

Please fill out one survey per school.

Respondent/Title: _____ Total School Occupancy: _____

School: _____

School District: _____

County: _____ Municipality: _____

Mailing Address: _____

Phone #: _____ Email Address: _____

1. Does your school recycle?

- Yes No

2. Do you have any recycling awareness programs (posters, assemblies, clubs, etc.)?

- Yes No If Yes, please describe _____

3. Is cost a barrier for implementing existing or additional recycling efforts?

- Yes No

4. Is your recycling done as a single stream or is it source separated?

- Single Stream (When All Recyclables Are Mixed Together During Collection)
 Source Separated (Every Item Is Separated Into A Different Container)
 Dual Stream (Cardboard And Paper Separate From Bottles And Cans)
 No Recycling



If it is source separated what materials are separated for recycling at your school? (Check all that apply)

- Aluminum Batteries Corrugated Cardboard Electronics Glass Bottles/Jars
 Ink/Toner Light Bulbs Mixed Paper Office Paper Plastic Bottles/Jars
 Steel Cans Other _____

Would you like more information from your county or municipality to recycle any of the following items? (Check all that apply)

- Aluminum Batteries Corrugated Cardboard Electronics Glass Bottles/Jars
 Ink/Toner Light Bulbs Mixed Paper Office Paper Plastic Bottles/Jars
 Steel Cans Other _____

5. What percentage of paper/cardboard do you feel is actually recovered for recycling?

- None 25% 50% 75% Over 75%

6. List other materials you wish to recycle but are not recycling currently. (Separate each item by a comma)

