Zonta of the Royal Gorge would like to ask you a few questions so that we can use this information to assist in further empowering each of it’s members. Please take a few minutes to complete this survey and turn it into the membership Chairperson.

1) Do you feel that the meetings are productive and meet your needs?

1 2 3 4 5

 Not at all Sometimes Mostly Almost always Always

1. Do you feel you are a valued member of the group?

 1 2 3 4 5

Not at all Sometimes Mostly Almost always Always

3) Do you feel you can safely state your ideas, thoughts and feelings in the group?

 1 2 3 4 5

Not at all Sometimes Mostly Almost always Always

4) If I were in charge I would change the meetings by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5) In general what is your overall perception of our local chapter?

6) What would you like to see us participate in that we are not yet involved \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7) What leadership positions would you be interested in:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

8,9,10) On this following 1-5 scale,

1 2 3 4 5

Not at all Sometimes Mostly Almost always Always

Do you get enough information to feel knowledgeable about Zonta’s: 7) local programs? \_\_\_\_(1-5)

 8) Area and District Zonta programs? \_\_\_\_(1-5)

 9) International Zonta programs? \_\_\_\_\_\_(1-5)

11) Do you wish to be more involved as a group in local service projects and if yes, how much time each week do you personally want to volunteer to be involved?

1 2 3 4 5

Not at all Sometimes Mostly Almost always Always

I would volunteer \_\_\_\_ hours per week.

12) Do you wish to be more involved as a group in a few time specific (like a day) projects, and if so how many days during a year do you wish to participate?

1 2 3 4 5 Not at all Sometimes Mostly Almost always Always

I would volunteer \_\_\_\_\_ days per year.

 13) Do you have any ideas for service projects for our group?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

14) On a one to five scale (1 not at all to 5 always) do you look forward to participating in our following activities?

1) The dance on the bridge \_\_\_(1-5)

2) The Zonta Zing \_\_\_\_(1-5)

3) Author’s Luncheon \_\_\_\_(1-5)

4) SANE clothing collection \_\_\_\_\_(1-5)

5) Family Crisis Center toiletries collection \_\_\_\_\_(1-5)

6) Area Meetings \_\_\_\_(1-5)

7) District meetings\_\_\_\_\_\_(1-5)

8) Orchard of Hope \_\_\_\_\_(1-5)

9) monthly meetings \_\_\_\_(1-5), time \_\_\_(1-5), date \_\_\_(1-5)

15) Do you feel the dinner served at the meeting is appropriate in food type, amount of food, and cost?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

16) Do you have anything else you would like to add to this survey to further help us in making Zonta a positive empowering group for you?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_