



Housing Authority of Jackson County--[Property Name]

RESIDENT SURVEY

To help us better serve you, please take a few minutes to complete this survey. The information you provide will help us to plan programs to support you, your family, and your community.

- Family information (list all family members)
(For education level, please use the codes from the chart.)

Age	Employed (Yes/No)	Education Level (use code from chart)	In Childcare (Yes/No)

Education Level Codes	
1	1 st through 8 th grade
2	9 th through 11 th grade
3	High School Diploma or GED in USA
4	High School Diploma or GED outside USA
5	Trade School/Apprenticeship/Certificate
6	Some college
7	Associate of arts or two-year degree
8	Bachelor of arts or four-year degree
9	Masters degree or above

- Would you and/or the community benefit from information or programs in the following areas?
Use the following scale: circle 4, if there would be great benefit, to 0, if there would be no benefit.

	Great Benefit			No benefit at all	
CHILDREN/PARENTING					
Afterschool Program	4	3	2	1	0
Pre-school	4	3	2	1	0
Parenting Skills	4	3	2	1	0
Tutoring/Academic Achievement	4	3	2	1	0
EDUCATION RESOURCES					
GED	4	3	2	1	0
Reading & Writing	4	3	2	1	0
Financial Aid/Scholarships	4	3	2	1	0
Post High School Education	4	3	2	1	0
English as a Second Language	4	3	2	1	0
First Aid/CPR	4	3	2	1	0
Spanish Classes	4	3	2	1	0
EMPLOYMENT & CAREER DEVELOPMENT					
Computers	4	3	2	1	0
Small Business Development	4	3	2	1	0
Job Search Skills (Resumes/Cover letters)	4	3	2	1	0
HEALTH CARE & EMOTIONAL WELL-BEING					
Medical & Dental	4	3	2	1	0
Health Insurance	4	3	2	1	0
Nutrition and Cooking	4	3	2	1	0
Alcohol and Drug Abuse Prevention	4	3	2	1	0
Domestic Violence Prevention	4	3	2	1	0
Anger Management	4	3	2	1	0
Conflict Resolution	4	3	2	1	0
Household Organization	4	3	2	1	0
FINANCIAL WELLNESS					
Budgeting and Banking	4	3	2	1	0
Homeownership Education	4	3	2	1	0
Individual Development Accounts	4	3	2	1	0

3. How much would you benefit from programs and activities for the following groups?

Please use the following scale: 4, meaning you would greatly benefit, to 0, it would be of no benefit to you.

	Great Benefit			No benefit at all	
Seniors (62 years or older)	4	3	2	1	0
Adults (21-61 years old)	4	3	2	1	0
Young adults (14-20 years old)	4	3	2	1	0
Children (5-13 years old)	4	3	2	1	0
Pre-school	4	3	2	1	0
Infants	4	3	2	1	0
At-risk children/youth	4	3	2	1	0
New to the Area	4	3	2	1	0
Other _____	4	3	2	1	0

4. Which of the following recreational activities would you be interested in attending?

Please check all that apply:

- Arts and Crafts
- Community BBQs and Potlucks
- Community Children Activities
- Movie Night
- Music Events

5. Would you be interested in helping develop and provide any community activities as a volunteer/community leader?

- Yes No Maybe

Comments: _____

6. How safe do you feel in the following areas?

Please use the scale below: 3, meaning very safe, to 0, not at all safe.

- ____ your apartment ____ your apartment complex ____ your neighborhood
 3--very safe 2--mostly safe 1--somewhat safe 0--not at all safe

7. What, if any, are your concerns about safety in your community? _____

8. Please let us know what you like best about your apartment complex: _____

9. If you would like to be contacted regarding any of the above services, please leave your name, telephone number, and/or e-mail.

Name: _____
 Telephone: _____ E-mail: _____

THANK YOU FOR COMPLETING THIS QUESTIONNAIRE AND HELPING TO MAKE A DIFFERENCE IN OUR COMMUNITY.

*Please return survey to on-site manager; or drop off,
 or mail to **HAJC office:**
(Attn: Susan Lynch)
2251 Table Rock Road, Medford, OR 97501*