



Can, Clip, Cluck!

*Tools for the
Self-Sufficient Life*

P R O G R A M E V A L U A T I O N

Which Program did you attend?

- Can Clip Cluck

How did you find out about this program?

- Library calendar of events
 Library Website
 Library poster, sign, flyer
 Newspaper _____
 Word of mouth Mail Email
 Other _____

I want to be placed on a mailing list to be notified about other Main Library programs *(please print very clearly)*

Name _____

Address _____

City, State, Zip _____, _____, _____

Email _____

Is this your first visit to Main Library? Yes No

Do you usually visit one of our branches?

- Yes *Please tells us which one* _____
 No (Please answer the rest of the questions)

How often do you visit Main Library?

- every week or two every month or two
 a few times each year once a year or less

Do you come to Main Library for programs or classes? Yes No

Do you come to Main Library to check out books and other material?

- Yes No

▶ Please use the back of this sheet if you would like to comment on the program you attended.