Summer Reading 2017
Adult Program Attendee

Please take a few minutes to complete this brief survey. As a result of your experience today with the Summer Reading activity...

1. You learned something new from what you read or experienced
   - Strongly Disagree
   - Disagree
   - Neither
   - Agree
   - Strongly Agree
   - NA

2. You will enjoy reading more
   - Strongly Disagree
   - Disagree
   - Neither
   - Agree
   - Strongly Agree
   - NA

3. You will read more often
   - Strongly Disagree
   - Disagree
   - Neither
   - Agree
   - Strongly Agree
   - NA

4. You will want to use the Library more often
   - Strongly Disagree
   - Disagree
   - Neither
   - Agree
   - Strongly Agree
   - NA

5. What did you like most about today’s activity?

6. What could the Library do to help you continue to learn more?

7. Do you have a library card?
   - Yes
   - No
   - Don’t Know

8. How did you learn about this program?
   - Library Website
   - Social Media
   - Signs/Flyers in Library
   - Newspaper
   - Library Staff
   - Word of Mouth
   - Other

   Date: ___________________  Library Name: ___________________

Thank you for completing this survey! Please return it to your library.