

4C Diversity Play Kit Library Survey

Please complete the following play kit use survey.
Thank you! Your feedback is important to us!

DATE _____

KIT NAME & # (CIRCLE)

- #1 Dramatic Play FOOD #2 Dramatic Play HOME #3 Imaginative Play
- #4 Imaginative Play TODDLER #5 Animals & Dinosaurs #6 Puzzles
- #7 Wood Block Play #8 Toddler Soft Block Play
- #9 Music with Drums #10 Music with Tambourines

CHILD CARE (CIRCLE) Group Center Provider Family Provider

COUNTY (CIRCLE) Kenosha County Racine County

Please circle the number that most closely represent your opinions regarding the diversity kit:

	Disagree		Agree		Strongly Agree
The staff enjoyed using the kits.	1	2	3	4	5
The children enjoyed using the kits.	1	2	3	4	5
I would recommend these kits to other providers.	1	2	3	4	5
The kits are diversity appropriate.	1	2	3	4	5
What age group(s) did you use the kit with? Please list all of them.					
Approximately how many children used the kit?					
What activities did you do with the kit?					
Additional Comments/Suggestions (i.e. more or different toys/materials, guidance on usage, etc.)					