



City of Santa Clara

Meeting Agenda

Senior Advisory Commission

Special Meeting

Monday, January 26, 2026

5:00 PM

**Hybrid Meeting
1303 Fremont Street
Santa Clara, CA 95050**

The City of Santa Clara is conducting the Senior Advisory Commission meeting in a hybrid manner (in-person and a method for the public to participate remotely).

Please click this URL to join: <https://santaclaraca.zoom.us/j/85645074034>

Or join by phone: 669-900-683

Webinar ID: 975 9006 9803

CALL TO ORDER AND ROLL CALL

CONSENT CALENDAR

1. **26-57** [Review and Approve the Senior Advisory Commission Minutes of November 17, 2025](#)

Recommendation: Approve the Senior Advisory Commission Minutes of November 17, 2025

PUBLIC PRESENTATIONS

[This item is reserved for persons to address the body on any matter not on the agenda that is within the subject matter jurisdiction of the body. The law does not permit action on, or extended discussion of, any item not on the agenda except under special circumstances. The governing body, or staff, may briefly respond to statements made or questions posed, and appropriate body may request staff to report back at a subsequent meeting.]

GENERAL BUSINESS

2. **26-73** [Elect Rick Andrews to serve as Chair for FY 2025/26 Senior Advisory Commission](#)

Recommendation: Elect Rick Andrews to serve as Chair for FY 2025/26 Senior Advisory Commission

3. 26-58 [Discuss Senior Advisory Commission Work Plan Goals and Activities for FY 2025/26](#)

Recommendation: Discuss and develop Senior Advisory Commission Work Plan Goals and Activities for FY 2025/26.

STAFF REPORT

COMMISSIONERS REPORT

ADJOURNMENT

The next scheduled meeting is on Monday, February 23, 2026 at 5:00 PM.

MEETING DISCLOSURES

The time limit within which to commence any lawsuit or legal challenge to any quasi-adjudicative decision made by the City is governed by Section 1094.6 of the Code of Civil Procedure, unless a shorter limitation period is specified by any other provision. Under Section 1094.6, any lawsuit or legal challenge to any quasi-adjudicative decision made by the City must be filed no later than the 90th day following the date on which such decision becomes final. Any lawsuit or legal challenge, which is not filed within that 90-day period, will be barred. If a person wishes to challenge the nature of the above section in court, they may be limited to raising only those issues they or someone else raised at the meeting described in this notice, or in written correspondence delivered to the City of Santa Clara, at or prior to the meeting. In addition, judicial challenge may be limited or barred where the interested party has not sought and exhausted all available administrative remedies.

If a member of the public submits a speaker card for any agenda items, their name will appear in the Minutes. If no speaker card is submitted, the Minutes will reflect "Public Speaker."

In accordance with the requirements of Title II of the Americans with Disabilities Act of 1990 ("ADA"), the City of Santa Clara will not discriminate against qualified individuals with disabilities on the basis of disability in its services, programs, or activities, and will ensure that all existing facilities will be made accessible to the maximum extent feasible. The City of Santa Clara will generally, upon request, provide appropriate aids and services leading to effective communication for qualified persons with disabilities including those with speech, hearing, or vision impairments so they can participate equally in the City's programs, services, and activities. The City of Santa Clara will make all reasonable modifications to policies and programs to ensure that people with disabilities have an equal opportunity to enjoy all of its programs, services, and activities.

Agendas and other written materials distributed during a public meeting that are public record will be made available by the City in an appropriate alternative format. Contact the City Clerk's Office at 1 408-615-2220 with your request for an alternative format copy of the agenda or other written materials.

Individuals who require an auxiliary aid or service for effective communication, or any other disability-related modification of policies or procedures, or other accommodation, in order to participate in a program, service, or activity of the City of Santa Clara, should contact the City's ADA Coordinator at 408-615-3000 as soon as possible but no later than 48 hours before the scheduled event.



City of Santa Clara

1500 Warburton Avenue
Santa Clara, CA 95050
santaclaraca.gov
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Agenda Report

26-57

Agenda Date: 1/26/2026

REPORT TO SENIOR ADVISORY COMMISSION

SUBJECT

Review and Approve the Senior Advisory Commission Minutes of November 17, 2025

RECOMMENDATION

Approve the Senior Advisory Commission Minutes of November 17, 2025

Prepared by: Jennifer Herb, Recreation Supervisor

Reviewed by: Kimberly Castro, Recreation Manager

Approved by: Damon Sparacino, Director of Parks & Recreation

ATTACHMENTS

1. Draft Senior Advisory Commission Meeting Minutes November 17, 2025



City of Santa Clara

Meeting Minutes

Senior Advisory Commission

11/17/2025

5:00 PM

Hybrid Meeting
Santa Clara Senior Center
Room 205
1303 Fremont Street
Santa Clara, CA 95050

The City of Santa Clara is conducting the Senior Advisory Commission meeting in a hybrid manner (in-person and a method for the public to participate remotely).

Via Zoom:

<https://santaclaraca.zoom.us/j/97590069803>

Meeting ID: 975 9006 9803

Or join by phone: 669-900-6833

CALL TO ORDER AND ROLL CALL

Chair Andrews called the regular meeting to order at 5:10 p.m.

Present 4 - Chair Rick Andrews, Commissioner Kris Kapadia, Commissioner Alma Soto, and Commissioner Maria Vaz

Absent 1 - Commissioner Rebecca Selden

A motion was made by Commissioner Soto, seconded by Commissioner Kapadia to excuse Commissioner Selden. Motion passes.

Aye: 4 - Chair Andrews, Commissioner Kapadia, Commissioner Soto, and Commissioner Vaz

Absent: 1 - Commissioner Selden

CONSENT CALENDAR

1. [25-1597](#) Review and Approve the Senior Advisory Commission Minutes of October 20, 2025

Recommendation: Approve the Senior Advisory Commission Minutes of October 20, 2025

A motion was made by Commissioner Kapadia, seconded by Commissioner Soto to approve the minutes of October 20, 2025.

Aye: 4 - Chair Andrews, Commissioner Kapadia, Commissioner Soto, and Commissioner Vaz

Excused: 1 - Commissioner Selden

PUBLIC PRESENTATIONS

None

GENERAL BUSINESS

2. [25-1598](#) Discuss and Develop Senior Advisory Commission Work Plan Goals and Activities for FY 2025/26

Recommendation: Discuss and develop Senior Advisory Commission Work Plan Goals and Activities for FY 2025/26.

A motion was made by Commissioner Vaz, seconded by Commissioner Soto to adopt the Senior Advisory Commission Work Plan Goals and Activities for FY 2025/26.

Aye: 4 - Chair Andrews, Commissioner Kapadia, Commissioner Soto, and Commissioner Vaz

Excused: 1 - Commissioner Selden

3. [25-1599](#) Senior Advisory Commission Election of Vice Chair for FY 2025/26

Recommendation: Elect a Vice Chair to serve the Senior Advisory Commission for the FY 2025/26 term.

Commissioner Soto nominated Commissioner Kapadia to serve as Vice Chair for the remainder of the 2025/26 term. Commissioner Kapadia accepted the nomination.

A motion was made by Commissioner Soto, seconded by Commissioner Vaz to approve Commissioner Kapadia as Vice Chair for the 2025/26 term.

Aye: 4 - Chair Andrews, Commissioner Kapadia, Commissioner Soto, and Commissioner Vaz

Excused: 1 - Commissioner Selden

STAFF REPORT

Recreation Manager Kimberly Castro shared:

- The Holiday Tree Lighting event will be held on Friday, December 5th in Central Park, from 5:30 - 8 p.m., and our honorary tree lighter this year is Wanda Buck.

COMMISSIONERS REPORT

Commissioner Vaz requested that Staff send out the updated Commission roster with contact information.

- **Recreation Supervisor Herb** shared that she had send that contact information via email last week.

ADJOURNMENT

A motion was made by Commissioner Vaz, seconded by Commissioner Soto that the meeting be adjourned at 6:55 p.m.

Aye: 4 - Chair Andrews, Commissioner Kapadia, Commissioner Soto, and Commissioner Vaz

Excused: 1 - Commissioner Selden

MEETING DISCLOSURES

The time limit within which to commence any lawsuit or legal challenge to any quasi-adjudicative decision made by the City is governed by Section 1094.6 of the Code of Civil Procedure, unless a shorter limitation period is specified by any other provision. Under Section 1094.6, any lawsuit or legal challenge to any quasi-adjudicative decision made by the City must be filed no later than the 90th day following the date on which such decision becomes final. Any lawsuit or legal challenge, which is not filed within that 90-day period, will be barred. If a person wishes to challenge the nature of the above section in court, they may be limited to raising only those issues they or someone else raised at the meeting described in this notice, or in written correspondence delivered to the City of Santa Clara, at or prior to the meeting. In addition, judicial challenge may be limited or barred where the interested party has not sought and exhausted all available administrative remedies.

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Agenda Report

26-73

Agenda Date: 1/26/2026

SUBJECT

Elect Rick Andrews to serve as Chair for FY 2025/26 Senior Advisory Commission

BACKGROUND

At the beginning of each Fiscal Year (FY), the Senior Advisory Commission appoints a Chair and Vice Chair. The Chair facilitates the monthly meetings, speaks at City Council meetings when necessary, and works with the Staff Liaison on preparing the agenda. The Vice-Chair serves in these roles in the event the Chair is unavailable.

DISCUSSION

At the October 20, 2025 Senior Advisory Commission meeting, Commissioners nominated Commissioner Andrews for the role of Chair, but didn't follow the formal procedural to make a motion and affirm the nomination with a second, then recording the vote. At the January 26 meeting, the Senior Advisory Commission will formalize the election of Chair Andrews.

ENVIRONMENTAL REVIEW

The action being considered does not constitute a "project" within the meaning of the California Environmental Quality Act ("CEQA") pursuant to CEQA Guidelines section 15378(b)(5) in that it is a governmental organizational or administrative activity that will not result in direct or indirect changes in the environment.

PUBLIC CONTACT

Public contact was made by posting the Senior Advisory Commission's agenda on the City's official -notice bulletin board outside City Hall Council Chambers. A complete agenda packet is available on the City's website and in the City Clerk's Office at least 72 hours prior to a Regular Meeting and 24 hours prior to a Special Meeting. A hard copy of any agenda report may be requested by contacting the City Clerk's Office at (408) 615-2220, email clerk@santaclaraca.gov or at the public information desk at any City of Santa Clara public library.

RECOMMENDATION

Elect Rick Andrews to serve as Chair for FY 2025/26 Senior Advisory Commission

Prepared by: Jennifer Herb, Recreation Supervisor

Reviewed by: Kimberly Castro, Recreation Manager

Approved by: Damon Sparacino, Director - Parks & Recreation Department



Agenda Report

26-58

Agenda Date: 1/26/2026

REPORT TO SENIOR ADVISORY COMMISSION

SUBJECT

Discuss Senior Advisory Commission Work Plan Goals and Activities for FY 2025/26

BACKGROUND

Annually, the Senior Advisory Commission has considered three to six specific, measurable, attainable, realistic, and time-bound workplan goals and/or activities for the Fiscal Year (FY). These goals are intended to focus the Commission's efforts and respond to City Council priorities within the existing budget direction and resource limitations.

The City now aims to align the Boards, Commission, and Committee (BCC's) workplan goals to the City Council goals on an annual cycle. The process aims to provide:

Clear Prioritization

Each board and commission will have a defined set of objectives, making it easier for Council to assess progress and allocate staff resources efficiently.

Enhanced Transparency

Workplans will provide greater visibility into the activities and goals of advisory bodies, fostering stronger communication and accountability.

Improved Coordination

By aligning the efforts of staff and BCC's, the workplan is intended to effectively promote enhanced collaboration on citywide initiatives.

Informed Decision-Making

With a clear roadmap of each group's priorities, the City Council will be better equipped to make decisions that support both short-term needs and long-term strategic goals.

At the November 17, 2025 regular meeting, the Senior Advisory Commission adopted workplan priorities and activities for FY 2025/26 (Attachment 1) related to the following Commission goals:

Goal 1. Strategic Plan for the Senior Needs Assessment

- A. Open and circulate Survey (Attachment 2) to the public
- B. Conduct Focus Groups in multiple languages
- C. Review data
- D. Develop Senior Needs Assessment Plan
- E. Connect Older Adults to resources identified within the Senior Needs Assessment Survey

Goal 2. Advocate for Housing Regulations for Older Adults in Santa Clara

- A. Propose regulation modifications to protect Older Adults in rental properties.

DISCUSSION

At the January 26, 2026 Regular Meeting, Commissioners will begin working on the FY 2025/26 Work Plan.

ENVIRONMENTAL REVIEW

The action being considered does not constitute a “project” within the meaning of the California Environmental Quality Act (“CEQA”) pursuant to CEQA Guidelines section 15378(b)(5) in that it is a governmental organizational or administrative activity that will not result in direct or indirect changes in the environment.

PUBLIC CONTACT

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RECOMMENDATION

Discuss and develop Senior Advisory Commission Work Plan Goals and Activities for FY 2025/26.

Prepared by: Jennifer Herb, Recreation Supervisor

Reviewed by: Kimberly Castro, Recreation Manager

Approved by: Damon Sparacino, Director of Parks & Recreation

ATTACHMENT

1. Draft - Senior Advisory Commission Work Plan FY 2025/26
2. Senior Needs Assessment - Survey Questions



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SENIOR ADVISORY COMMISSION

**MUNICIPAL CODE, PRIORITIES, AND WORK PLAN
FY 2025/26**

CITY MUNICIPAL CODE

The City of Santa Clara charter includes the following sections that mandate the formation of a Senior Advisory Commission and its role.

Sec. 2.120.110 Senior Advisory Commission.

There shall be a City Senior Advisory Commission consisting of seven members to be appointed by the City Council from the qualified electors of the City, none of whom shall hold any paid office or employment in the City government, and shall have the following powers, functions, and duties:

- (a) Study, review, evaluate, and make recommendations to the City Council relative to any and all matters affecting elderly people in the City of Santa Clara.
- (b) Make such studies and submit to the Council such reports or recommendations respecting matters affecting elderly people, and such matters as the Council may from time to time request.

COUNCIL PRIORITIES

City Council priorities are organized into four Priority Areas of Focus with subcategories. The subcategories are strategic outcomes for each Priority Area of Focus.

- 1. **Excellent City Government** – Valued City Services, Reliable Funding, Well-Managed Stadium, Trusted and Engaged City Government
- 2. **Reliable Infrastructure** – Resilient and Well-Maintained Infrastructure, Accessible Transportation Options
- 3. **Outstanding Quality of Life** – Affordable Housing and Supportive Services, Safe Community, Quality Parks Programing and Cultural Amenities
- 4. **Thriving Community** – Vibrant Local Community

VISION STATEMENT

Enrich the lives and enhance the health and wellbeing of our community by supporting a vibrant, active quality of life for all ages, abilities and interests through excellent parks and recreational facilities, community services, programs, and events.

PRIORITIES

Based on the Commission charter, Council Priorities, the above vision statement, values, and context from prior years, the Commission has defined its priorities and goals for the current fiscal year. The priorities are presented in this section and the goals coming from these priorities are stated in the following section.

GOALS

Goal 1: Strategic Plan for the Senior Needs Assessment

Action(s)	Ad Hoc Subcommittee	Timeline	Notes	Measurable Outcomes
A. Open and circulate Survey to the public B. Conduct Focus Groups in multiple languages C. Review data D. Develop Senior Needs Assessment Plan E. Connect Older Adults to resources identified within the Senior Needs Assessment Survey				

Goal 2: Advocate for Housing Regulations for Older Adults in Santa Clara

Action(s)	Ad Hoc Subcommittee	Timeline	Notes	Measurable Outcomes
A. Propose regulation modifications to protect Older Adults in rental properties.				



Appendix A: Senior Needs Assessment Survey

The City of Santa Clara has launched an important effort to assess resident needs age 50 and over. The results from this survey will inform future program and service delivery to older adults in the City of Santa Clara. Please take a few minutes and complete the survey.

ABOUT YOU

D1. Please identify your gender identity.

☐ Male

☐ Female

☐ Other:

Please Self Identify

D2. What is your age group did you fall into on your last birthday?

☐ 50 – 59 years old

☐ 60 – 69 years old

☐ 70 – 79 years old

☐ 80+ years old

D3. What is your current relationship status?

☐ Married

☐ Not married – living with partner

☐ Separated

☐ Divorced

☐ Widowed

☐ Never married



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D4. Besides yourself, do you have any of the following people living in your household?

Child/children under 18	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Child/children 18 or older	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Child/children away at college	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Parents	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other adult or friend 18 or older	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Renter/Boarder	<input type="checkbox"/> Yes	<input type="checkbox"/> No

D5. Do you have any of the following kinds of health care coverage?

Insurance through a current or former employer of yours or your spouse	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
Insurance purchased directly from an insurance company (not through an employer)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
Medicare (for people 65 and older or people with certain health disabilities)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
Medi-Cal (Medicaid) or any kind of government assistance plan for those with low incomes or a disability	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
Veterans Administration or other military health care	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
Any other insurance coverage	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Sure
No insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

D6. Does any disability, handicap, or chronic disease keep you from fully participating in work, school, housework or other activities? [CHECK ONLY ONE]

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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D7. Does any disability, handicap, or chronic disease keep your spouse/partner from fully participating in work, school, housework or other activities? [CHECK ONLY ONE]

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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D8. With which tasks are you currently receiving help?

<input type="checkbox"/> Housing
<input type="checkbox"/> Paying Bills
<input type="checkbox"/> Cooking
<input type="checkbox"/> Cleaning
<input type="checkbox"/> Transportation
<input type="checkbox"/> Personal Care
<input type="checkbox"/> Legal Services
<input type="checkbox"/> Other: Other, please specify

a. Who is helping you?

<input type="checkbox"/> Self
<input type="checkbox"/> County
<input type="checkbox"/> City
<input type="checkbox"/> Religious Community
<input type="checkbox"/> Social Service Agency
<input type="checkbox"/> Spouse/partner
<input type="checkbox"/> Relative
<input type="checkbox"/> Friend/Neighbor
<input type="checkbox"/> Other: Other, please specify

b. Where would help be most valuable?

<input type="checkbox"/> Housing
<input type="checkbox"/> Paying Bills
<input type="checkbox"/> Cooking



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<input type="checkbox"/> Cleaning
<input type="checkbox"/> Transportation
<input type="checkbox"/> Personal Care
<input type="checkbox"/> Legal Services
<input type="checkbox"/> Other: Other, please specify

D9. What best represents the language you speak at home? Check all that apply.

<input type="checkbox"/> English
<input type="checkbox"/> Spanish
<input type="checkbox"/> Mandarin
<input type="checkbox"/> Cantonese
<input type="checkbox"/> Vietnamese
<input type="checkbox"/> Portuguese
<input type="checkbox"/> Hindi
<input type="checkbox"/> Other, please specify

D10. What is your race and/or ethnicity? [CHECK ALL THAT APPLY]

<input type="checkbox"/> American Indian or Alaska Native
<input type="checkbox"/> Asian
<input type="checkbox"/> Black or African American
<input type="checkbox"/> Hispanic or Latino
<input type="checkbox"/> Native Hawaiian or other Pacific Islander
<input type="checkbox"/> White
<input type="checkbox"/> Other, please specify



D11. What is the highest level of education you have completed?

<input type="checkbox"/> K-12 th grade (no diploma)
<input type="checkbox"/> High school graduate, GED or equivalent
<input type="checkbox"/> Post-high school education/training (no degree)
<input type="checkbox"/> Trade School Certification
<input type="checkbox"/> 2-year college degree
<input type="checkbox"/> 4-year college degree
<input type="checkbox"/> Post-graduate study (no degree)
<input type="checkbox"/> Graduate or professional degree(s)

D12. What was your annual household income before taxes in the most recent tax year?

1-person house	2-person house	3-person house	4-person house
<input type="checkbox"/> \$19,050 or less	<input type="checkbox"/> \$21,750 or less	<input type="checkbox"/> \$24,500 or less	<input type="checkbox"/> \$27,200 or less
<input type="checkbox"/> \$19,051 to \$37,450	<input type="checkbox"/> \$21,751 to \$42,800	<input type="checkbox"/> \$24,501 to \$48,150	<input type="checkbox"/> \$27,201 to \$53,500
<input type="checkbox"/> \$37,451 to \$62,450	<input type="checkbox"/> \$42,801 to \$71,400	<input type="checkbox"/> \$48,151 to \$80,300	<input type="checkbox"/> \$53,501 to \$89,200
<input type="checkbox"/> \$62,451 to \$96,000	<input type="checkbox"/> \$71,401 to \$109,700	<input type="checkbox"/> \$80,301 to \$123,400	<input type="checkbox"/> \$89,201 to \$137,100
<input type="checkbox"/> \$96,001 to \$126,900	<input type="checkbox"/> \$109,701 to \$145,050	<input type="checkbox"/> \$123,401 to \$163,150	<input type="checkbox"/> \$137,101 to \$181,300
<input type="checkbox"/> \$126,901 to \$152,300	<input type="checkbox"/> \$145,051 to \$174,050	<input type="checkbox"/> \$163,151 to \$195,800	<input type="checkbox"/> \$181,301 to \$217,550
<input type="checkbox"/> \$152,301 or more	<input type="checkbox"/> \$174,051 or more	<input type="checkbox"/> \$195,801 or more	<input type="checkbox"/> \$217,551 or more

☐ There are more than four people in my household



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☐ Decline to answer

D13. Please use the space below for any additional comments.

YOUR COMMUNITY

1. How would you rate the City of Santa Clara as a place for people to live as they age?

<input type="checkbox"/> Excellent
<input type="checkbox"/> Very good
<input type="checkbox"/> Good
<input type="checkbox"/> Fair
<input type="checkbox"/> Poor

2. What is your 5-digit ZIP code?

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3. How long have you lived in the City of Santa Clara?

<input type="checkbox"/> Less than 5 years
<input type="checkbox"/> 5 years but less than 15
<input type="checkbox"/> 15 years but less than 25 years
<input type="checkbox"/> 25 years but less than 35
<input type="checkbox"/> 35 years but less than 45
<input type="checkbox"/> 45 years or more

4. Thinking about finances in your retirement years, how likely is it that you will move to a different home *outside* the City of Santa Clara?

<input type="checkbox"/> Extremely likely
<input type="checkbox"/> Very likely



☐ Somewhat Likely

☐ Not very likely

☐ Not at all likely

5. How important is it for you to remain in the City of Santa Clara as you age?

☐ Extremely important

☐ Very important

☐ Somewhat Important

☐ Not very important

☐ Not at all important

HOUSING

6. Do you own or rent your primary home — or do you have some other type of living arrangement?

☐ Own

☐ Rent

☐ Living with family/friends

☐ Other, please specify

7. What type of home is your primary home?

☐ Single-family home

☐ Manufactured home

☐ Townhome or duplex

☐ Apartment

☐ Condominium or co-op

☐ Assisted Living facility

☐ Senior Residential facility

☐ Other, please specify



8. How important is it for you to be able to live independently in your own home as you age?

<input type="checkbox"/> Extremely important
<input type="checkbox"/> Very important
<input type="checkbox"/> Somewhat Important
<input type="checkbox"/> Not very important
<input type="checkbox"/> Not at all important

9. How important do you think it is to have the following in your community?

	Extremely Important	Very Important	Somewhat Important	Not Very Important	Not at All Important
Well-maintained homes/properties	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A home repair service for low-income and older adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Landscaping services for low-income and older adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable housing options for adults of varying income levels such as older active adult communities, assisted living and communities with shared facilities and outdoor spaces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Homes that are equipped with	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



features such as a no-step entry, wider doorways, first floor bedroom and bath, grab bars in bathrooms					
Safe low-income housing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OUTDOOR SPACES AND BUILDINGS

10. How important do you think it is to have the following in the City of Santa Clara?

	Extremely Important	Very Important	Somewhat Important	Not Very Important	Not at All Important
Well-maintained and safe parks that are within a 10-minute walking distance of your home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public parks with active features such as walking paths, outdoor sport courts, community gathering areas, comfortable benches and shade	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sidewalks that are in good condition, free from obstruction and are safe for pedestrian use and accessible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



for wheelchairs or other assistive mobility devices					
Well-maintained public building and facilities that are accessible to people of different physical abilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Separate pathways for bicyclists and pedestrians	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well-maintained public restrooms that are accessible to people of different abilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Neighborhood watch program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TRANSPORTATION AND STREETS

11. How do you get around for things like shopping, visiting the doctor, running errands, or going to other places in the following ways?

Drive yourself	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have others drive you	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Walk	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Ride a bike	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Use public transportation	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Take a taxi/cab/Uber/Lyft/SV Hopper	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Use a special transportation service, such as one for seniors or persons with disabilities	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Rely on a friend/relative	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other, please specify		



12. What prevents you from utilizing transportation services (public, taxi, Uber, Lyft)

<input type="checkbox"/> Safety	<input type="checkbox"/> Physically too difficult
<input type="checkbox"/> Schedule is hard to read	<input type="checkbox"/> Proximity to route
<input type="checkbox"/> Language barrier	<input type="checkbox"/> Cost
<input type="checkbox"/> Weather	<input type="checkbox"/> Lack of restroom facilities
<input type="checkbox"/> Routes are not convenient	<input type="checkbox"/> Time consuming
<input type="checkbox"/> Other	<input type="checkbox"/> Use of smart phone

13. Would you utilize a shuttle bus service to locations within the City of Santa Clara?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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14. How important do you think it is to have the following in your community/neighborhood?

	Extremely Important	Very Important	Somewhat Important	Not Very Important	Not at All Important
Accessible and convenient public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Affordable public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well-maintained public transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safe public transportation stops, or areas	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Special transportation services for people with disabilities and older adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Well-maintained streets	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well-maintained sidewalks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Easy to read traffic signs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Enforces speed limits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Public parking lots, spaces, and areas to park	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well-lit safe streets and intersections for all users (pedestrians, bicyclists, drivers)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Audio/visual pedestrian crossings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to walk to basic services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have sense of personal safety	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMMUNITY SUPPORT & HEALTH SERVICES

15. In general, when compared to most people your age, how would you rate your health?

<input type="checkbox"/> Excellent
<input type="checkbox"/> Very good
<input type="checkbox"/> Good
<input type="checkbox"/> Fair
<input type="checkbox"/> Poor



16. On average, how often do you see a doctor?

<input type="checkbox"/> Weekly
<input type="checkbox"/> Monthly
<input type="checkbox"/> Several times/year
<input type="checkbox"/> Once a year

a. If less than once a year, why haven't you seen a doctor?

<input type="checkbox"/> Too expensive	<input type="checkbox"/> No insurance
<input type="checkbox"/> Don't have a doctor	<input type="checkbox"/> No transportation
<input type="checkbox"/> Fear	<input type="checkbox"/> Other

17. How often do you engage in some form of physical exercise (such as walking, running, biking, swimming, sports, strength training, yoga, stretching)?

<input type="checkbox"/> Everyday
<input type="checkbox"/> Several times a week, but not everyday
<input type="checkbox"/> About once a week
<input type="checkbox"/> About once every other week
<input type="checkbox"/> About once a month
<input type="checkbox"/> Less than once a month
<input type="checkbox"/> Never

a. Where do you exercise?

<input type="checkbox"/> Santa Clara Senior Center	<input type="checkbox"/> Private Club
<input type="checkbox"/> Local YMCA	<input type="checkbox"/> Home
<input type="checkbox"/> Local Gym/Club	<input type="checkbox"/> Other, please specify

18. How often are you missing a balanced meal?

<input type="checkbox"/> Daily
<input type="checkbox"/> Weekly
<input type="checkbox"/> Monthly
<input type="checkbox"/> I'm not missing any balanced meals



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19. Why are you missing balanced meals?

<input type="checkbox"/> Cost
<input type="checkbox"/> Not aware of food assistance programs/free meals
<input type="checkbox"/> Too much effort
<input type="checkbox"/> Transportation
<input type="checkbox"/> Other
<input type="checkbox"/> Not applicable

20. Have you used any of these meal services? (Check all that apply.)

<input type="checkbox"/> Meals at the Senior Center or other congregate meal sites
<input type="checkbox"/> Meals on Wheels or other home delivered meals
<input type="checkbox"/> Religious community programs
<input type="checkbox"/> Food Banks or Brown Bag programs
<input type="checkbox"/> Other
<input type="checkbox"/> None

21. In case of natural disaster, do you have a plan to survive in your home for the first three days without electric power, water, food or emergency assistance?

☐ Yes ☐ No

22. How important is it to you to remain physically active for as long as possible?

<input type="checkbox"/> Extremely important
<input type="checkbox"/> Very important
<input type="checkbox"/> Somewhat important
<input type="checkbox"/> Not very important
<input type="checkbox"/> Not at all important



23. How important do you think it is to have the following in the City of Santa Clara?

	Extremely Important	Very Important	Somewhat Important	Not Very Important	Not at All Important
Health and wellness programs and classes in areas such as nutrition, weight control, diabetes management or heart disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fitness activities specifically geared to older adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conveniently located health and social services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
A referral service that helps seniors find and access health and supportive services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conveniently located emergency care centers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
In Home support services including personal care and housekeeping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Well-trained, certified home health care providers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Affordable home health care providers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Health care professionals who speak different languages	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SOCIAL PARTICIPATION

24. About how frequently do you interact with your friends, family or neighbors in your community? This interaction could be by phone, in person, email or social media (such as Facebook/Instagram).

<input type="checkbox"/> More than once/day
<input type="checkbox"/> About once/day
<input type="checkbox"/> Several times/week
<input type="checkbox"/> Once/week
<input type="checkbox"/> Once every 2 or 3 weeks
<input type="checkbox"/> Once/month
<input type="checkbox"/> Less than monthly
<input type="checkbox"/> Never

25. On average, how often do you:

a. Attend social activities, religious services, or meetings?

<input type="checkbox"/> Daily	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Several times/year	<input type="checkbox"/> Never
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b. Have contact with friends and family?

<input type="checkbox"/> Daily	<input type="checkbox"/> Weekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Several times/year	<input type="checkbox"/> Never
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26. Over the past two weeks, how often have you felt:

	Always	Often	Sometimes	Rarely	Never
Sad, depressed, or helpless	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Little interest or pleasure in doing normal enjoyable activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anxious	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Relaxed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Isolated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RESPECT & SOCIAL INCLUSION

27. How important do you think it is to have the following in Santa Clara?

	Extremely Important	Very Important	Somewhat Important	Not Very Important	Not at All Important
Conveniently located entertainment venue	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activities specifically geared to older adults	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activities that offer senior discounts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intergenerational activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accurate and widely publicized information about social activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



A variety of cultural activities for diverse populations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Local schools that involve older adults in events and activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Continuing education classes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social clubs such as for books, gardening, crafts or hobbies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CIVIC PARTICIPATION AND EMPLOYMENT

28. How important do you think it is to have the following in your community?

	Extremely Important	Very Important	Somewhat Important	Not Very Important	Not at All Important
A choice of volunteer activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Volunteer training opportunities to help you perform better in your volunteer roles	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Opportunities for you to participate in decision making bodies such as community councils or committees	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Easy to find information about	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



local volunteer opportunities					
Transportation to and from volunteer activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

29. Which of the following best describes your current employment status?

<input type="checkbox"/> Self-employed, part-time
<input type="checkbox"/> Self-employed, full-time
<input type="checkbox"/> Employed, part-time
<input type="checkbox"/> Employed, full-time
<input type="checkbox"/> Unemployed, but looking for work
<input type="checkbox"/> Retired, not working at all
<input type="checkbox"/> Not in labor force for other reasons

30. How likely is it that you will continue to work for as long as possible, rather than choosing to retire and no longer work for pay?

<input type="checkbox"/> Extremely likely
<input type="checkbox"/> Very likely
<input type="checkbox"/> Somewhat likely
<input type="checkbox"/> Not very likely
<input type="checkbox"/> Not sure

31. Rate your ability to pay for the following:

	Very Difficult	Somewhat Difficult	Somewhat Easy	Easy	Very Easy
Mortgage/Rent	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Utilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insurance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Prescription Medications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home Maintenance/repairs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Classes/recreation activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other					

COMMUNICATION & INFORMATION

32. Would you turn to the following resources if you, a family member or friend needed information about services for older adults, such as caregiving services, home delivered meals, home repair, medical transport or social activities?

Santa Clara Senior Center	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Local Area Agency on Aging (AAA)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Family or Friends	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Local nonprofit organization	<input type="checkbox"/> Yes	<input type="checkbox"/> No
...please specify		
Faith-based organizations such as churches, mosques, temples, or synagogues	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Internet	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Phone book or 211	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Doctor or other health care professional	<input type="checkbox"/> Yes	<input type="checkbox"/> No
County government offices such as the Department of Health	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Library	<input type="checkbox"/> Yes	<input type="checkbox"/> No
City website	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other, please specify -		



33. How important do you think it is to have the following in the City of Santa Clara?

	Extremely Important	Very Important	Somewhat Important	Not Very Important	Not at All Important
Access to community information in one central source	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clearly displayed printed community information with large lettering	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An automated community information source that is easy to understand like a toll-free telephone number	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Free access to computers and the Internet in public places such as senior center, library, or government buildings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community information that is delivered in person to people who may not be able to leave their home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



34. In general, how often do you access the Internet for email, socialization, news and information, paying bills or managing finances, or buying products or services?

<input type="checkbox"/> Several times a day	<input type="checkbox"/> Once every few weeks
<input type="checkbox"/> About once/day	<input type="checkbox"/> Once a month/less
<input type="checkbox"/> 3-6 days/week	<input type="checkbox"/> Never go online
<input type="checkbox"/> 1-2 days/week	

35. How do you prefer to receive information?

<input type="checkbox"/> Newspaper	<input type="checkbox"/> Television
<input type="checkbox"/> Internet/email	<input type="checkbox"/> Adult Education Catalog
<input type="checkbox"/> City Hall News (City newsletter)	<input type="checkbox"/> Utility Bill Insert
<input type="checkbox"/> Community Channel 15	<input type="checkbox"/> Parks & Recreation Activity Guide

SANTA CLARA SENIOR CENTER

36. Do you utilize the Santa Clara Senior Center?

<input type="checkbox"/> Yes	<input type="checkbox"/> No
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37. If yes, how often?

<input type="checkbox"/> 1-2 times/week	<input type="checkbox"/> 2-3 times/week	<input type="checkbox"/> 3-4 times/week	<input type="checkbox"/> 4-5 times/week	<input type="checkbox"/> 5-6 times/week
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38. If no, what prevents you from using the Senior Center? (Please check all that apply.)

<input type="checkbox"/> Don't know what is offered
<input type="checkbox"/> Activities/programs don't meet my needs
<input type="checkbox"/> Hours of operation don't meet my needs
<input type="checkbox"/> Transportation



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<input type="checkbox"/> Cost
<input type="checkbox"/> I don't identify with the name "Senior Center"
<input type="checkbox"/> Not Interested
<input type="checkbox"/> Other

39. If you were to enroll/sign-up for a class/activity at the Senior Center, what topics appeal to you?

<input type="checkbox"/> Fitness/Exercise (weight training, aquatics, tai chi, yoga, Pilates, dance, cardio)
<input type="checkbox"/> Computers (Internet basics, email, graphic arts, research, cyber security)
<input type="checkbox"/> Crafts/Art (woodworking, jewelry making, photography, ceramics, painting)
<input type="checkbox"/> Lifelong learning (politics, history, poetry, creative writing, current events, environmental sustainability)
<input type="checkbox"/> Finances (retirement planning, mortgages, healthcare, budgeting)
<input type="checkbox"/> Safety and Protection (identity theft, personal safety, neighborhood watch, elder fraud)
<input type="checkbox"/> Health Education and Nutrition (living with chronic disease, fall prevention, healthy eating, disabilities)
<input type="checkbox"/> Housing (assisted living options, home maintenance & repair, adaption my home as I age, rate assistance programs, how to fill out forms)

Please use the space below for any additional comments.

**Thank you very much for completing this survey.
Your assistance in providing this information is greatly appreciated.**

City of Santa Clara – Parks & Recreation Department – Senior Center
1303 Fremont Street – Santa Clara, CA 95050 – (408) 615-3170