|  |  |
| --- | --- |
| OPEN-ENDED QUESTIONS | |
|  |  |
| SHORT RESPONSE | |
| Paper and Pencil | Online |
| What one word comes to mind when I say evaluation?  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | What one word comes to mind when I say ‘evaluation’? |
|  |  |
| ESSAY | |
| Paper and Pencil | Online |
| How would you describe the evaluation process in your place of work? | How would you describe the evaluation process in your place of work? |
| FORCED RESPONSE QUESTIONS | |
|  |  |
| SELECT ONE | |
| Paper and Pencil | Online |
| Thinking about the last seven days, not including today, what day of the week did you work the most hours for pay? (Circle ONE)  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  I did not work for pay in the past seven days | Thinking about the last seven days, not including today, what day of the week did you work the most hours for pay? (Circle ONE)   * Monday * Tuesday * Wednesday * Thursday * Friday * Saturday * I did not work for pay in the past seven days |
|  |  |
| SELECT MORE THAN ONE | |
| Paper and Pencil | Online |
| Thinking about the last seven days, not including today, on which days did you work for pay? (Check all that apply)  \_\_ Monday  \_\_ Tuesday  \_\_ Wednesday  \_\_ Thursday  \_\_ Friday  \_\_ Saturday  \_\_ I did not work for pay in the past seven days | Thinking about the last seven days, not including today, on which days did you work for pay? (Check all that apply)   * Monday * Tuesday * Wednesday * Thursday * Friday * Saturday * I did not work for pay in the past seven days |

**Types of Survey Questions**

|  |  |
| --- | --- |
| FORCED RESPONSE QUESTIONS – LIKERT TYPE | |
|  |  |
| LIKERT | |
| Paper and Pencil | Online |
| Overall, how satisfied were you with the service that you received today?   | **Very  Dissatisfied** | **Dissatisfied** | **Neutral** | **Satisfied** | **Very   Satisfied** | **Not   Applicable** | | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  | | Overall, how satisfied were you with the service that you received today?   | **Very  Dissatisfied** | **Dissatisfied** | **Neutral** | **Satisfied** | **Very   Satisfied** | **Not   Applicable** | | --- | --- | --- | --- | --- | --- |   o o o o o o |
|  |  |
| RANKING | |
|  |  |
| SELECT MORE THAN ONE | |
| Paper and Pencil | Online |
| What factors were most important in your decision to purchase your new home? (place a 1 next to the most important, a 2 next to the next most important, etc., skipping any that were not considerations in your purchase)  \_\_ Location  \_\_ Style  \_\_ Price  \_\_ Size  \_\_ History  \_\_ Other | What factors were most important in your decision to purchase your new home? |