



Pleasant Valley Recreation & Park District

ADA Public Input Survey

The Pleasant Valley Recreation and Park District is in the process of updating its Americans with Disabilities Act (ADA) Self-evaluation and Transition Plan. As part of this process, the District is asking for your input by completing this questionnaire which addresses accessibility of facilities, programs, services and activities offered to the public.

The purpose of this survey is to gather information on how District department and division programs or services are, or are not, accessible to persons with disabilities. The goal is that when each program, service or activity is viewed in its entirety, it is readily accessible to and usable by persons with disabilities.

1. **Optional:** Please complete the following:

Name _____

Email _____

Phone _____

I wish to remain anonymous

2. What role most adequately describes your association with the District and the representation you are providing?

Member of the public with a disability

Member of the public without a disability

Relative or caregiver of a person with a disability

District volunteer

Other: _____

3. Do you participate in programs, services, activities or events offered by the District?

No

Yes - Please list: _____

Not applicable

4. Do you know who to contact if you need assistance, have a concern or complaint, or need an accommodation to access a facility, service, or event?

No - I do not know who to contact

Yes - Please list who you would contact: _____

5. Have you ever requested an accommodation for a disability from the District?

- No
- Yes - Please describe the request: _____

6. Was your accommodation provided?

- No
- Yes
- Yes, but I was unsatisfied with how the accommodation was provided - Please elaborate:

Not applicable

7. Is the attitude of District staff towards persons with disabilities generally helpful, supportive, positive, and proactive in solving accessibility issues?

No - Please explain: _____

Yes

Somewhat

Do not know

8. Are you aware of any specific concerns, complaints, or problems regarding access for persons with disabilities to any of the programs, services, or activities provided by the District?

- No
- Yes - Please describe: _____

9. Do you know who the designated ADA Coordinator is for the District?

- No
- No, I have not had a need or reason to seek out this person.
- Yes - Please provide the name: _____

10. What do you feel should be the District's highest priority to improve accessibility for persons with disabilities?

Please return this survey by February 28, 2022, to:

Jessica A. Puckett, CPRP, ADA Coordinator
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TDD: by California Relay at 7-1-1