Please help your local library and the New Mexico State Library evaluate the 2015 Summer Reading Program. Your answers on this survey will help obtain funding for the program as well as improve it. Thank you for your time and we appreciate your participation.

**\* 1. Please provide the name of the library where you participated in the Summer Reading Program.**

**2. How many children, under your care, participated in the Summer Reading Program, in each age group?**

|  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | more than 10 |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 0-3 years old | | | | | | | | | | | |
| 4-6 years old | | | | | | | | | | | |
| 7-9 years old | | | | | | | | | | | |
| 10-12 years old | | | | | | | | | | | |
| 13-15 years old | | | | | | | | | | | |
| 16-18 years old | | | | | | | | | | | |

**3. Do you and your child(ren) have library cards?**

Yes

No

**4. How did you first learn about the Summer Reading Program?**

At school

At my local library

On the library's website

Flyer

Word of mouth

On tv or radio or in newspaper

Other source (please specify)

[                    ]

## 5. We participated in the Summer Reading Program...

for the first time this year

at this location previously

in a similar program in another library

## 6. As a result of participation in the Summer Reading Program, did your child(ren)'s...

| | Increase | Remain the Same | Decrease |
|---|---|---|---|
| Enjoyment of reading | | | |
| Reading more voluntarily | | | |
| Reading skill | | | |
| Amount of reading | | | |
| Use of library | | | |
| Socializing | | | |
| Verbal communication skills | | | |
| Written communication skills | | | |

Comments (optional)

[                    ]

## 7. Will you continue to bring your children to the library this fall?

Yes

No

Comments (optional)

[                                    ]

**8. The incentives and awards offered by the Summer Reading Program encouraged my child to read.**

Yes

No

Comments (optional)

[                                    ]

**9. What was your or your child(ren)'s favorite part of the Summer Reading Program, and why?**

[                                    ]

**10. Please let us know in your own words what a difference the 2015 Summer Reading Program has made for your child(ren) and family.**

[                                    ]

Done