

Visioning Survey Template

Thank you for taking the time to fill out this survey. Your answers will help guide us in the future visioning of our library. This survey is [anonymous/not] and will take about [10 minutes].”

1. How would you rate each of the following library services? Please check one answer for each service. *Usage, Visioning, Satisfaction*

	Excellent	Good	Neutral	Poor	Terrible	Don't know/Not applicable
Customer service						
Collection (books, DVDs, music, etc.)						
Programs (classes, storytimes, etc.)						
Online services (streaming services, ebooks, etc.)						
ILL (Inter-library loan)						
Library policies						
Computers and printers						
Internet access						
Facilities						
Hours of operation						
Overall, how would you rate the library?						

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2. What do you value most about the library including our services, programs, and space? *Program Evaluation, Satisfaction, Visioning*

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3. Did you face any barriers in accessing the library including our services, programs, and space? If so, please share as much as you're comfortable. *Usage, Visioning, Satisfaction*

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4. How could the library be improved? *Program Evaluation, Satisfaction, Collection, Visioning*

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5. How does the library benefit you or the community? *Program Evaluation, Satisfaction, Collection, Visioning*

6. How do you think the library will help you in your personal and/or professional life in the future? *Program Evaluation, Satisfaction, Collection, Visioning*

Demographic Content

Question being answered: who is taking your survey?

Please tell us about yourself [or the person you're filling this survey out for in the case of a program] so that we may better serve you. Please check one answer for each of the following.

7. How old are [you/your child]? *Program Evaluation, Usage, Visioning, Satisfaction, Collection*

- ☐ 0-5
- ☐ 6-12
- ☐ 13-18
- ☐ 19-25
- ☐ 26-40

- ☐ 41-60
- ☐ 60 or older

8. What is the highest level of education you have completed? *Program Evaluation, Usage, Visioning, Satisfaction, Collection*

- ☐ Some high school
- ☐ High school graduate or GED
- ☐ Some college
- ☐ College degree or higher

9. What is your preferred language? *Program Evaluation, Usage, Visioning, Satisfaction, Collection*

- ☐ English
- ☐ Spanish
- ☐ Vietnamese
- ☐ Other—please specify: _____

10. How do you typically find out about what's happening at the library? Check all that apply. *Program Evaluation, Usage, Visioning*

- ☐ Library website
- ☐ Social media (Facebook or Twitter)
- ☐ Newspaper
- ☐ Library newsletter
- ☐ Internet search (google, etc.)
- ☐ Signs or flyers in the library
- ☐ Word of mouth
- ☐ Library staff
- ☐ Don't know/Not applicable
- ☐ Other: _____

11. On average, how often do you visit the library? Circle one. *Usage*

Daily	Weekly	Monthly	Less than once a month	Yearly	Never
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“Thanks for taking our survey! Any follow up questions can be sent to [person’s name and contact information.] We appreciate your time!”