



NCAA Certification Questionnaire – GENDER EQUITY PLAN at Fresno State

Please assist the members of your university’s Gender Equity Plan Task Force by answering the following questions as thoroughly as possible. Unless otherwise stated, please provide one answer for each question. Thank you for helping in the process to gather information for the Fresno State’s NCAA Certification Process.

It is most important that we emphasize the NCAA Peer Review Committee will review all returned questionnaires. The task force, however, will develop our final report in a way that does not identify any particular person who completed the questionnaire or with whom we have interacted.

Name: _____

Sport Coached: _____

Length of Tenure as Head Coach at Fresno State including this year: _____

Athletic Scholarships

1. How many full scholarships are you allowed at the Fresno State? _____

Accommodation of Interests and Abilities

2. My team is financed to play at appropriate levels of competition:
 Strongly Agree Agree Neutral Disagree Strongly Disagree

Equipment and Supplies

3. Please provide the extent to which you agree or disagree with the following statements about equipment for both practice and competition. Place the appropriate letter of your response on each line.

SA = Strongly Agree A = Agree N = Neutral D = Disagree SD = Strongly Disagree

	<u>Practice</u>	<u>Competition</u>
My team’s equipment is ...		
<i>suitable</i> for the team’s needs	_____	_____
of <i>sufficient quality</i>	_____	_____
of <i>sufficient number</i>	_____	_____
<i>easily accessible</i>	_____	_____

4. Please share any specific concerns you have with regard to equipment for practice and/or competition:

Scheduling of Games and Practice Times

5. How many regular season competitive events did your team participate in during 2006-07? _____

6. Please indicate the extent to which you agree or disagree with the following statements: (Circle your response)

Strongly Agree Agree Neutral Disagree Strongly Disagree

- My team has the opportunity to compete in a sufficient number of regular season competitions. SA A..... ND..... SD
- I am satisfied with the days/times scheduled for my team’s regular season competitions. SA A..... ND..... SD
- I have adequate input on my team’s practice schedule. .. SA A..... ND..... SD
- I am satisfied with the days/times scheduled for my team’s practices. SA A..... ND..... SD
- My team has adequate opportunities for competition outside of the regular season. SA A..... ND..... SD

7. Please share any specific concerns you have with regard to scheduling for practice or competition: _____

Travel and Per Diem Allowance

8. In 2006-07, how many trips did your team take **by commercial plane?** _____ **by chartered plane?** _____
by bus? _____ **by van?** _____

9. I am satisfied with the typical mode of transportation for my team:
 Strongly Agree Agree Neutral Disagree Strongly Disagree

10. How would you rate the quality of housing during travel? Excellent Good Adequate Poor

11. Please explain department guidelines for hotel costs: _____

12. Typically, what is the number of players assigned to each hotel room?
 Five Four Three Two One

13. My team stays at away sites for an appropriate length of time when traveling to competitive events:
 Strongly Agree Agree Neutral Disagree Strongly Disagree

14. Please explain the amount that department guidelines allow for spending per day (three meals) on each player:

15. Please share any specific concerns you have with regard to travel and/or per diem allowances: _____

Tutors

16. My team has adequate access to academic tutoring:
 Strongly Agree Agree Neutral Disagree Strongly Disagree

17. Indicate who is specifically assigned to your team to oversee tutoring:

- No One Associate AD Assistant AD Full-Time Assistant Part-Time Assistant
 Graduate Assistant Other, please list _____

18. My team has adequate access to the computer laboratory in Ricchiuti Center:

- Strongly Agree Agree Neutral Disagree Strongly Disagree

19. Please share any specific concerns you have with regard to tutoring: _____

Coaches

20. How many years of experience do you have at the college level as an **assistant coach**? _____

21. How many years of experience do you have at the college level as a **head coach**? _____

22. How many full-time assistant coaches work for your team? _____

23. How many part-time assistant coaches work for your team? _____

24. The Fresno State athletic dept. pays its head coaches for male and female teams in an equitable manner:

- Strongly Agree Agree Neutral Disagree Strongly Disagree

25. The Fresno State athletic dept. pays its assistant coaches for male and female teams in an equitable manner.

- Strongly Agree Agree Neutral Disagree Strongly Disagree

26. The Fresno State athletic dept. provides a supportive environment in which to work for both female and male coaches.

- Strongly Agree Agree Neutral Disagree Strongly Disagree

27. Please share any specific concerns you have with regard to coaching issues: _____

Locker Rooms, Practice and Competitive Facilities

28. The quality of my team's locker room is: Excellent Good Adequate Poor

29. Does your team have its own locker room? Yes No

If no, please list the team(s) that also share this space: _____

30. The **quality** of my team's **practice facility** is: Excellent Good Adequate Poor

31. The **maintenance** of my team's **practice facility** is: Excellent Good Adequate Poor

32. The **preparation** of my team's **practice facility** is: Excellent Good Adequate Poor

33. The **quality** of my team's **competitive facility** is: Excellent Good Adequate Poor

34. The **maintenance** of my team's **competitive facility** is: Excellent Good Adequate Poor

35. The **preparation** of my team's **competitive facility** is: Excellent Good Adequate Poor

36. Please share any specific concerns you have with regard to locker rooms, practice facilities, or competitive facilities: _____

Medical and Training Facilities and Services

37. How often is a medical doctor present at your **Home Competitions**?
 All events Most events A few events No events
38. How often does a medical doctor travel with you to **Away Competitions**?
 All events Most events A few events No events
39. I would rate the **availability** of doctors for my team on campus as: Excellent Good Adequate Poor
40. I would rate the **quality** of doctors for my team on campus as: Excellent Good Adequate Poor
41. Please explain any needed medical personnel/services that have not been available to your team. _____

42. I would rate the quality of my team's athletic training room as: Excellent Good Adequate Poor
43. Does your team have its own athletic trainer(s)? Yes No
If no, what other team(s) does he or she work with? _____
44. How many **certified** athletic trainers work with your team? _____
45. How often does your team have an athletic trainer at **Home Competitions**?
 All events Most events A few events No events
46. How often does your team have an athletic trainer travel with you to **Away Competitions**?
 All events Most events A few events No events
47. Who is the **primary** athletic trainer for your team?
 Head Trainer Full-time Assistant Part-time Assistant Graduate Assistant Student
48. I would rate the **availability** of my team's athletic trainers as: Excellent Good Adequate Poor
49. I would rate the **quality** of work my team's athletic trainers perform as: Excellent Good Adequate Poor
50. How many strength and conditioning coaches work with your team? _____
51. How many **certified** strength and conditioning coaches work with your team? _____
52. I would rate the **availability** of my team's strength and conditioning coaches as :
 Excellent Good Adequate Poor
53. I would rate the **quality** of work my team's strength and conditioning coach(es) perform as:
 Excellent Good Adequate Poor
54. Does your team have exclusive use of a weight training facility: Yes No
55. If your team does not have exclusive use, what other teams share this space with you? _____

56. I would rate the **availability** of my team's weight training facility as: Excellent Good Adequate Poor
57. I would rate the **quality** of my team's weight training facility as: Excellent Good Adequate Poor

58. Please share any specific concerns you have with regard to medical treatment and athletic training services and/or facilities: _____

Housing and Dining Facilities and Services

59. Female and male athletes residing in residence halls on campus have equitable housing:
 Strongly Agree Agree Neutral Disagree Strongly Disagree

60. If your athletes are on campus when the residence halls are closed, where do they stay? _____

61. I would rate the **quality** of housing when residence halls are closed as: Excellent Good Adequate Poor

62. Do your players who have room and board scholarships have training tables for meals? Yes No
If **yes**, how many per week? _____

If **yes**, when do you have them? In-Season Out-of-Season Both In-Season and Out-of-Season

63. How often does your team have **pre-game** meals for **home competitions**?
 All events Most events A few events No events

64. How often does your team have **post-game** meals for **home competitions**?
 All events Most events A few events No events

65. Please share any specific concerns you have with regard to provision for housing and dining facilities and services:

Publicity/Marketing

66. How often does a member of the Sport Information Staff cover your **home** competitions?
 All events Most events A few events No events

67. How often does a member of the Sport Information Staff cover your **away** competitions (travel with you)?
 All events Most events A few events No events

68. I would rate the services provided for my team by the Sport Information Staff as:
 Excellent Good Adequate Poor

69. My team receives the following publicity: (Please mark **ALL** that apply.)

<input type="checkbox"/> Media Guide (just my team)	<input type="checkbox"/> Schedule Magnets	<input type="checkbox"/> Other, _____
<input type="checkbox"/> Media Guide (with another team)	<input type="checkbox"/> Season Ticket Brochures	_____
<input type="checkbox"/> Programs for Home Events	<input type="checkbox"/> Schedule Cards (just my team)	_____
<input type="checkbox"/> Posters	<input type="checkbox"/> Schedule Cards (with another team)	_____

70. I would rate the **quality** of the publicity provided for my team as: Excellent Good Adequate Poor

71. I would rate the **quantity** of the publicity provided for my team as: Excellent Good Adequate Poor

72. List the specific marketing activities that are carried out for your team: _____

73. I would rate the **quantity** of the marketing provided for my team as: Excellent Good Adequate Poor

74. I am satisfied with the input I had on the marketing plan for my team:

- Strongly Agree Agree Neutral Disagree Strongly Disagree

75. I am satisfied that the goals in the marketing plan for my team were achieved.

- Strongly Agree Agree Neutral Disagree Strongly Disagree

76. I would rate the **quality** of the marketing provided for my team as: Excellent Good Adequate Poor

77. Men's and women's teams receive equitable marketing of their teams.

- Strongly Agree Agree Neutral Disagree Strongly Disagree

78. Please share any specific concerns you have with regard to publicity/marketing for your team: _____

Support Services

79. Other than coaches, indicate how many of the following personnel you have to assist with your program:

Full-time secretaries _____

Part-time secretaries _____

Full-time administrative assistants _____

Part-time administrative assistants _____

Graduate Assistants _____

Undergraduate Assistants _____

Managers _____

80. Do you have a private office? Yes No

81. How would you rate the **quality of your office**? Excellent Good Adequate Poor

82. How would you rate the overall **quality of support services for your team**?

- Excellent Good Adequate Poor

83. Please share any specific concerns you have with regard to support services for your team: _____

Recruitment of Student-Athletes

84. I have sufficient funds with which to recruit for my team.

- Strongly Agree Agree Neutral Disagree Strongly Disagree

85. The following resources are available to me for recruiting: (Please mark *ALL* that apply.)

- Recruitment Brochures Courtesy Cars Private Planes
 Car Allowances Commercial Flights

86. What is the total number of **courtesy cars** your program uses? _____

87. What is the total number of **car allowances** your program has? _____

88. How often does your program use **private planes**? Always Often Seldom Never

89. Where do recruits that visit the Fresno State usually stay? student housing with players hotels

90. I am satisfied with housing arrangements for recruits when they visit campus.

- Strongly Agree Agree Neutral Disagree Strongly Disagree

91. How many prospects made official visits to your program in 2006-07? _____

92. Please share any specific concerns you have with regard to recruiting: _____

Overall Perspective

93. My athletic department is committed to gender equity.

- Strongly Agree Agree Neutral Disagree Strongly Disagree

94. Please share any additional thoughts regarding gender equity in your athletic department that you have not already had the opportunity to express in this questionnaire:

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE.
Your Input Is Very Helpful in the NCAA Certification Process.

Please return Survey to the Human Resources Office, M/S JA41 (Joyal Admin. Bldg., Room 141).