APPENDIX III

QUESTIONNAIRE FOR USER / READERS

A Study of Information Sources and Services of Pharmacy College Libraries

Affiliated to Pune University in Maharashtra”

(For Student/Teacher)

Please Tick ( √ ) the right answers

1. General Information
   1.1 Name .................................................................
   1.2 Name of College-----------------------------

2. Use of Library
   2.1 How frequently do you visit your college library (please tick one)
       a. Daily ( )  c. 2-3 Times a week ( )
       b. Once in a week ( )  d. Rarely ( )

3. How do you come to know about the latest collection in library?
   (Please tick)
   3.1 Through colleagues ( )
   3.2 Form any information given by the library about new arrivals ( )
   3.3 From display of list of new arrivals in library ( )
   3.4 From display of book jackets in library ( )
   3.5 Any other (Please specify) -------------------------------

4. Which of the following documents do you use in Library? (Please tick).
   4.1 Text books (Prescribed in syllabus) ( )
   4.2 General books on respective subjects ( )
   4.3 Reference books (Dictionaries, Encyclopedia etc.) ( )
   4.4 Journals in respective subjects ( )
   4.5 General periodicals/ Magazines etc. ( )
   4.6 Back volumes of journals ( )
   4.7 Newspapers ( )
   4.8 Audio-visual material (CD’s etc.) ( )
   4.9 Dissertations ( )
   4.10 Any other material (Please specify) -------------------------------
5. How much time on an average do you spend in library per week?
(Please tick one)
1. Up to one hour   (   )
2. 1-2 hours         (   )
3. 2-4 hours         (   )
4. 4-6 hours         (   )

6. Do you find the needed documents from library? (Please tick one)
1. Always     (   )
2. Most of the times  (   )
3. Sometimes   (   )
4. Never       (   )

7. If you do not find give reasons (Please tick)
1. Not available in library  (   )
2. Issued to others        (   )
3. Misplaced on the shelves  (   )
4. Any other (Please specify)  --------------------------

8. Are you satisfied with the documents you use from library to meet your Needs? (Please tick in the appropriate column)

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<th>Particulars</th>
<th>Satisfied</th>
<th>Not satisfied</th>
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9. Library Staff

9.1 Do you seek assistance from library staff in using library? Yes/ No

9.2 Are you satisfied with the attitude of library staff for providing library services? (Please tick one)
1. Satisfied          (   )
2. Partially Satisfied (   )
3. Not Satisfied      (   )
10. **Services/facility**
   Have you been given introduction to libraries/orientation for using the library? (Please tick) **Yes/ No**

11. Do you find it helpful in use of library? **Yes/ No**

12. Which of the following services of library do you use in your library? (Please tick)
   1. Circulation ( )
   2. Reference ( )
   3. OPAC ( )
   4. Inter-library loan ( )
   5. CAS/ SDI ( )
   6. Newspaper clipping ( )
   7. E-mail ( )
   8. Reprography ( )
   9. Internet ( )
   10. Indexing ( )
   11. Fax ( )
   12. Open Access ( )
   13. User education ( )
   14. Printing ( )
   15. Scanning ( )
   16. Reading hall ( )
   17. Online service ( )
   18. Any other ( )

13. **What do you think about the arrangement of books on shelves?**
   (Please tick one)
   1. Very helpful ( )
   2. Helpful ( )
   3. Not helpful ( )
14. **Are you satisfied with the services/facility of library use used?**

(Please tick in the appropriate column)

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15. **Are the library hours convenient to you?**

(Please tick one)

1. Very convenient  (   )
2. Convenient         (   )
3. Not convenient    (   )

16. **Is your library computerized?**

(Please tick)  
Yes/ No

17. **Are you using any Digital library service provided by your library?**

Yes/No

18. **Please give your suggestions for improving your college library**

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Thanks for your cooperation

Signature