



EXHIBITS MASTER SURVEY

Date of Visit:

Instructions: Tell us about your experience today by *circling* your choices. This valuable information will improve future public outreach programs. Please turn in your completed survey to the designated area or to a staff member. We appreciate your feedback. Thank you for helping us serve you better.

Numbers are for internal purposes only

1.	Overall, I am satisfied with my museum experience today (101).*		
	Strongly Agree	Agree	Disagree
	Strongly Disagree		
3.	Is this your first visit to the Richard Nixon Presidential Library and Museum (102)?		
	Yes	No	
	How did you learn about the Richard Nixon Presidential Library and Museum?		
5.	Brochure or Flyer	Calendar of Events	Magazine
	Newsletter	Newspaper	Promotional Signs or Billboards
	Radio or Television	Social Media (Facebook or Twitter)	Website
	Word of Mouth or Personal Recommendation	Charter or Group Tour	School Tour
	Other:		
10.	The exhibit galleries and public spaces were clean and well maintained (103).		
	Yes	No	
12.	If no, please describe/explain:		
13.	The exhibit lighting, audiovisual technologies and interactive features were fully functioning (104).		
	Yes	No	
15.	The Richard Nixon Presidential Library and Museum signage was clear and instructive.		
	Yes	No	
17.	The interactive displays contributed positively to my experience.		
	Yes	No	
18.	Sex (105):		
	Female	Male	
	Country:		
20.	State:	Zip Code:	
	Please leave a preferred email address, if you would like to receive information about upcoming events:		

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