Demographic Information: Please select the category th	nat applies t	o you.							
1. Gender*									
Male Female									
Gender O									
2. Classification*									
Freshman Junior Sophomore Senior	Graduate Student	Alumni	Admnistra	tor Facult	ty Staff Other				
Classification	$\circ$	$\circ$	0	0	0 0				
3. Marital Status *									
Single Married Divorced									
Marital Status									
4. Age*									
17-19 20-22 23-25 26-28 29-31 32 and over									
Age O O O O									
5. On a weekly basis, how often do you participate in intramural activities?*									
	1-2 times	3-4 times	5-7 times	8-9 times	10 or more times				
On a weekly basis, how often do you participate in intramural activities?	0	$\circ$	0	0	0				
6. On a weekly basis, how often do you pa	articipate	in rec	reationa	l activit	ies?*				
	1-2 times	3-4 times	5-7 times	8-9 times	10 or more times				
On a weekly basis, how often do you participate in recreational activities?	0	$\circ$	0	0	0				

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## 7. PROGRAM SATISFACTION: Please indicate your level of satisfaction with the following programs. \*

	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	N/A
Basketball		$\circ$		$\circ$		$\circ$
Football		$\bigcirc$	$\odot$	$\circ$		0
Swimming		$\circ$	$\bigcirc$			$\bigcirc$
Racquetball		$\circ$	$\circ$	$\circ$	$\circ$	$\bigcirc$
Softball		$\circ$	0			$\bigcirc$
Martial Arts		$\circ$	$\bigcirc$			$\bigcirc$
Tumbling		$\circ$	$\circ$		$\circ$	$\bigcirc$
Play Station 3		$\circ$	$\bigcirc$		$\circ$	0
Dominoes		$\circ$	$\circ$			$\bigcirc$
Tennis		$\circ$	$\bigcirc$			$\bigcirc$
Faculty/Staff Club		$\circ$	$\circ$	$\circ$	$\circ$	$\bigcirc$
Indoor Soccer		$\circ$	$\circ$	$\circ$	$\circ$	$\bigcirc$
Outdoor Soccer		$\circ$	$\bigcirc$			$\bigcirc$
Volleyball program		$\circ$	$\bigcirc$			$\bigcirc$
Outdoor Activity Club		$\circ$	$\circ$	$\circ$	$\circ$	$\bigcirc$
Weight Training		$\circ$	$\bigcirc$			$\circ$
Table Games		$\circ$	$\bigcirc$			$\bigcirc$
Table Tennis		$\circ$	$\circ$	$\circ$	$\circ$	0
Aerobics		$\circ$	0	$\circ$	$\circ$	$\bigcirc$

## 8. OVERALL SATISFACTION: Please indicate your level of satisfaction with the features of the Intramural & Recreational Sports program. \*

	Very Dissatisfied	Dissatisfied	Neutral	Satisfied	Very Satisfied	N/A
The overall Intramural and Recreational Sports program.	$\circ$	$\circ$	$\bigcirc$	$\circ$	$\circ$	0
The facilities.		$\circ$	$\bigcirc$	$\circ$	$\bigcirc$	0
The staff and instructors.			$\bigcirc$	$\circ$		$\bigcirc$
The equipment.			$\bigcirc$			$\odot$
The variety of programs offered.						$\odot$

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The hours of operation.	$\circ$	$\circ$	$\circ$	0	$\bigcirc$	$\circ$			
9. Feel free to leave us comments about the survey and/or the Intramural and Recreational Sports program.									
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