

# THE UNIVERSITY OF AKRON

## OFFICE OF RESIDENCE LIFE AND HOUSING

### EXIT QUESTIONNAIRE



Please take a moment to complete this form. Your feedback will be used to make various improvements in our residence life program to meet the changing needs of our residents.

<b>Name (optional):</b> _____		<b>DATE</b> _____	
<input type="checkbox"/> Male	<input type="checkbox"/> Female	<b>Age:</b> _____	<b>Semesters Lived in Residence Halls:</b> _____

**Hall(s) you live(d) in:**

- |                                 |                                  |                                   |                                     |  |                                 |
|---------------------------------|----------------------------------|-----------------------------------|-------------------------------------|--|---------------------------------|
| <input type="checkbox"/> Bulger | <input type="checkbox"/> Spanton | <input type="checkbox"/> Garson   | <input type="checkbox"/> Townhouses | <input type="checkbox"/> Exchange      | <input type="checkbox"/> Orr    |
| <input type="checkbox"/> Quaker | <input type="checkbox"/> Grant   | <input type="checkbox"/> Gallucci | <input type="checkbox"/> Ritchie    | <input type="checkbox"/> Sisler-McFawn | <input type="checkbox"/> Honors |

**Campus Involvement:**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Floor Representative  | <input type="checkbox"/> Hall Government     | <input type="checkbox"/> Community Service |
| <input type="checkbox"/> Student Organizations | <input type="checkbox"/> Fraternity/Sorority | <input type="checkbox"/> Other _____       |

1. How would you rate your experience with the residence halls?  
 Excellent     Very Good     Good     Fair     Poor
2. What aspects of residence hall life did you like most? (Check all that apply.)  
 Hall Government     Quality of Facilities     Resources Available  
 Interaction with Staff     Programs/Activities     Meal Plan/Dining  
 Variety of Living Options     Proximity to Campus     Good Value  
 Sense of Community     Safety/Security     Ability to Meet People  
 Other \_\_\_\_\_
3. What factors influenced your decision to leave the residence halls?  
 Price/Value     Safety/Security     Facilities Maintenance  
 Privacy     More Space     Too Many Rules/Regulations  
 Amenities (Cable TV, fiber optics, etc.)     Dining Alternatives  
 Other \_\_\_\_\_
4. After moving off campus, will you continue as a University of Akron student?  
 Yes     No     Undecided
5. What recommendations do you have to improve the quality of living in the residence halls? Please be specific regarding: (a) physical facilities, and (b) staffing and programming patterns.

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6. What factors would have led you to decide to stay in the residence halls? Please be specific.

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7. Do you have any additional comments and/or suggestions?

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**THANK YOU FOR YOUR TIME – WE VALUE YOUR INPUT!**