

Communication Satisfaction Survey

Directions: You may use or adapt this form to determine how well you are communicating with your community and/or constituents.

This survey is intended to gain feedback on how well we are communicating with you about							
activities and events at (name of program)							
Your responses will remain anonymous, so please answer honestly.							
Please mail your completed survey to (name) by							
	(date). If you have questions, please contact						
		(name),	(telephone number).				
Thank	you for your ti	me!					
1. Hov	1. How would you rate the program's efforts to keep you informed and involved? (check one)						
O	Excellent	I feel informed about all activities and events and I am	aware of all the ways I can				
		get involved.					
O	Good	I feel generally informed about the program and its invo	olvement opportunities.				
O.	Fair	I occasionally receive information about the program as	nd its involvement				
		opportunities, but feel I somewhat "out of the loop" at t	times.				
O	Unsatisfactory	The program does very little to keep me informed or in	volved.				
2. Hov	2. How would you rate the program's efforts to request your input about their activities?						
(che	eck one)						
O	Excellent	The program regularly asks for feedback from the whole	le community. The program				
		also reports to the community how it has used this input	t or reports why it was				
		unable to do so.					
O	Good	The program asks for feedback and tries to address the	issues raised by those they				

		survey. However, th	ne program should ask for feedback more often and/or survey		
		other groups.			
	() Fair	The program asks for	or feedback, but not often or in a very structured way. Not		
		much seems to chan	age as a result of the feedback it receives.		
	() Unsatisfactory	The program does n	not ask for feedback from the community.		
3.	. How would you rate the frequency of the program's communications about its activities and events? (check one)				
	O Just right	Too little O T	Coo much		
4.	. Please provide any comments or suggestions regarding the frequency of the program's communications regarding activities and events.				
5.	Which methods of c	ommunication would	you like the program to use more often when providing		
			check two or check "no change is needed")		
	() Written newslette	er	C) Radio		
	Online newsletter	r	() Newspaper		
	O E-mail		Other (specify):		
	() Television		() No change is needed		
	() Telephone				
6.	How would you rat	te the frequency of the	e program's requests for feedback? (check one)		
	() Just right (Too little () T	Coo much		
7.	Please provide any requests for feedba		tions regarding the frequency of the program's		

8.	What methods would you like the program to use for requesting feedback?
	(check two or check "no change is needed")
	O Written surveys
	O Online surveys
	O Telephone surveys
	O Focus groups held at the center
	O Focus groups held at another location
	Other (specify):
	O No change is needed
9.	Has the program made an effort to make all visitors feel welcome? (check one) () Yes () No
10	
10.	What suggestions do you have for making the program more welcoming?
11.	What comments or suggestions do you have for improving the program's communications overall?
Tha	ank you for taking the time to complete this survey! If you have any questions, please contact
[Na	mme] at
[Te	lephone Number]