

Decas Steering Committee

Community Center Survey Questions

All answers are optional, and all survey results will be anonymized and only reported in an aggregated form to understand overall community needs.

Section 1: Community Center

1. How do you feel about repurposing the former Decas Elementary School as a community center?
 - Unsure
 - Strongly opposed
 - Opposed
 - Neutral
 - Support
 - Strongly support
2. Why do you feel that way?
3. Are you aware of the proposed funding for the project?

4. Which proposed services/activities would you potentially use? (Select all that apply)

- Pre-K childcare
- After School Care
- Adult education – enrichment classes
- Adult Education – job readiness & basic skills
- Maker Space/Science, Technology, Engineering, and Mathematics (STEM) Labs
- Artist Space
- Coworking/Networking Space
- Council on Aging portfolio
- Serving the Health Insurance Needs of Everyone (SHINE)
- Veterans Services
- Disability Services
- Childcare
- Grounds (playground/ sports fields/courtyard/other open space)
- Environmental Education
- Social Events – community meals, dinner & a movie, game nights
- Cooking Classes in the industrial kitchen
- Trainings/conferences
- Function/Event rentals
- Recreational rental events
- Kitchen “culinary startups”

5. Are there any services that you would like to see offered? _____

6. Do you know of any organizations, departments, or offices you think would be interested in renting or accessing space in Decas?

7. Final comments: _____

Section 2: Demographic Information

1. What is your age Range?
 - 18-24
 - 25-36
 - 37-48
 - 48-64
 - 65+
2. What is your sex? M / F / Other
3. What is your ethnicity? _____
4. Are you a veteran or active-duty military? _____

Section 3: Household Information

1. What is your total household size: _____
2. Are children under 15 present in your household? If so, how many? _____
3. Are elders over 65 present in your household? If so, how many? _____
4. What is your total household Income: _____
5. What is your employment status? _____

Section 4: Social Needs:

- 1. If you have children in your household, do you have access to sufficient and reliable childcare?
Y / N**
- 2. If you have elders in your household, do you have access to sufficient and reliable eldercare?
Y / N**
- 3. In the past 12 months have you ever had a problem getting enough food to eat?
Y / N**
- 4. In the past 12 months have you had utilities disconnected or were under threat of disconnection?
Y / N**
- 5. In the past 12 months have you experienced or were on the verge of experiencing homelessness?
Y / N**
- 6. Do you have difficulty accessing social services? This could include waiting lists, inconsistent service, or other difficulties you may face.**
- 7. In the past 12 months have you had a problem getting transportation to an appointment or event?
Y / N**