

Please take a few minutes to complete this survey **BEFORE** you leave and help us evaluate library services. Drop the survey off in any of the boxes marked “library survey” near the exit. Thank you.

**1. What did you do in this library today? (Please check all that apply)**

- a. \_\_\_ Asked library staff for assistance
- b. \_\_\_ Looked for books, journals or other items in the library
- c. \_\_\_ Used course reserves
- d. \_\_\_ Borrowed or returned material
- e. \_\_\_ Made photocopies
- f. \_\_\_ LOCAL QUESTION
- g. \_\_\_ LOCAL QUESTION
- h. \_\_\_ Studied individually or did own work
- i. \_\_\_ Studied or worked in a group
- j. \_\_\_ Used a library computer
- k. \_\_\_ Used personal laptop or mobile computing device
- l. \_\_\_ Met friends/someone else
- m. \_\_\_ Printed from computer
- n. \_\_\_ Other (please specify)

**2. How often do you visit this library in person? (Please check the most appropriate category)**

- 4 or more times per week     2-3 times per week     Weekly     Monthly     Less often     This is my first time here

**3. How important are the following services to you in this library? (If service isn't currently available here mark how important it would be to offer it in this library)**

	Very Important			Not important	
Library computers	5	4	3	2	1
Assistance from library staff	5	4	3	2	1
Access to on-site collections	5	4	3	2	1
Access to online library resources	5	4	3	2	1
Place to work individually	5	4	3	2	1
Place to work in groups	5	4	3	2	1
Application software on library computers ( Word, Excel)	5	4	3	2	1
Electrical outlets by seating areas	5	4	3	2	1
LOCAL QUESTION	5	4	3	2	1
LOCAL QUESTION	5	4	3	2	1

**4. How would you rate this library on the following?**

	Excellent				Poor	Not applicable
Access to computers	5	4	3	2	1	0
Space where I can work on my own	5	4	3	2	1	0
Space where I can work with groups	5	4	3	2	1	0
Quality of collections	5	4	3	2	1	0
Quality of customer service	5	4	3	2	1	0
Ease of finding collection locations and service points	5	4	3	2	1	0
Hours open	5	4	3	2	1	0
Inviting environment	5	4	3	2	1	0
LOCAL QUESTION	5	4	3	2	1	0

**5. Who are you? (Check one category that best applies to your visit today)**

- \_\_\_ UW undergraduate student                      \_\_\_ UW graduate/professional student                      \_\_\_ UW faculty or staff
- Declared Major \_\_\_\_\_                      Department \_\_\_\_\_                      Department \_\_\_\_\_
- \_\_\_ Student at other college                      \_\_\_ Instructor or staff at other school                      \_\_\_ Community member/public
- \_\_\_ K-12 student                      \_\_\_ Businessperson/professional                      \_\_\_ Other (please specify)

**6. Briefly list what we can do to make this library better for you. Include any other comments here or on back.**