



Johnson City Public Library User Survey



In an effort to better serve our customers, the Johnson City Public Library is conducting a user survey to evaluate how we may improve upon the library's various services. Please take a few minutes to share your thoughts and opinions about the services that the Johnson City Public Library provides. Thank you!

I am a: female male

I am currently a resident of Johnson City: Yes No.

If yes, please indicate a specific area of Johnson City:

North South East West Central

Please identify your neighborhood: _____

If No, please indicate where you reside: _____

What is your age group?

- | | |
|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> under 13 | <input type="checkbox"/> 25-45 |
| <input type="checkbox"/> 13-17 | <input type="checkbox"/> 46-64 |
| <input type="checkbox"/> 18-24 | <input type="checkbox"/> 65 or up |

What is your highest completed level of education?

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> High School | <input type="checkbox"/> Some Post College |
| <input type="checkbox"/> Some College | <input type="checkbox"/> Master's Degree |
| <input type="checkbox"/> College | <input type="checkbox"/> Other _____ |

Are you currently a student or taking classes? Yes No

How often do you visit the Johnson City Public Library?

- Weekly
 Monthly
 A couple of times per year
 Other _____

What is your primary use of this library? (Please check only one).

- | | |
|--|--|
| <input type="checkbox"/> Personal pleasure | <input type="checkbox"/> Children's use |
| <input type="checkbox"/> Personal research | <input type="checkbox"/> Social purposes |
| <input type="checkbox"/> Work related | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> School related | _____ |

On your visits to the library do you often: (Please check only one).

- Find the material you want is available
 Find the library has the material you want but it's not available to you
 Do not find what you want
 Do not come for specific material

When you visit the library do you usually (please check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Check out books | <input type="checkbox"/> Come to browse |
| <input type="checkbox"/> Check out videos/DVDs | <input type="checkbox"/> Use the computers |
| <input type="checkbox"/> Come for a meeting | <input type="checkbox"/> Visit the children's area |
| <input type="checkbox"/> Interact with staff | <input type="checkbox"/> Check out Books-on-tape/Audio CDs |

Please give us your thoughts on the following areas of service:

Service	Excellent	Good	Just OK	Needs Attention	No Opinion
Circulation Desk					
Information Desk					
Reference Desk					
Youth Services Desk					
Hours of Operation					
ILL (borrowing from other libraries)					
Computers					
Internet Activities					
JCPL Website					
Meeting Room					
Adult Programs					
Children's Programs					
Staff Courtesy					
Collection: Fiction Books					
Nonfiction Books					
Large Type Books					
Foreign Language Materials					
Magazines/Newspapers					
DVDs, Videos & CDs					
Audio Books					
Reference Materials					
Overall Satisfaction with JCPL					

The location of the Johnson City Public Library is:

- Convenient for my use
 Inconvenient for my use

If the location of the library is inconvenient, please tell us how we can make the library more accessible.

In the future, I would like to see the Johnson City Public Library services focus on (please check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> Basic Literacy | <input type="checkbox"/> Support for Educational Achievement |
| <input type="checkbox"/> Business and Career Information | <input type="checkbox"/> General Information on a broad array of topics |
| <input type="checkbox"/> Community Interaction Center | <input type="checkbox"/> Government Information |
| <input type="checkbox"/> Community Information and Involvement | <input type="checkbox"/> Skills to Find, Evaluate and use Information |
| <input type="checkbox"/> Consumer Information | <input type="checkbox"/> Personal Growth Opportunities |
| <input type="checkbox"/> Cultural Awareness | <input type="checkbox"/> Local History and Genealogy |
| <input type="checkbox"/> Current Topics/ Popular Titles | |

How can your satisfaction with library services be increased? _____

If you would like to be contacted by library staff to discuss a specific incident or response, please leave a contact name and phone number. _____

Thank you for your time and support on this important library project. Your response will be used to help us improve library service to all those who use the Johnson City Public Library.