



Rotaract District 9470 First Impressions

This questionnaire is designed to give you the opportunity to provide honest feedback about what you thought of your first Rotaract meeting.

This is entirely optional, and you do not need to complete every question if you don't want to. It just gives us a chance to examine problems or to improve how we conduct our meetings and welcome new people. If you prefer to be anonymous, that is fine.

We hope your first experience with Rotaract was a pleasant one, but if it wasn't, we need to know. You are welcome to fill it in at the end of the meeting, or take it away with you and post it back to us at: **Rotaract Questionnaire, PO Box 817, South Perth 6951**. Thank you for your time – and we hope to see you again soon!

1. You

1. Name _____ 2. Date of Birth ____/____/____

2. Outside commitments

1. Do you work? No Full time Part time
Profession _____

2. Do you study? No Full time Part time
Course _____

3. Are you currently a member of any other clubs or organizations? If so, which ones?

4. Please indicate which times suit you best to participate in Rotaract activities:

Monday evening <input type="checkbox"/>	Tuesday evening <input type="checkbox"/>	Wednesday evening <input type="checkbox"/>
Thursday evening <input type="checkbox"/>	Friday evening <input type="checkbox"/>	
Saturday morning <input type="checkbox"/>	Saturday afternoon <input type="checkbox"/>	Saturday evening <input type="checkbox"/>
Sunday morning <input type="checkbox"/>	Sunday afternoon <input type="checkbox"/>	Sunday evening <input type="checkbox"/>

5. Any general comments about time / commitments? _____

3. Your perception of Rotaract

1. How did you find out about Rotaract?

- Someone in Rotaract: Boyfriend/Girlfriend Friend Sibling
 Parents: Ex-Rotaractor Rotarians Other
 Other Rotary programme: RYLA Handicamp Other
 Internet: Rotaract site Volunteer site Other
 Other: Please specify _____

2. What initially interested you to try out Rotaract? _____

3. What do you hope to get out of Rotaract if you join? _____

4. Which areas are of particular interest to you (choose all that apply):

- Social activities
 Making new friends
 Networking
 Helping the community:
 Youth Environment Underprivileged Health
 Education Humanitarian Aid Other _____
 Organising functions / projects
 Hands-on work
 Going on exchange overseas
 Friendship exchanges (small team) Study exchanges (small team)
 Volunteer on projects (individual)
 Learning about other cultures
 Corresponding / chatting online with people overseas
 Learning new skills at seminars / workshops
 Developing / honing leadership skills
 Career development

5. Any other comments? _____

4. The Meeting

1. Which Rotaract Club did you attend?
Darling Range Goldfields South Perth
2. Did you enjoy your first Rotaract meeting? Yes No
If no, which aspect(s) didn't you like ? _____

3. What do you think of the meeting venue:
- | | | |
|------------------------------|------------------------------------|--|
| Location | Good <input type="checkbox"/> | Hard to Find <input type="checkbox"/> |
| Parking | Good <input type="checkbox"/> | Bad <input type="checkbox"/> |
| Safety | Good <input type="checkbox"/> | Felt uncomfortable <input type="checkbox"/> |
| Lighting (including parking) | Good <input type="checkbox"/> | Too dark <input type="checkbox"/> |
| Noise Levels | Too quiet <input type="checkbox"/> | Good <input type="checkbox"/> Too noisy <input type="checkbox"/> |
| Other people at venue | Too few <input type="checkbox"/> | Good <input type="checkbox"/> Too many <input type="checkbox"/> |
4. Which words would you use to describe the club members in general (select all that apply)?
- | | | | | |
|------------------------------------|-----------------------------------|---------------------------------------|-------------------------------------|-------------------------------|
| Welcoming <input type="checkbox"/> | Cold <input type="checkbox"/> | Friendly <input type="checkbox"/> | Unfriendly <input type="checkbox"/> | Rude <input type="checkbox"/> |
| Weird <input type="checkbox"/> | Pleasant <input type="checkbox"/> | Professional <input type="checkbox"/> | Immature <input type="checkbox"/> | Fun <input type="checkbox"/> |
5. Did you feel welcome at the meeting? Yes No
6. Did you find the meeting length: Too Short Just Right Too Long
7. If there was a guest speaker at the meeting, were they: Interesting Boring
8. Did the club socialise (chat / go out for a drink) after the meeting? Yes No
9. Would you attend a meeting at this Rotaract club again? Yes No
If not, what changes would entice you to come along again? _____

10. Would you try out another Rotaract club? Yes No
11. Are there any changes you would like to see made to the meeting format? _____

12. Other comments _____

