



### AgeOptions FY25 Library Program Evaluation Survey

The library programming is made possible with funding from AgeOptions. Your responses to this anonymous survey help us understand the reach and impact of programs like this. Thank you for participating in your local library's programming and thank you for your response to the following questions.

1. As a result of participating in my library's programming for people 60 or older:  
(Please select the single best answer for each statement).

Question	Strongly Agree	Agree	Neither Agree nor Disagree	Disagree	Strongly Disagree
I feel more connected to my <b>community</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel more connected to <b>individuals</b> who also attended	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I made <b>new friends</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel better equipped to use <b>different technologies</b>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I use the library as my <b>primary source</b> of information about services for older adults	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

2. Have you used and/or reached out to any of the following services for people 60 or older (select all that apply):

- ☐ Senior Center
- ☐ Senior Dining Site or Home Delivered Meals (aka Meals on Wheels)
- ☐ In-Home Services for an Older Adult
- ☐ Aging Service Provider or Agency
- ☐ Support Services for Family Caregivers
- ☐ None of the above

3. Thinking about the services for people 60 or older listed in Question 2, did you do any of the following because of attending events at your library: (select all that apply)

- ☐ I first **learned** about these services at my library.
- ☐ I **contacted** a local agency to learn more about these services.
- ☐ I **participated** in these programs or services outside of the library.
- ☐ None of the above



**Demographics:** We are asking participants to complete this demographic survey to better understand the audience that attends and participates in programming hosted by our library partners and help us improve our reach in all the communities we serve. Please select an option for each question. You may select "Prefer not to answer." This survey is **anonymous**.

Age: (Please enter your age. Skip if you prefer not to answer.) \_\_\_\_\_

Ethnicity:

- ☐ Hispanic or Latino      ☐ Not Hispanic or Latino      ☐ Prefer not to answer

Race (select all that apply):

- ☐ American Indian or Alaska Native      ☐ Asian or Asian American      ☐ Black or African American
- ☐ Middle Eastern and North African      ☐ Native Hawaiian or Pacific Islander      ☐ White
- ☐ Prefer not to answer      ☐ Other: \_\_\_\_\_

Which of the following choices best describes your monthly household income (including retirement benefits)?

- ☐ \$0 - \$1,249 per month
- ☐ \$1,250 - \$1,799 per month
- ☐ \$1,800 - \$2,500 per month
- ☐ More than \$2,500 per month
- ☐ Prefer not to answer

How many people are in your household?

- ☐ 1 (I live alone)      ☐ 2
- ☐ 3 or more      ☐ Prefer not to answer

Gender:

- ☐ Female      ☐ Male      ☐ Non-Binary
- ☐ Transgender      ☐ Prefer not to answer      ☐ Other \_\_\_\_\_

Do you think of yourself as:

- ☐ Lesbian or gay      ☐ Straight, that is, not gay or lesbian      ☐ Bisexual
- ☐ Transgender      ☐ I use a different term: \_\_\_\_\_      ☐ Prefer not to answer

If you have any questions about aging services, call AgeOptions during business hours at (708)383-0258 or chat online at [www.ageoptions.org](http://www.ageoptions.org).  
Email anytime at [information@ageoptions.org](mailto:information@ageoptions.org)