



The LIVING library

Take out your prejudice

“EVALUATION FORM FOR READERS OF THE LIVING LIBRARY”

Name (optional):

E-mail:

Your age:

Gender: male female

Nationality/ies: _____

Occupation: _____

Where did you hear about the Living Library?

TV Web Radio Newspaper Posters Friend Other source,
please specify _____.

Have you ever visited a Living Library before? Yes No

Which book/s did you take out today? (titles)

What was your impression of the Living Library?

1 2 3 4 5 (1-not good, 5-Very Good)

How did you like the selection of books and stereotypes available?

1 2 3 4 5 (1-inappropriate, insufficient, 5-very clear,
well described)

**How would you evaluate the support of the Library Library organisers
and the librarians?**

1 2 3 4 5 (1-not helpful at all, 5-very helpful)



Comments:

What was the most important experience for you while you have been reading the books?

Have you learned anything new in reading a book or several books of the Living Library?

Would you recommend others to become readers of the Living Library?

Would like to recommend any new books to be presented?

Other comments?

Thank you very much for your time and visit with us ♥

