

Facility Use Feedback Form

Community Use of District Facilities

Community Education, Robbinsdale Area Schools

Please tell us about your experience with use of facilities through Robbinsdale Area Schools.

✓ *Please check the answer that best describes your experience. You may complete this form on screen and return via U.S. mail, in person or fax to the fax number and/or address listed below.*

1. Describe your experience in contacting the facilities scheduling office and the initial handling of your request.

_____poor _____fair _____good _____very good _____excellent

2. Describe your experience in the processing and completion of your Facilities Contract.

_____poor _____fair _____good _____very good _____excellent

3. Describe your understanding of your responsibilities as a facilities contract holder.

_____poor _____fair _____good _____very good _____excellent

4. Indicate how well the facility you reserved met your needs.

_____not at all _____somewhat _____completely

5. How would the staff at the facility best be described?

_____not helpful/unpleasant _____somewhat helpful/pleasant _____very helpful/pleasant

6. I would rate my overall experience with use of district facilities as follows.

_____poor _____fair _____good _____very good _____excellent

FACILITY USED:

Please indicate any suggestions you may have to help us improve the experience of using district facilities or any positive feedback about your experience

Your contact information- name, telephone or e-mail (optional): _____

Please return form to: Sandburg Learning Center, Attn: Aviva Hillenbrand, 2400 Sandburg Lane, Golden Valley MN 55427, fax number, 763-504-4945

Thank you!