



San Francisco Public Library

Rolling Walker User Survey

This SFPL Location: _____

Rolling Walker Model Used: _____

Please take a moment to fill out this survey about our new rolling walker lending service. Thank you!

Is today the first time you have used a rolling walker?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
How important is this new service for you?	<input type="checkbox"/> Not Important	<input type="checkbox"/> Somewhat Important	<input type="checkbox"/> Very Important
How satisfied are you with this new service?	<input type="checkbox"/> Not Satisfied	<input type="checkbox"/> Somewhat Satisfied	<input type="checkbox"/> Very Satisfied
How satisfied are you with the check out procedure?	<input type="checkbox"/> Not Satisfied	<input type="checkbox"/> Somewhat Satisfied	<input type="checkbox"/> Very Satisfied
How satisfied are you with the rolling walker you used today?	<input type="checkbox"/> Not Satisfied	<input type="checkbox"/> Somewhat Satisfied	<input type="checkbox"/> Very Satisfied
Do you plan to use a rolling walker again on a future visit	<input type="checkbox"/> Not Likely	<input type="checkbox"/> Somewhat Likely	<input type="checkbox"/> Very Likely
Would you recommend this service to others?	<input type="checkbox"/> Not Likely	<input type="checkbox"/> Somewhat Likely	<input type="checkbox"/> Very Likely

My age: 5 – 12 13 – 17 18 – 30 31 – 50 50 – 65 66 – 80 81 or older No Response

My primary language used at home: Chinese English Japanese Russian Spanish Tagalog/Filipino Other
 No Response

Any additional comments regarding the Rolling Walker Lending Program at San Francisco Public Library can be written on the back of this form.