



INDEPENDENT LIVING PERFORMANCE MEASURE SURVEY

OMB Control Number: [3045-XXXX]
Expiration Date: 10/31/2024



Thank you for taking the time to complete this survey. We would like to know how the AmeriCorps Seniors volunteer who has been assisting you has affected your life.

All information will be kept confidential; please do not disclose your name. You may choose not to answer a question.

This 1st question is about how many hours of service that you may have received in the past 4 weeks from your AmeriCorps Seniors volunteer.

Tell us how many TOTAL HOURS in a typical week you received services.

Here is an example of how Mrs. Jones would answer question #1:

Her AmeriCorps Seniors volunteer usually spends one hour on Monday with and two hours on Wednesday. Therefore, the total hours a week that she receives services is 3 hours a week.

1. In a typical week, my AmeriCorps Seniors volunteer is with me for

hours

Please turn the page for the questions 2-13



Because I Have a AmeriCorps Seniors volunteer ...

	Strongly Disagree	Somewhat Disagree	Somewhat Agree	Strongly Agree
2) ... I feel less lonely.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) ... I feel I have close ties to other people.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) ... I am able to do the things I need to do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) ... I am able to do most things I want to do.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) ... I am more satisfied with my life.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7) ... I can remain living in my own home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8) ... I am able to get to the grocery store.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9) ... I am able to get to medical appointments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10) ... I am able to take care of other necessary errands/appointments.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11) ... I am eating regularly scheduled meals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



12) Overall, I am satisfied with my AmeriCorps Seniors volunteer.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13) Overall, the AmeriCorps Seniors Program has met my expectations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>