



Not In Our Town: Light in the Darkness Viewer Evaluation

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Dear Viewer,

We are trying to make our work better and to help funders understand the impact of what we do. This survey, of course, is totally voluntary. However, we would really appreciate your responses and comments. If any question is uncomfortable, please feel free to skip it. Thanks, in advance.

Note: Your e-mail and phone number will not be shared with anyone or any group, either for money or for other contact purposes. Our main interest is to understand how well we are reaching different groups, what you think of our efforts, and your suggestions about how we can do better.

Location of Screening (City, State): _____

1. How long have you lived in your community?

less than one year; about a year; 1-2 years; 3-9 years; 10+ years; always

2. Where were you born? (e.g. city, state/country) _____

3. Your Gender: _____ Ethnicity: _____

4. Age Group:

15 or younger; 16-18yrs; 19-25yrs; 26-35yrs;
 36-45yrs; 46- 55yrs; 56-65yrs; 66+yrs

5. Occupation/job (if any): _____

Or check if: student; home-maker; not working; retired

6. Did the film change or reinforce your attitude about how communities should address issues of diversity and respect?

Yes No

Please provide an example(s) of how the film changed or did not change your attitude:

Continued...

7. Have you ever done anything or gotten involved to counter hatred previously? What did you do (e.g. intervening, talking with others about a problem, joining with others to organize a response)?

Yes

No

If yes, please provide an example of the action(s) you took.

8. Do you think you'll do anything if you witness inter-group hatred in the future? (e.g. talk with others, intervene, join with others to organize a response) What?

Yes

No

If yes, please provide an example of the action(s) you took

9. Did watching the film suggest any new ways for you to get involved, or what should be done differently? What?

Yes

No

If yes, how did watching the film suggest new ways to get involved, or what should be done differently?

10. Is there something further we could do to help people like you get more engaged in countering hatred and conflict, and promoting respect and positive value of diversity? What?

Yes

No

If yes, please provide an example of the action(s) you took.

11. Can we contact you later this year to find out if the film caused any long-term effects? If so, please share with us your phone number (____) ____-____; and or/email _____

THANK You! Please mail, email or fax your evaluation form to:

Not In Our Town, P.O. Box 70232, Oakland, CA 94612

Phone: 510.268.9675

Fax: 510.268.3606

Email: info@niot.org

www.niot.org