





Neighborhood Assessment Survey							
Dear Neighbor,							
Thank you for taking the effort to complete this short questionnaire. Our goal is to build a safer and more harmonious environment. Your input helps in identifying the strengths and opportunities for our neighborhood. Together we can make a difference!							
How long have y	vou lived in	this neight	oorhood?				
 1-2 y 3-5 y 5-10 10-20 	ears	vears					
Describe what y this stretch of th					ple: this bu	ilding block,	
How strongly c	o you feel	connecte	d to your imm	ediate neigl	nbors?		
Not at all	1	2	3	4	5	Strongly connected	
How strongly do) you feel c	onnected to	o your neighbo	rhood?			

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Not at all	1	2	3	4	5	Strongly connected	
How proud d	o you feel o	f your neighbo	orhood?				
Not at all	1	2	3	4	5	Extremely proud	
How safe do	you feel in y	our neighborh	iood?				
Not at all	1	2	3	4	5	Extremely safe	
Do you have	people you	can ask for he	p in your ne	ighborhood?			
)						
	ery few						
	good number any						
Do you have	friends in yc	our neighborhd	ood?				
)						
	ery few						
	good numbe	er					
• М	any						
Do you have	e conflicts i	n your neight	orhood?				
	ist one anv						
Are there other conflicts in this neighborhood?							
	C						







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 I know of one conflict There are some conflicts There are many conflicts
Would you like some help in resolving conflicts that you're involved in?
 Not applicable No Yes, please (leave your contact details below)
Would you like to be informed on initiatives that contribute to a stronger network and more harmonious neighborhood?
No thanks
Would you like to contribute to strengthening our network and bringing (even) more harmony in our neighborhood?
 No Yes (please leave your contact details below)
What else do you find important to mention about our neighborhood?
Your contact details (address, phone number and/or email address) - optional
Thank you for your time!