TO COUNTY OF SALE

City and County of San Francisco

Shelter Monitoring Committee

A Woman's Place Drop In Survey Questions
These surveys are not given to the site. The data is provided to the site but not the survey.

| 1. | Do staff treat you with respect? |
|----|--|
| | □□□ YES |
| | □ NO |
| | Please provide an example that describes your answer and identify any staff you find to be particularly respectful or disrespectful. |
| 2. | Do you feel discriminated against because of your age, disability, gender, race, religion, sexual orientation or transgender status? |
| | T YES |
| | □ NO |
| 3. | Do you feel safe at the shelter? |
| | T YES |
| | □ NO |
| 4. | How does staff respond to conflicts and arguments between clients? (Do they get involved? Do they ignore the conflict?) |