

WALLAGE RESIDENCE CENTER – BUILDING ENVIRONMENT SURVEY

This survey will be used to evaluate the U of I work spaces and stairwell areas of the Wallace Residence Center.

This survey is part of an architectural field research course, the goal of which is to evaluate various aspects of building design and occupant comfort levels within these buildings.

This survey will not be linked to you and will not require you to give any personal information.

Please answer all questions honestly, and base your responses on your own experiences.

Go into as much detail as you need to describe specific circumstances.

Thank you for taking a few moments to complete this survey.

If you have any questions regarding the architectural field research course or the results of the building study, please feel free to contact the research team via email at weag3293@uidaho.edu

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STAIRWELL SPACE

1.) On average, how often do you use the stairwell space per day? (select one)

- 1-2 times per day
- 3-4 times per day
- 5-6 times per day
- 7-8 times per day
- 9 or more times per day

2.) What time of day do you typically use the stairwell space? (select all that apply)

- Morning (8am – 10am)
- Mid-day (11am – 1pm)
- Afternoon (2pm – 5pm)
- I do not use the stairwell.

If you **DO NOT** use the stairwell, please tell us why:

3.) What do you typically use the stairwell space for? (select all that apply)

- Circulation space (moving between floors)
- Informal meeting area
- Break area
- Fresh air
- Other (please specify): _____

4.) Which best describes the difference in temperature between the upper and lower levels in the stairwell space? (select one)

- Much warmer on the upper level
- Somewhat warmer on the upper level
- About the same temperature on both levels
- Somewhat warmer on the lower level
- Much warmer on the lower level

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5.) Which best describes the difference in temperature between the stairwell space and the upper-level office space? (select one)

- Much warmer in the office space
- Somewhat warmer in the office space
- About the same in the office space and the stairwell space
- Somewhat warmer in the stairwell space
- Much warmer in the stairwell space

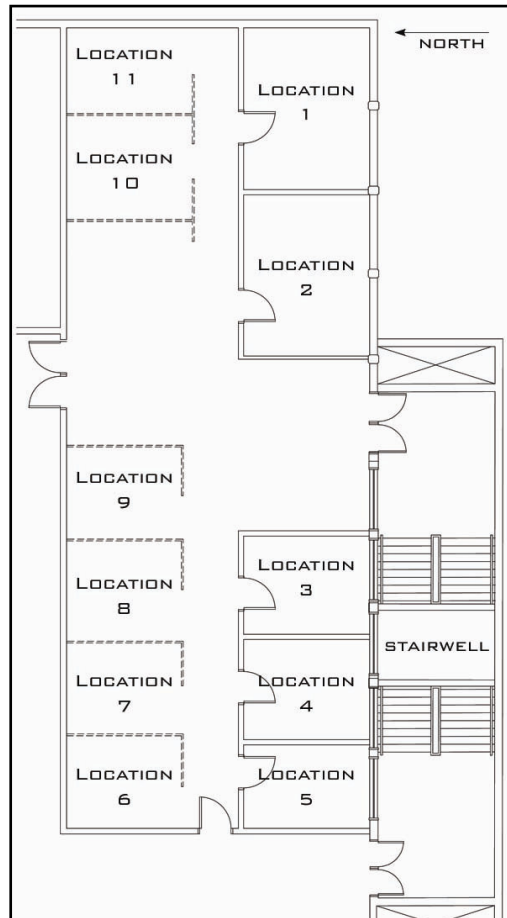
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OFFICE SPACE

1.) Where is your work area located within the office space? (select the numbered location from the floor plan below)

Location 1

- Location 2
- Location 3
- Location 4
- Location 5
- Location 6
- Location 7
- Location 8
- Location 9
- Location 10
- Location 11



2.) On average, how many hours do you spend in the office space per day? (select one)

- 1-2 hours per day
- 3-4 hours per day
- 5-6 hours per day
- 7-8 hours per day
- More than 8 hours per day

3.) What tasks do you typically perform on an average work day? (select all that apply)

- Typing letters/documents/copy
- Sending/receiving emails or messages
- Paperwork/Note-taking
- Sorting Mail
- Customer Service

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LIGHTING CONDITIONS

1.) How would you describe the typical amount of daylight used in your work area? (select one)

- Complete daylight (no electric lighting is used)
- Generous daylight
- Partial daylight (uses daylight and electric lighting equally)
- Generous electric light
- Complete electric light (no daylight is used)

2.) On a scale from 1-7 (1 being completely satisfied and 7 being completely dissatisfied), how would you rate lighting conditions in the office spaces? (choose one)

- 1 (completely satisfied)
- 2
- 3
- 4
- 5
- 6
- 7 (completely dissatisfied)

3.) Please describe any irregular lighting conditions you may have noticed in your work area (i.e., glare, flickering lights, or any others you might have noticed):

4.) On a scale from 1-7 (1 meaning the lighting is ideal for all tasks and 7 meaning lighting is not adequate for all tasks), how does the lighting in your work area affect your ability to do any your daily tasks?

- 1 (ideal lighting conditions)
- 2
- 3
- 4
- 5
- 6
- 7 (inadequate lighting conditions)

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TEMPERATURE CONDITIONS

1.) Which best describes your perception of the temperature in your work area? In other words, how warm or cold does your work area feel? (select one)

- Very warm (feeling of overheating)
- Somewhat warm
- Neither warm nor cool (comfortable/normal temperature)
- Somewhat cool
- Very cool (feeling of being chilled)

2.) On a scale from 1-7 (1 being completely effective and 7 being completely ineffective), how would you rate the heating and cooling systems at controlling temperature in the office spaces? (choose one)

- 1 (completely effective)
- 2
- 3
- 4
- 5
- 6
- 7 (completely ineffective)

3.) Please describe any irregular temperature conditions you may have noticed in your work area (cold spots, drafts, or any others you might think of):

4.) On a scale from 1-7 (1 meaning temperature is comfortable for all tasks and 7 meaning temperature is uncomfortable for all tasks), how does the temperature in your work area affect your ability to do any your daily tasks?

- 1 (comfortable temperature)
- 2
- 3
- 4
- 5
- 6
- 7 (uncomfortable temperature)