
INFORMATIONAL MEETING SURVEY

1. In which of the following topics are you interested? (Check as many as desired)

- | | |
|---|--|
| <input type="checkbox"/> System engineering processes | <input type="checkbox"/> Metrics |
| <input type="checkbox"/> System engineering management | <input type="checkbox"/> Requirements management |
| <input type="checkbox"/> Concurrent engineering | <input type="checkbox"/> System integration |
| <input type="checkbox"/> Case studies | <input type="checkbox"/> System test |
| <input type="checkbox"/> Simulations, models, and prototypes | <input type="checkbox"/> System engineering benchmarks |
| <input type="checkbox"/> Industry training for system engineers | <input type="checkbox"/> University curricula in SE |
| <input type="checkbox"/> System acquisition policies | <input type="checkbox"/> SE capability assessment |
| <input type="checkbox"/> System engineering applications | <input type="checkbox"/> System architecting |
| <input type="checkbox"/> TQM training and results | <input type="checkbox"/> Software specification |
| <input type="checkbox"/> Standards and guidelines | <input type="checkbox"/> Software management |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

2. What services would you like a local Chapter of INCOSE to provide? (Check as desired)

- | | |
|---|--|
| <input type="checkbox"/> Technical presentations from members | <input type="checkbox"/> Library of technical data |
| <input type="checkbox"/> Technical presentations by others | <input type="checkbox"/> Handbooks or guidebooks |
| <input type="checkbox"/> Member forums on technical issues | <input type="checkbox"/> Best practices information |
| <input type="checkbox"/> Interest groups (within Chapter meeting) | <input type="checkbox"/> Interest groups (separate activity) |
| <input type="checkbox"/> Clearinghouse for benchmarking data | <input type="checkbox"/> Book reviews (and other literature) |
| <input type="checkbox"/> Electronic bulletin board | <input type="checkbox"/> Local or regional conferences |
| <input type="checkbox"/> Community involvement | <input type="checkbox"/> Training sessions and materials |
| <input type="checkbox"/> Social activities - within meetings | <input type="checkbox"/> Social occasions - weekend |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |
| <input type="checkbox"/> _____ | <input type="checkbox"/> _____ |

We are currently meeting every third Wednesday at 4:00 PM. If you have a strong preference to change that meeting time answer the next three questions.

3. What days of the week do you prefer for the monthly Chapter meeting (Check all that are OK.)

- | | |
|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Monday | <input type="checkbox"/> Tuesday |
| <input type="checkbox"/> Wednesday | <input type="checkbox"/> Thursday |
| <input type="checkbox"/> Friday | <input type="checkbox"/> Weekend |

4. Which week of the month do you prefer for the Chapter meeting?

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> First | <input type="checkbox"/> Second |
| <input type="checkbox"/> Third | <input type="checkbox"/> Fourth |
| <input type="checkbox"/> Don't care | <input type="checkbox"/> Any week but _____ |

5. What meeting time do you prefer?

- Lunchtime
- begin at 5:30 P.M.
- begin at 7:00 P.M.
- begin at 5:00 P.M.
- begin at 6:00 P.M.
- _____

6. We are currently meeting at LATA near Coronado Mall, if you have a strong preference to change, where should the Chapter hold its meetings?

Rotating location

7. Are you currently a member of INCOSE (Dues paid)? Yes No
If no, have you ever been a member? Yes No

8. Would you like to be involved in any of the following? ("1"= 1st choice, etc)

- Membership
- Ways & Means (policies, strategic planning)
- SE Practices
- Chapter Officer (President, V.P., etc.).
- Programs
- Publicity
- SE Development
- Communications

Contact Information: Please fill out completely to help us keep you informed:

Name _____ Phone _____ (W)

Company _____ (FAX)

E-mail (W) _____ (H)

E-mail (H) _____

Mailing Address...(Work) (Home)

_____	_____
_____	_____
_____	_____