Good day!

Thank you for visiting the Hungarian Jewish Museum! We are currently on the process of renewing and improving the museum’s exhibits. In line with this reconstruction, the museum would be interested to hear about the perspective of the visitors on our exhibits. We deem it will be helpful in further improving the experiential impression of the visitors in the museum. We kindly ask for a few minutes of your time to answer a visitor survey about the museum. All information gathered will be held strictly confidential. Thank you very much for your support!

1. Please provide the information requested

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Age:** | | | **Gender:** | | | | **Nationality:** | | | | | | | **Religion:** | | | | | **Civil Status:** | | |
| **Purpose of Visit:** | | | | | | | | | | | | | | | | | | | | | |
| Tourist | | School requirement | | | | | | Personal interest | | | | Academic research | | | | | Others: (specify) | | | | |
| **First time to visit the museum?** Yes / No | | | | | | | | | | | | | **If not, this is your \_\_\_\_\_ time to visit** | | | | | | | | |
| **With whom are you visiting the museum with?** | | | | | | | | | | | | | | | | | | | | | |
| **Have you been to other Jewish museums? If yes, which ones?** | | | | | | | | | | | | | | | | | | | | | |
| **If you have visited other Jewish museums, how would you rate this museum compared to the other Jewish museums?** (Encircle your answer) | | | | | | | | | | | | | | | | | | | | | |
| Poor | | | | | Fair | | | | | Good | | | | | Excellent | | | | | Superior | |
| **Did you have any expectations of the museum?** Yes / No  **If yes, what were you expecting about the museum?**  **Were your expectations of the museum fulfilled?** Yes / No | | | | | | | | | | | | | | | | | | | | | |
| **Which was your favorite part of the entire institution?** (Encircle your answer) | | | | | | | | | | | | | | | | | | | | | |
| Synagogue | | | | Old Jewish district exhibit | | | | | Garden cemetery | | | | | | | 100! | | | | | Family Research Center |
| **Please rate how helpful the personnel were.** (Encircle your answer) | | | | | | | | | | | | | | | | | | | | | |
| Poor | | | | Fair | | | | | Good | | | | | | | Excellent | | | | | Superior |
| **Was it easy to find your way within the entire institution? Please rate how clear the directions are within the museum. (Encircle your answer)** | | | | | | | | | | | | | | | | | | | | | |
| Poor | | | | Fair | | | | | Good | | | | | | | Excellent | | | | | Superior |
| **Did you have any difficulty finding these places? If yes, please encircle which ones.** | | | | | | | | | | | | | | | | | | | | | |
| Entrance | Toilet | | | | | Museum | | | | | Family Research Center | | | | | | | Old Jewish district exhibit | | | |
| Others, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | |
| **If you had a guide, please rate how useful the presentation of your museum guide was for you.** (Encircle your answer) | | | | | | | | | | | | | | | | | | | | | |
| Poor | | | | Fair | | | | | Good | | | | | | | Excellent | | | | | Superior |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Which is your favorite object of the *100!* exhibit? Why?** | | | | | | | | |
| **Which objects are you more interested to see?** (Encircle your answer) | | | | | | | | |
| Judaica collection | | Historical Artifacts | | Holocaust Artifacts | | Contemporary Art | |  |
| **What do you think of about the Holocaust representation in the museum? Was the Holocaust exhibited as you expected?** Yes / No  **Why or why not?** | | | | | | | | |
| **Are you content with it?** Yes / No  **Why or why not?** | | | | | | | | |
| **Which three words would you use to describe the museum?** (Encircle your answers) | | | | | | | | |
| Interesting Useless Boring Relevant Moving | | | | | | | | |
| Mediocre Enlightening Important Ordinary Neutral  Monotonous Long Short Informative | | | | | | | | |
| **Were you awed/moved by the exhibits? Please rate your museum experience.** (Encircle your answer) | | | | | | | | |
| Poor | Fair | | Good | | Excellent | | Superior | |
| **Which aspects of the museum would you want to be improved?** (Encircle all which you think applies) | | | | | | | | |
| Exhibit Guide | Infrastructure | | Directions/Pathway | | Museum Personnel | | Family Research Center | |
| Online Guide | Audio Guide | | 100! Exhibit | | Old Jewish district exhibit | | Permanent Exhibit | |
| **Any further comments or suggestions?** | | | | | | | | |

1. Kindly encircle your answer.

|  |  |  |
| --- | --- | --- |
| 1. **Are there enough objects to see in the *100!* exhibit?** | Yes | No |
| 1. **Could you see all the objects clearly?** | Yes | No |
| 1. **Were the texts provided too short?** | Yes | No |
| 1. **Were the texts provided too long or too complicated?** | Yes | No |
| 1. **Were the Jewish holidays represented and clarified enough?** | Yes | No |
| 1. **Was there enough emphasis on Holocaust representation?** | Yes | No |
| 1. **Were you informed enough about what the garden-cemetery represents?** | Yes | No |
| 1. **Are you glad to see contemporary art in the museum?** | Yes | No |
| 1. **Would you like to see more contemporary objects in the museum?** | Yes | No |