

Santa Clara County Library District Program Survey

Thank you for attending our recent library program. Your feedback is valuable in helping us improve our programs and better serve our community. All responses will be kept confidential.

1. Do you have Santa Clara County Library District Library Card Yes / No

2. What is your zip code? _____

3. If you are interested in receiving updates on future library programs, please enter your email address here: _____

4. Overall Satisfaction: I really enjoyed today's program.

Strongly disagree

Strongly agree

1

2

3

4

5

- Why or why not (optional): _____

5. Program Content: The program met my expectations.

Strongly disagree

Strongly agree

1

2

3

4

5

6. Program Presentation

- Were the presenter(s) knowledgeable and informative?
 - ☐ Yes
 - ☐ No

If no, please explain why (optional): _____

7. Future Programs

- What programs would you like to see in the future?

Library: _____

Program: _____

Collection Date: _____