



Community Committee Prospect Park Evaluation

Thank you for volunteering to help keep Prospect Park – *your Park* – a welcoming place. Completing this form helps the Prospect Park Alliance and City of New York/Parks & Recreation maintain Prospect Park as Brooklyn’s urban oasis.

Instructions: Please take a moment to read through the form. Answer as many questions as possible and make additional comments on the back. Circle the area you surveyed using the map on page 4. Also circle any trouble spots or problem areas. If you encounter any problem that needs immediate attention, please call 311. For emergencies, call 911.

Please mail the completed form to:

Prospect Park
95 Prospect Park West
Brooklyn, NY 11215.

Attention: Prospect Park Administrator

To hand deliver: drop off the form at any of the following locations: Litchfield Villa, Prospect Park Audubon Center or Wollman Rink. If you would like more information about this program, please visit: www.prospectpark.org, send an email to info@prospectpark.org or call (718) 965-8951.

Park Area Information _____

Section Inspected (see map on page 3) _____

Date, Day, and Time _____ Weather Report: _____

Trees and Green Spaces

Describe the natural features in your section (ballfields, lots of trees, grass, open fields, lake/water)

Were these features well maintained? Yes _____ No _____

If No, what problems did you see? _____

Did you enjoy being in this space? Yes _____ No _____

Why? _____

Additional comments _____

PATHS

Paved Walkways

Did you walk along paved walkways in your section? Yes ___ No ___

Did you find any hazards or other problems on your walk? Yes ___ No ___

If Yes, please describe _____

If you walked at dusk or at night, did you feel safe? Yes ___ No ___

Were there enough lampposts? Yes ___ No ___

How would you improve this path? _____

Unpaved Paths

Did you walk off paved areas? Yes ___ No ___ If Yes, where? _____

Do you or anyone you know typically take this direction? Yes ___ No ___

Did you walk along a designated nature trail? Yes ___ No ___

If Yes, were you able to find your way? Yes ___ No ___

Additional comments _____

STRUCTURES AND STATUES

Were there any major structures (such as bridges or buildings) or statues? Yes ___ No ___

Were they clearly marked with official signs? Yes ___ No ___ Interpretive Sign ___

What were they? _____

Did you feel they were in good condition? Yes ___ No ___

Were water fountains on your route? Yes ___ No ___

Were they working? Yes ___ No ___ Were they clean? Yes ___ No ___

Did you use them? Yes ___ No ___

Additional comments _____

RESTROOMS

Did you find a rest room? Yes ___ No ___ Did you inspect it? Yes ___ No ___

Was it working? Yes ___ No ___ Clean? Yes ___ No ___

Safe? Yes ___ No ___

Additional comments _____

LITTER

There is ___ no or almost no litter enough to fill a small grocery bag _____

___ enough to fill a large garbage bag _____more

Are there enough garbage cans? Yes ___ No ___

Did you see anyone littering? Yes ___ No ___

Were there any particular trouble spots? Yes ___ No ___

Additional comments _____

GRAFFITI

Does graffiti cover ___ no walls, benches, or other surfaces

___ about a quarter of these surfaces ___ about half ___ more
Were there any particular trouble spots? Yes ___ No ___ Where? _____
Additional comments _____

BENCHES

In area survey, did you find any benches? Yes ___ No ___ Did you sit? Yes ___ No ___
Were you comfortable? Yes ___ No ___ If No, why? _____
Was the bench broken? Yes ___ No ___ Was it properly painted? Yes ___ No ___
Was the surrounding area clean? Yes ___ No ___
Should there be more places to sit? Yes ___ No ___
Additional comments _____

SIGNS

Were there enough signs to help with location, direction, etc.? Yes ___ No ___
Did you find signs telling you how to get somewhere else? Yes ___ No ___
Were the signs easy to read? Yes ___ No ___
Was the information easy to follow? Yes ___ No ___
Additional comments _____

OVERALL OPINION

How would you grade your inspection of the park? Excellent ___ Good ___ Fair ___ Poor ___
Do you feel that the Park's rules were being followed during your visit? Yes ___ No ___
If No, please explain _____
Did you enjoy being in this part of the park? Yes ___ No ___
If Yes, why? _____

CONTACT INFORMATION

Name _____ Organization _____
Telephone _____ E-mail _____
May we contact you if we have further questions? Yes ___ No ___

Prospect Park Alliance, Community Committee
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(718) 965-8946
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info@prospectpark.org

