



Information Sheet for Interested Public Libraries

We are pleased that your library is interested in joining askON. Please provide as much detail as possible. By completing this form you are expressing interest in joining askON. You are not committing your library nor are we guaranteeing that we will be able to accommodate your library in this phase of askON. Print out, complete and fax your response to; 800-387-1181 or save as a word document, complete and email vroy@knowledgeontario.ca

Library Name: _____

Size

Pop. / size of community served _____ # of branches _____

Do you offer French services? Yes _____ No _____ If yes, what is the est. pop. of your francophone community? _____

Hours – this is not a commitment, it is a prelim. indication of your availability for planning purposes.

Estimated # of hours, per week, that your library could commit to askON _____

Is your library able to commit any hours on weekends? (1pm-5pm) Yes _____ No _____

If yes, which day(s) _____ and how many/which hours? _____

Is your library able to commit any hours on weekday evenings (6pm-10pm)? Yes _____ No _____

If yes, which day(s) _____ and how many/which hours? _____

Technology

Is the library's network/IT linked to the city/municipality? Yes _____ No _____

Does the library have control over what software/programs are added to the library network or individual staff workstations? Yes _____ No _____

Additional comments or details _____

Does the library have control over the appearance and info. on the library website?

Yes _____ No _____. Is the library Webmaster on the library staff? Yes _____ No _____

Are staff/workstations able to freely access the Internet? Yes _____ No _____

Are staff/workstations able to create Meebo/hotmail/IM accounts? Yes _____ No _____

If you responded no, to either of the above can they be allowed for ref. staff? Yes _____ No _____

Are you able to provide durable guest passwords/accounts to your electronic resources?

Yes _____ No _____ - passwords/accounts must change on a _____ basis.

Staff

of full and part time reference/info. service staff: _____(FT)_____ (PT)

How would you describe the experience/training/qualifications of your reference staff (degrees/diplomas, years of experience, subject expertise etc.)? _____

Estimated # of ref. staff who would be trained to staff askON: _____

What percent of your ref. staff are familiar with/use IM? _____%

What percent of your ref. staff are familiar with Web 2.0 tools (wikis, blogs etc)? _____%

Has staff expressed interest in learning about Web 2.0 tools? Yes _____ No _____

Do any of your staff have experience with chat-based virtual reference Yes _____ No _____

If yes, please provide a brief description _____

Has staff expressed interest in working with askON? Yes _____ No _____

Is any of your ref. staff bilingual or comfortable in written French? Yes _____ No _____

If yes, how many? _____. How many of these staff would be trained for askON? _____

Services

Do you have a designated training librarian? Yes _____ No _____

Do you currently offer virtual reference? Yes _____ No _____. If yes, please provide information on the platform, hours of operation, traffic, training etc. _____

Miscellaneous

What percent of your community has high-speed access? _____ (askON works with dial-up).

Is there anything else that we should know about your library?

Who should we contact about askON and/or the information on this form?

Name: _____ Title: _____

Phone: _____ email: _____