Community Needs Survey Template

All questions are optional. Select one answer for each choice question.
Write your answers to the open questions in the space provided.

Think about services in the named area during the past six months. Share general experiences without names, exact addresses, or private case details. This survey is not an application for assistance.

1. What is your connection to this area?

- ☐ Live here
- ☐ Work here
- ☐ Study here
- ☐ Regularly use services here
- ☐ Another connection
- ☐ Prefer not to say

2. Which service area most needs attention?

- ☐ Transportation
- ☐ Housing support
- ☐ Education or learning
- ☐ Community activities
- ☐ Health service access
- ☐ Another area
- ☐ Not sure

3. During the past six months, did you try to use a service in that area?

- ☐ Yes
- ☐ No
- ☐ Not sure
- ☐ Prefer not to say

Community Needs Survey Template

All questions are optional. Select one answer for each choice question.
Write your answers to the open questions in the space provided.

4. What was the main barrier, if any?

- ☐ Cost
- ☐ Travel or location
- ☐ Opening hours
- ☐ Unclear information
- ☐ Waiting or limited availability
- ☐ Another barrier
- ☐ No barrier
- ☐ Did not try

5. How clear is information about where to get local help?

- ☐ Very unclear
- ☐ Somewhat unclear
- ☐ Neither clear nor unclear
- ☐ Somewhat clear
- ☐ Very clear
- ☐ Have not looked

6. What practical change would make the greatest difference?

Community Needs Survey Template

All questions are optional. Select one answer for each choice question.
Write your answers to the open questions in the space provided.

7. What local service or resource is already working well?