

1. From which campus did you retire? Davis Sacramento (health system) Other (specify): _____

2. From which department did you retire? _____

3. When did you retire? 2005-2010 2000-2004 1995-1999 1990-1994 Prior to 1989

4. Campus visits: indicate the average number of times you visit UC per MONTH.

	None/rarely	1-5	6-10	11-15	16-20	More than 20
Davis Campus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sacramento Campus (health system)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (Office of the President, UC Berkeley, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5. UC Davis service (Davis campus): if you currently volunteer on the Davis campus, please indicate the entity for which you volunteer (check all that apply) or choose "Not currently a Davis campus volunteer."

- Not currently a Davis campus volunteer
- Department from which I retired
- Another campus department
- Committee/council/advisory board
- Fundraising initiatives
- Retiree Center
- Retirees' Association
- Mondavi Center
- Arboretum
- Raptor Center
- Other (specify): _____

6. UC Davis service (health system campus): if you currently volunteer on the health system campus, please indicate the entity for which you volunteer (check all that apply) or choose "Not currently a health system volunteer."

- Not currently a health system volunteer
- Department from which I retired
- Another campus department
- Committee/council/advisory board
- Fundraising initiatives
- Hospice Care
- PHUR (Pets Helping Us Recover)
- MIND Institute
- Alzheimer's Disease Center
- Imaging Research Center
- Other (please specify): _____

7. UC volunteer service: if you currently volunteer for UC, please indicate the population(s) with whom you work (check all that apply) or choose "Not currently a UC volunteer."

- Not currently a UC volunteer
- Students
- Staff
- Faculty
- General Public
- Other (specify): _____

8. UC volunteer service: if you currently volunteer for UC, please indicate the average number of hours that you volunteer per MONTH or choose "None."

	None	1-10	11-20	21-30	31-40	More than 40
Davis campus	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Sacramento campus (health system)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other (Office of the President, UC Berkeley, etc.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

9. Community volunteer service: if you currently volunteer in your community, please indicate the type of entity for which you volunteer (check all that apply) or choose "Not currently a community volunteer."

- Not currently a community volunteer
- Community/service organization
- Religious organization
- Committee/council/advisory board
- Medical facility
- Elder care facility/service
- Hospice
- Youth organization/school
- Political organization
- Professional association
- Other (specify): _____

10. Community volunteer service: if you currently volunteer in your community, please indicate the average number of hours per MONTH or choose "Not currently a community volunteer."

- Not currently a community volunteer
- 1-10
- 11-20
- 21-30
- More than 30

11. Family/friend care: if you are currently providing care for others, please indicate those to whom you provide assistance (check all that apply) or choose "Not currently providing care."

- Not currently providing care
- Spouse
- Parent
- Child
- Grandchild
- Other relative
- Friend
- Other: _____

12. Family/Friend Care: if you are currently providing care for family or friends, please indicate the average number of hours you work each WEEK or choose "Not currently providing care."

- Not currently providing care
- 1-10
- 11-20
- 21-30
- 31-40
- More than 40

13. Post-Retirement Employment: if you are currently working in a paid position or are self-employed, please indicate the average number of hours that you work per WEEK or choose "not currently working."

- Not currently working in paid position
- 1-10
- 11-20
- 21-30
- 31-40
- More than 40

14. Personal Interests and Hobbies: please indicate the leisure activities you enjoy (check all that apply).

- Travel
- Gardening
- Spending time with family/friends
- Spending time with animals
- Watching television/movies
- Computer activities
- Dining out
- Attending theater/performing arts
- Arts/crafts
- Reading
- Writing
- Music (perform/listen)
- Boating/fishing
- Camping
- Other: _____

15. Benefits: in general, how satisfied are you with your UC retirement benefits?

	Very satisfied	Somewhat satisfied	Not very satisfied
Pension benefits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Health and welfare benefits	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Retirement savings plans-403(b) etc.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. Recognition: in the past twelve months, have you received any awards or recognitions? If yes, describe briefly.

17. Contact information: optional, but required if you wish to be entered into the drawing for an American Express gift card. Your identity will not be associated with your answers in any reporting of the data.

Name: _____ Address: _____

City/Town: _____ State: _____ Zip _____

Email Address: _____ Phone Number: _____

18. Gender: Male Female

19. Are you currently a member of the UC Davis Retirees' Association? Yes No

20. Would you like to become more involved in the Retirees' Association? Yes No

21. If you are not currently a member of the Retirees' Association, why have you not joined?

- I don't like to join groups
- I don't know what the association does
- I don't think I would benefit from joining
- I live too far away to attend meetings/events
- I have mobility limitations that keep me from attending
- Other (specify): _____

22. May the Retirees' Association contact you to follow up on the survey? Yes No

23. Suggestions: do you have suggestions for programs or advocacy the UCDDA could provide on behalf of retirees?

Thank for participating in this survey. A summary of the findings will appear in *Campus Connections*, the joint newsletter of the UCDDA and the UCDEA. Now that you have completed this survey, if you provided your contact information, you will be entered into a drawing in which two lucky people will each receive a \$50 American Express gift card.

Mail your completed survey to: **UC Davis Retiree Center, One Shields Avenue, Davis CA 95616**. Your survey must be received by **Friday, December 10**, to be eligible for the incentive prizes.