

Program Survey

1. How many child(ren) are with you today?

- 1 2 3 4 or more

2. What are the ages of the child(ren) in your care with you today? Check all that apply.

- Infant (under age 1) 1 to 2 years old 3 to 5 years old 6 years and older

3. How are you related to each child(ren) who are with you today? Check all that apply.

- Parent Caregiver (e.g., nanny, babysitter)
 Other family member Other (please explain): _____

For each of the following questions, please respond by checking the appropriate box(es).

4. How did you hear about this library program? Check all that apply.

- Online Posted advertisement (Flyer, brochure, etc.)
 Word of mouth Other (please explain): _____

5. About how often do you come to this library?

- This is my first time A few times each year
 About once each month Every week

Check the box that shows how you feel about each sentence.

6. I learned something new as a result of attending the library program today.

- Strongly Agree Agree Neutral Disagree Strongly Disagree

7. This program was a valuable learning experience for my child(ren).

- Strongly Agree Agree Neutral Disagree Strongly Disagree

8. I tried or intend to try something new with my child(ren) based on information I learned at the library program today.

- Yes, definitely Probably Not sure Not likely

9. Would you bring your child(ren) to this program or a similar library program again?

- Yes No Not sure

10. Do you think the program exposed your child(ren) to school readiness skills?

- Yes No Not sure

11. Please provide more information on any of your answers above:

