

**Emporia Accessibility Advisory Committee
Community Survey**

Your response on this survey will be used to help the Accessibility Advisory Committee provide guidance to City Administration regarding improving access to services, facilities, programs, and communications in the City. All surveys will be reviewed at monthly meetings of the Accessibility Advisory Committee. Summaries of survey responses will be provided to the City Commission to help prioritize community needs, assure accessibility problems are being addressed, and improve compliance with the Americans with Disabilities Act.

By checking a number, please rate the City's accessibility in the following areas indicating:

1 - Good, 2 - Acceptable, 3 - Barely Acceptable, 4 - Needs Improvement, 5 - Needs Immediate Attention. Please list specific concerns or locations on the line following.

1__ 2__ 3__ 4__ 5__ Downtown sidewalks and ramps: _____

1__ 2__ 3__ 4__ 5__ Residential sidewalks and ramps: _____

1__ 2__ 3__ 4__ 5__ Traffic signals: _____

1__ 2__ 3__ 4__ 5__ City buildings: _____

1__ 2__ 3__ 4__ 5__ Specific departments within the City: _____

1__ 2__ 3__ 4__ 5__ City services: _____

1__ 2__ 3__ 4__ 5__ Participation in public meetings: _____

1__ 2__ 3__ 4__ 5__ Communication or publications: _____

1__ 2__ 3__ 4__ 5__ City park facilities: _____

1__ 2__ 3__ 4__ 5__ Recreation facilities or services: _____

1__ 2__ 3__ 4__ 5__ Availability of assistive technology: _____

Which of the areas listed above should be the first priority for improvements?

If you know of any other accessibility problem(s), please list them below and include the location.

If anyone in your household has a disability that impairs their access to city services, facilities, programs, or events, what type of disability accommodation do they need and is that need being met?

If you have out of town visitors, clients, or customers with disabilities, please share any comments they have made about accessibility in the City of Emporia or any accessibility problems they have mentioned.

Would you be interested in serving on the Accessibility Advisory Committee in the future? _____

Your contact information is optional but could help us better address issues, if we have questions.

Name: _____

Address: _____

Phone: _____

E-mail: _____

Thank you for taking the time to complete this survey.

Please return completed form to:

Patty Gilligan, ADA Coordinator,

City of Emporia, 521 Market Street, Emporia, KS 66801,

FAX 620-341-4337, Phone 620-343-4291,

pgilligan@emporia-kansas.gov

To obtain this survey form in an alternative format, request an accommodation, discuss accessibility or discrimination issues, file a complaint, or ask questions about this survey, contact Patty Gilligan, Human Relations/ADA Coordinator, at 620-343-4291 or e-mail p.gilligan@emporia-kansas.gov