

Help us to Help you!

Your Views on Council Meetings

The Borough Council is keen to improve its performance and is seeking the views of Swindon residents on how well it is meeting their needs and on what it can do to improve.

This not only relates to the delivery of services.
We would like to find out your views on how Council meetings operate and what we could do to improve things for you.

As a first stage of this exercise please could you complete this simple questionnaire about the meeting you attended.

Please take a few minutes to help us to help you.
All your answers will be completely confidential.

Questionnaire

What meeting did you attend?

When was the meeting held?

(Date) _____

Please return this form to the Committee Officer present at the meeting or in the pre-paid envelope provided.

Part 1 About Your Attendance at this Council Meeting

1a. In what capacity did you attend this meeting? PLEASE TICK ✓ THOSE THAT APPLY

As a resident of Swindon

As a member of the Press

As a representative of an interest group

Other (please specify)

1b. How often do you attend this meeting?

First time

Occasionally

Regularly

1c. What other meetings have you attended in the last year? PLEASE TICK ✓ THOSE THAT APPLY

Council

Cabinet

Planning Committee

Overview and Scrutiny Commissions

Education Partnership Board

Other (Name of meeting)

1d. Did you attend to ask a Public Question? Yes No

1e. If you did attend to ask a Public Question were you able to do this? Yes No

If no, what was the reason? PLEASE TICK ✓ THOSE THAT APPLY

Not enough time available

Chair advised that question not relevant under Standing Orders

Other (please specify) _____

(If you did not have the opportunity to ask your question please use the space on page 3 to advise us of your question and we will forward it to the Department or Councillor concerned. Your address details will be required so a response can be sent to you.)

1f. **How satisfied are you with the way that the meeting was conducted?**

- Very satisfied
- Fairly satisfied
- Neither
- Fairly dissatisfied
- Very dissatisfied

If you are dissatisfied, please state why _____

What do you feel could have improved the way that this meeting was conducted?

Part 2 Information

2a. Did you receive any information prior to this meeting? Yes No

If yes, was the information clear? Yes No

2b. Were you aware that Committee agendas are made available to the public on request (for a small fee in advance of meetings)? Yes No

2c. Was the time of the meeting convenient to you? Yes No

If no, what time of the day would be most convenient? _____

Morning Lunchtime Afternoon Teatime Evening

2d. Was the venue for the meeting easily accessible? Yes No

If no, what could be done to improve accessibility?

2e. What other comments would you like to make about the meeting you attended?

Part 3 About Yourself

To ensure that we are meeting the needs of all residents it is important that we ask you a few questions about yourself. As with all the questions, your answers will be completely confidential.

3a. Are you male or female? PLEASE TICK ✓ ONE BOX

Male Female

3b. What is your age? PLEASE TICK ✓ ONE BOX

under 15

16 – 24

25 – 34

35 - 44

45 – 54

55 – 64

65+

3c. To which of these groups do you consider you belong to? PLEASE TICK ✓ ONE BOX

White British Irish Italian Polish

Any other White background

(PLEASE WRITE IN) _____

Black or Black British Caribbean African Any other Black background

(PLEASE WRITE IN) _____

Mixed White & Black Caribbean White & Black African

White & Asian Any other mixed background

(PLEASE WRITE IN) _____

Asian or Asian British

Indian Pakistani Bangladeshi

Any other Asian background

(PLEASE WRITE IN) _____

Chinese

Other ethnic group (PLEASE WRITE IN) _____

Part 3 About Yourself continued

3d. Do you consider yourself to have a disability? PLEASE TICK ✓ ONE BOX

Yes No

3e. If you answered yes to 3d, is there any action we could take to make your attendance easier? Are there any special facilities you would like to see us provide?

Thank you for taking the time to complete this questionnaire.
Please leave it on your seat or return it to the Committee Officer present.

If you need more time to complete this questionnaire it can be returned directly to:
Committee and Member Services, Director of Law and Corporate Governance's Department,
Civic Offices, Euclid Street, Swindon SN1 2JH using the pre-paid envelope provided.

Should you require information in a larger print size or in another format, please contact customer services: 01793 463725

यदि आपको अन्य फॉर्मट (प्रपत्र) में जानकारी चाहिए तो कृपया ग्राहक सेवा प्रतिनिधि से टेलीफोन नंबर 01793 463725 पर संपर्क करें।

Hindi

Per informazioni in altro formato, contattare il Servizio Clienti chiamando il numero: 01793 463725

別の構成・形式で資料をご使用される必要がある場合には、次の番号の弊社顧客サービスまでお問い合わせ下さい。電話：01793 463725

Japanese

আপনার যদি অন্য কোন আকারে বা রূপে তথ্যের দরকার হয়, কাস্টমার সার্ভিসেস্কে 01793 463725 নম্বরে টেলিফোন করুন।

Bengali

Jeśli chcesz uzyskać informacje w innym formacie, prosimy o kontakt z Wydziałem Usług dla Klientów pod numerem telefonu 01793 463725.

Polish

如果您需要用其它语言或方式咨询这方面的信息，请拨打我们的顾客服务热线：01793 463725

Chinese

ਜੇਕਰ ਤੁਹਾਨੂੰ ਕਿਸੇ ਹੋਰ ਫਾਰਮੈਟ ਵਿਚ ਜਾਣਕਾਰੀ ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕ੍ਰਿਪਾ ਕਰਕੇ ਕਸਟਮਰ ਸਰਵਿਸਜ਼ ਨਾਲ ਟੈਲੀਫੋਨ ਨੰਬਰ 01793 463725 ਤੇ ਸੰਪਰਕ ਕਰੋ।

Punjabi

જો તમને બીજા ફોર્મેટ (પત્રક) માં જાણકારી જોવતી હોય તો કૃપા કરી ગ્રાહક સેવા પ્રતિનિધિનો ટેલીફોન નંબર 01793 463725 ઉપર સંપર્ક કરો.

Gujarati

اگر آپ کو کسی دیگر زبان یا دوسری شکل میں معلومات درکار ہوں
01793 463725 پر فون نمبر سے رابطہ قائم کریں۔

Urdu