Q1. Do you use Selly Oak Library?	
Yes	No
: What days	Monday Tuesday Friday Saturday
: What times	Morning Afternoon Evening
Q2. How often Daily Weekly Monthly Less often Don't visit	do you visit this library?
Q3. If you had a choice what times would you prefer to use this library?	
Q4. If you had a choice what days would you prefer to use this library?	
The state of the s	nything, stops you using this library more often? in much information as possible.

OC What do you like about this library?
Q6. What do you like about this library?
Q7. What don't you like about this library?
Q8. If you don't use this library – why not? Please tick all that apply
Books and magazines: Aren't relevant to me Are too old Not enough information books Not enough adult fiction Not enough children's books Want to take out more books per visit Fines are too high Shouldn't have to pay fines if books are late Shouldn't have to pay fines if on a reduced income Other – please give as much information as possible
Services and activities on offer; Not enough activities for children Not enough activities for adults Activities are on days or at times that I am unable to attend Activities make the library too noisy The library should have a DVD collection The library should have a CD collection Other – please give as much information as possible

#### Staff:

Please give as much information as possible

## Parking:

no car park
Other – please give as much information as possible

## **Opening hours:**

not open at times I can visit not open on days I can visit

### **Computers:**

The computers are too slow
There aren't enough computers
I want to use the computers for longer than 2 hours at a time
I want to use the computers for longer than 6 hours a week
Other – please give as much information as possible

I don't need to use the library as I get all my books and information elsewhere

Is there anything else that stops you using the library – please include as much information as possible.

# Thank you

#### **Personal information**

## What age are you

0-5

5-11

12-18

19-25

26-55

56-65

Over 65

## What is your gender?

Male

Female

Transgender

Would rather not say

## Do you have a disability?

Yes

No

## How would you describe your ethnic origin?

#### White:

British

White Gypsy/Roma

White traveller

Eastern European

Irish

Western European (not UK)

Irish traveller

# **Mixed Heritage:**

White and black Caribbean

White and black African

White and Asian

Black and Asian

#### Asian or Asian British:

Indian

Pakistani

Bangladeshi

Kashmiri

Black or black British

Caribbean

African

Somali

### Chinese or other ethnic background

Chinese

Vietnamese

Arab

Kurdish

Yemeni

Afghani

Iranian

#### Other:

#### Postcode:

If you wish to be contacted about opening hours in the future - please put your contact details here - e mail preferred if possible.

#### Confidential information

Birmingham City Council is committed to equality of opportunity in delivering services, irrespective of your gender, race, disability, colour, ethnic or racial origin, nationality, sexuality, gender identity, religion or race. This information is confidential and under the Data Protection Act 1998 will not be used for any purpose other than that stated.

