

## RSVP VOLUNTEER SATISFACTION SURVEY

Dear RSVP Volunteer:

We need your help! Annually, we are required by our corporate sponsor, the Corporation for National and Community Service, to do an evaluation of the RSVP program. Your responses to this survey will greatly assist RSVP in our quest to improve our services and fulfill our grant requirements. Please return this form by **January 10, 2012** either by mail or drop off at one of the RSVP offices in Corning, Hornell or Bath. The survey is also available on-line at [www.steubencony.org/rsvp](http://www.steubencony.org/rsvp). You may print, complete and mail in the survey or complete on-line and email back to RSVP. Thank you.

Name:

How long have you been an RSVP volunteer?

Where do you currently volunteer?

<p>Your Gender:</p> <p>Male <input type="checkbox"/></p> <p>Female <input type="checkbox"/></p>	<p>Your age:</p> <p>55 - 64 <input type="checkbox"/></p> <p>65 - 74 <input type="checkbox"/></p> <p>75 - 84 <input type="checkbox"/></p> <p>85 - 94 <input type="checkbox"/></p> <p>95 or older <input type="checkbox"/></p>	<p>How long have you been an RSVP volunteer?</p> <p><input type="checkbox"/> Less than one year</p> <p><input type="checkbox"/> 1 – 5 years</p> <p><input type="checkbox"/> 6 – 10 years</p> <p><input type="checkbox"/> 10 – 15 years</p> <p><input type="checkbox"/> More than 15 years</p>
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Please check the appropriate box below:

Please tell us how you feel about:	Extremely Satisfied	Somewhat Satisfied	Somewhat Dissatisfied	Extremely Dissatisfied
1. Your current RSVP volunteer assignment(s)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The RSVP placement process	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The positive impact you make through your volunteer assignment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. (Agency) Training received in order to do your volunteer assignment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Cooperation you receive From RSVP?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Comments:** Please give us your thoughts, comments and suggestions on any aspect of your volunteer experiences:

6. Would you like to increase your volunteer activities? If yes, check all that you are interested in doing.

Adding another ongoing volunteer assignment

- Being on call to help out with one time special events
- Being on call to help out with disaster relief
- Serving as a volunteer in a leadership role
- Volunteering using specific skills or talents that are not being used at this time \*\*

\*\* If yes, what skills/talents would you be willing to share?

We would like to know if your participation as an RSVP volunteer has made any change to your life. Please read each of the following suggestions and answer as appropriate:

	Changed negatively	Not changed	Changed Positively
7. Your sense of accomplishment has:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Your feeling that you have a purpose has:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Your feeling that you can make a positive difference in another person's life has:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Your looking forward to each new day has:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Your physical health has:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Your sense of well-being has:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Your sense of self-esteem has:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Since you began your participation in this program, the overall quality of your life has:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

15. How are you recognized through your volunteer work?

16. What types of recognition do you feel are most valuable?

17. What types of benefits do you find to be most valuable, related to your volunteer experience? (Ex. supplemental insurance, mileage reimbursement, etc.)

18. Do you have a computer or access one from another location (ex. library or senior center)?  
 Yes  No

19. Have you ever visited the RSVP website?      Yes  No

20. Have you ever visited sites that provide information about volunteer opportunities such as Volunteer Match, Serve.Gov, or 211 Give Help (within Steuben County)? Yes  No

If yes, have you found opportunities through one or more of the sites? Yes  No