

ACTIVITY Adult Survey

Adult Survey Template

	Yes	No		
1. The last time you threw something away did you think about what bin to put it in?				
2. Did you think about where that item might go after you threw it away or who/what it might affect?	Yes	No		
3. Did you know that our school is a Zero Waste School?	Yes	No	1	
4. Do you view recycling/waste reduction as important?	Very Important	Important	No opinion	Not important
5. Why?	Explain:			1
6. How often do you recycle?	Always	Sometimes	Rarely	Never
7. What's the reason you don't recycle "always"?	Explain:			
8. How close is our school to achieving Zero Waste?				
9. What are the biggest barriers to changing recycling behaviors at our school?				



