

# Sample Local Communications Survey

## HOW CAN WE REACH YOU?

Your Name \_\_\_\_\_

First Language

- English   
French   
Other   
Need an interpreter

Other languages you speak \_\_\_\_\_

Please take 3 minutes to tell us the best ways to reach you:

- Talk in person Best times of day \_\_\_\_\_
- Phone Your phone number(s) \_\_\_\_\_
- Information Meetings Before Work
- Information Meetings At Lunch
- Information Meetings After Work
- Information Meetings at \_\_\_\_\_ time
- E-mail Your e-mail address(es) \_\_\_\_\_
- Local Web-site How often do you check it?  
More than once a day \_\_\_\_\_  
Once a day \_\_\_\_\_  
Once every week \_\_\_\_\_  
Other \_\_\_\_\_
- Print  Flyer \_\_\_\_\_  
 Newsletter \_\_\_\_\_  
 Bulletin Board \_\_\_\_\_

Thanks for your time. Please return this to \_\_\_\_\_