

**FACULTY LIBRARIAN  
STUDENT FEEDBACK SURVEY**

Year/Term \_\_\_\_\_

This questionnaire gives you the opportunity to express your views on the services you have received from this faculty librarian. Since the faculty member is very interested in your opinion, please read each item carefully. This survey is ANONYMOUS and individual responses will be kept CONFIDENTIAL. Summary totals will be sent to the faculty member after the term is over and will also be made available to students.

**Write the identification number of the faculty librarian and the year/term on the top of this form. In the section marked IDENTIFICATION NUMBER on the answer sheet write the identification number in spaces A-I and then bubble the corresponding space under each letter. Before you begin, read each statement carefully and decide how you want to respond before you mark the answer sheet. If you are using a pencil, you can change your responses by erasing completely. If you are using ink, crossing out will invalidate your response. Red ink cannot be used. Make only one mark for each item and make sure that the number on the answer sheet matches the number of the item you are answering.**

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**Use the following scale to respond to the items below.**

- A = You STRONGLY AGREE** with the statement as it applies to this faculty member.
- B = You AGREE** more than you disagree with the statement as it applies to this faculty member.
- C = You DISAGREE** more than you agree with the statement as it applies to this faculty member.
- D = You STRONGLY DISAGREE** with the statement as it applies to this faculty member.
- E = This statement DOES NOT APPLY** to this faculty member or you are **UNABLE TO COMMENT**.

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**FACULTY LIBRARIAN STUDENT FEEDBACK SURVEY**

1. The faculty member treats me with respect.
2. The faculty member is knowledgeable about his/her subject matter.
3. The faculty member presents information clearly.
4. The faculty member is organized in his/her work.
5. The faculty member is available.

**Optional campus-based library items (up to 5 items):**

- 6.
- 7.
- 8.
- 9.
- 10.