, Part 2

SUBJECT COVERAGE

8. Please use the most precise terms, or key words, that the scope and terminology of your field(s) of specialization permit. Please note also any unique or unusual aspect (e.g., geographical orientation, special collections, particularly comprehensive coverage in one field).

COLLECTION

9. What is the size of the scientific and technical collection at your center? Please indicate what percent of the total collection is controlled for security, proprietary or any other reasons. Please circle word which is applicable to your collection (volumes, titles, bibliographic entries).

Size of collection

Check one

1. Under 10,000 volumes, titles, or bibliographic entries
2. 10,000-50,000 volumes, titles, or bibliographic entries
3. 50,000-100,000 volumes, titles, or bibliographic entries
4. Over 100,000 volumes, titles, or bibliographic entries
5. Percentage of collection controlled for any reason 5. _____%.

1. _____
2. _____
3. _____
4. _____

10. Is there a set procedure, established by your parent agency, for determining the extent or limitation of the subject coverage required to be processed by your center?
a. Yes _____ b. No _____ c. If yes, please describe requirements.

USERS

11. Please describe any limitations or qualifications imposed by your facility on eligibility of users.

12. This is a two-part question concerning contributors to and users of your center and the services you provide these users. In columns A and B, please indicate the percentage of total input from contributors and output to your users according to the categories listed. In columns C and D, estimate number of requests received for service at your center in FY 1963 and anticipated in FY 1964 according to the categories listed.

Category	Fiscal year 1963 A. Input %	B. Output %	C. Number of service requests, fiscal year 1963	D. Number of service requests, fiscal year 1964
1. Parent agency				
2. Other Federal agencies				
3. Contractors				
4. Grantees				
5. Industry				
6. Academic institutions				
7. Public				
8. Other (specify)				
9. Total (applicable only to columns C and D)				

<u>SERVICES</u>

13. Do you engage in the periodic publication or compilation of information such as abstracts, bibliographies or other publications at your facility? 1. Yes _____ 2. No _____
    3. If yes, please indicate users you service for each type of publication you prepare in the appropriate columns.

Types of users	Abstracts	Bibliographies	Journals	Other (specify)
1. Parent agency	1. _____	2. _____	3. _____	4. _____
2. Other Federal agencies	1. _____	2. _____	3. _____	4. _____
3. Contractors	1. _____	2. _____	3. _____	4. _____
4. Grantees	1. _____	2. _____	3. _____	4. _____
5. Industry	1. _____	2. _____	3. _____	4. _____
6. Academic institutions	1. _____	2. _____	3. _____	4. _____
7. Public	1. _____	2. _____	3. _____	4. _____
8. Other (specify)	1. _____	2. _____	3. _____	4. _____

14. What percentage of your technical reports do you abstract and enter into your documentation system?

	(Check one)
a. None	_____
b. Less than 5%	_____
c. 5% to 15%	_____
d. 15% to 25%	_____
e. Over 25%	_____

15. Please estimate kinds of service requests received by your center in fiscal year 1963, indicating the average time period involved in fulfilling each type request.

Type requests received	Percentage of requests	1 day	1 week	1 month	More than 1 month
		(Check one)			
a. Document requests	_____	1. ____	2. ____	3. ____	4. ____
b. Bibliographic searches	_____	1. ____	2. ____	3. ____	4. ____
c. Translating service	_____	1. ____	2. ____	3. ____	4. ____
d. Other (specify)	_____	1. ____	2. ____	3. ____	4. ____

16. What is the estimated cost of retrieval per request? _____

17. Are fees charged for services?   1. Yes ____   2. No ____

18. Is your information retrieval system unique or standardized and compatible with the nomenclature and requirements of other major information systems and services? (Check one)

Systems	Unique	Compatible with other system within agency	Compatible with system in other Government agency
a. Classification system	1. ____	2. ____	3. ____
b. Cataloging	1. ____	2. ____	3. ____
c. Index vocabulary (i.e., thesauri, descriptor)	1. ____	2. ____	3. ____
d. Micro reproduction (i.e., size and format)	1. ____	2. ____	3. ____
e. Computer format and coding	1. ____	2. ____	3. ____
f. Other (specify)	1. ____	2. ____	3. ____

SERVICES—Continued

19. Please indicate the specific equipment used at your center at the present time to perform your documentation and/or information processing services.

Equipment used | **Name and make of equipment**

a. Punch card
b. Computer
c. Micro reproduction
d. Hybrid (specify combination)

_____

e. Other (specify) (i.e., special output equipment)

_____

20. Please describe the application of your equipment to the services you provide. If system is largely manual, please describe briefly.

BUDGET

21. Please indicate the total operating funds obligated for your information facility for fiscal year 1963 and estimated for fiscal year 1964. Estimate the percentage of the total budget devoted to the indicated items.

	Total funds (In thousands)	Estimated percentage				
		Acquisition	Processing	Announcements, distributions and preparation of derived products	Specific user services, including state of the art, evaluation, and reviews	Other (specify)
	$	%	%	%	%	%
a. Fiscal year 1963	_____	____	____	____	____	_____ ____
b. Estimated 1964	_____	____	____	____	____	_____ ____

COMMENTS

(YOUR INDIVIDUAL RESPONSES TO QUESTIONS 22 through 28 WILL BE KEPT IN CONFIDENCE AND USED PRIMARILY FOR GUIDANCE. THEY WILL NOT BE DISCLOSED OR PUBLISHED WITHOUT PRIOR DISCUSSION. FRANK AND THOUGHTFUL ANSWERS ARE SOLICITED.)

22. Do you feel that there is needless overlapping in information services involving:

	YES	NO
a. Your subject coverage	____	____
b. Other subjects	____	____

23. Do you feel the input to your center is:

	Check one
1. Undercovered	_____
2. Adequate	_____
3. Overcovered	_____

COMMENTS—Continued

24. Do you feel users of your center are:

                                    Check one

    1. Overserviced   _____
    2. Adequately serviced   _____
    3. Underserviced   _____

25. Do you feel you have adequate translation coverage of foreign scientific and technical
    information adequate for the needs of your users? 1. Yes ____ 2. No ____

26. Have you been limited by a lack of trained information specialists to meet the needs
    of your facility? a. Yes ____ b. No ____
    c. If yes, please indicate where shortages of manpower occur.
       1. Research librarians _____
       2. Translators   _____
       3. Bibliographers   _____
       4. Indexers   _____
       5. Abstractors   _____
       6. Technical writers   _____
       7. Technical editors   _____
       8. Other (specify)   _____

27. Have controls or limitations imposed on dissemination of R. and D. information
    hindered your users' needs? 1. Yes ____ 2. No ____

28. Is the lagtime between completion of research and publication of the results a severe
    handicap to your users? 1. Yes ____ 2. No ____

29. Please comment on future plans, objectives, operations and needs of your information
    facility or any problems reflected in your answers to questions 22 through 28. Sug-
    gestions are solicited concerning: means and methods for improving collection and
    dissemination, coordination with similar activities, increasing the utilization of
    services in existence, user requirements and plans for meeting them, and potentiali-
    ties, et cetera.