

## SATISFACTION QUESTIONNAIRE

Thank you for answering this questionnaire. We would be grateful if you could spend 5 minutes answering some questions helping us to improve on our services. Your answers to this survey will be anonymous.

Date: ...../...../.....

Day of the week: .....

Time: ..... : .....

### 1. Sex:

- a. Male
- b. Female

### 2. Age:

- a. Under 18
- b. Between 18 - 25
- c. Between 26 - 45
- d. Between 46 - 65
- e. Over 65

### 3. Education:

- a. No education
- b. Primary Education
- c. Secondary Education
- d. Vocational Education and Training
- e. Higher/University Education
- f. Others

### 4. Occupation *(more than one option is permitted)*

- a. Student
- b. Worker
- c. Freelance, professional, businessman/woman
- d. Housework
- e. Unemployed
- f. Retired
- g. Others

### 5. Coming from:

Home country.....

Province (only for Spanish residents) ..... Zip Code: .....

### 6. Condition:

- a. Resident
- b. Tourist
- c. Others *(please state)*.....

### 7. First visit:

- a. Yes
- b. No

**8. How did you learn about the Museum?** *(more than one option is permitted)*

- a. Newspaper
- b. Publicity
- c. Internet
- d. Tourist Guide
- e. Tourist Office
- f. Friends, family
- g. Others *(please state)*.....

**9. Have you come:**

- a. Alone
- b. With someone else
- c. Group visit

**10. Character of your visit:**

- a. Deliberate
- b. By chance

**11. Your visit started:** ..... : .....

**12. Your visit finished:** ..... : .....

**13. Itinerary** *(more than one option is permitted)*

- a. All the Museum
- b. Temporary Exhibition
- c. The "Pieza Invitada" program
- d. Art 20<sup>th</sup> Century Collection
- e. Juana Francés Collection
- f. Eusebio Sempere Collection

**14. Please, evaluate your visit**

*(please use from 1 for the lower to 7 for the higher value)*

1      2      3      4      5      6      7

**15. Please, evaluate the inside of the Museum**

*(please use from 1 for the lower to 7 for the higher value)*

1      2      3      4      5      6      7

**16. Please, evaluate the information given and the treatment received by the staff**

*(please use from 1 for the lower to 7 for the higher value)*

1      2      3      4      5      6      7

**17. Are there any additional comments you would like to make about your visit?**

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**THANK YOU VERY MUCH FOR YOUR TIME**