

## A. Identification of the centre

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*Please complete this section first*

### Identification changes. *(Only complete the sections subject to changes)*

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Name of the centre \_\_\_\_\_

Address \_\_\_\_\_ Postcode 

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Municipality \_\_\_\_\_

Province \_\_\_\_\_

Telephone numbers 

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 email \_\_\_\_\_

Owning body \_\_\_\_\_

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Contact person \_\_\_\_\_

### Nature, characteristics and purpose

This survey is aimed at centres that provide services to homeless persons. Its purpose is to ascertain the general features of the functioning and organisation of centres, as well as of the services they provide.

#### Legislation

#### Compulsory statistics

##### Statistical Secrecy

The personal information obtained by the statistical services, both directly from the informants as well as from administrative sources, will be the object of protection and is covered by administrative sources (art. 13.1 of the Law on the Public Statistical Services of 9 May 1989 (LFEP)). All statistical personnel are obliged to preserve statistical secrecy (art. 17.1 of the LFEP).

##### Obligation to provide the items of data

Law 4/1990 establishes the **Obligation to provide the items of data** requested for the compilation of these Statistics.

Statistical services may request data from individuals and legal entities, both national and foreign, resident in Spain (Art. 10.1 of the LFEP).

**All individuals and legal entities that provide data, regardless of whether their collaboration is compulsory or voluntary, must respond in a true, exact and comprehensive manner, within the stipulated deadline, to the questions outlined in due form by the statistical services (art. 10.2 of the LFEP).**

**Failure to comply** with the obligations envisaged in this Law, as related to statistics for state purposes, **shall be sanctioned** in accordance with the terms established in the regulations contained in this Heading (art. 48.1 of the LFEP).

Very serious infringements shall be sanctioned with fines ranging from 3,005.07 to 30,050.61 euros. Serious infringements shall be sanctioned with fines ranging from 300.51 to 3,005.06 euros. Minor infringements shall be sanctioned with fines ranging from 60.10 to 300.51 euros (art. 51.1, 51.2 and 51.3 of the LFEP)

## B. General characteristics

*(This must be filled out by all centres)*

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### 1. Could you indicate the ownership of the institution that owns the centre?

- Public \_\_\_\_\_  1
- Non-profit private/Third sector (foundation, association, NGO) \_\_\_\_\_  2
- Private (companies) \_\_\_\_\_  3

### 2. Is the owner of the centre also the manager thereof?

- Yes \_\_\_\_\_  1 → (Go to question 4)
- No (*specify manager*) .....  6

### 3. Could you indicate the owning managing body of the centre?

- Public \_\_\_\_\_  1
- Non-profit private/Third sector (foundation, association, NGO) \_\_\_\_\_  2
- Private (companies) \_\_\_\_\_  3

### 4. According to the main activity, what type of centre it is?

*(1) Shelter: Centre or Collective and temporary shelter that provides comprehensive support the 24 hours*

- Hostel/Night shelter \_\_\_\_\_  1
- Shelter (1) \_\_\_\_\_  2
- Flat/group or community dwellings for immediate shelter (urgency) \_\_\_\_\_  3
- Flat/group or community dwellings for temporary stay \_\_\_\_\_  4
- Flat/group or community dwellings for social insertion or inclusion  
(indefinite stay) \_\_\_\_\_  5
- Residence \_\_\_\_\_  6
- Canteen \_\_\_\_\_  7
- Day centre/Occupational Workshop \_\_\_\_\_  8
- Other (*specify*) .....  9

**5. Which of the following services does the centre offer?** (Please mark the appropriate alternatives with an "x")  
 (1) Includes legal assistance, residence permit management, etc.  
 (2) Carrying out administrative procedures: registration, health card, request for financial aid, etc

- |  |                          |    |   |                          |    |
|--|--------------------------|----|---|--------------------------|----|
| Information and shelter _____            | <input type="checkbox"/> | 1  | Artistic/cultural/leisure activities _____                      | <input type="checkbox"/> | 12 |
| Orientation and/or derivation _____      | <input type="checkbox"/> | 2  | Medical care _____  | <input type="checkbox"/> | 13 |
| Accommodation _____                      | <input type="checkbox"/> | 3  | Psychological assistance _____                                  | <input type="checkbox"/> | 14 |
| Housing First Program _____              | <input type="checkbox"/> | 4  | Legal assistance (1) _____                                      | <input type="checkbox"/> | 15 |
| Catering (food) _____                    | <input type="checkbox"/> | 5  | Social assistance/ Carrying out administrative procedures _____ | <input type="checkbox"/> | 16 |
| Professional guidance _____              | <input type="checkbox"/> | 6  | Wardrobe _____  | <input type="checkbox"/> | 17 |
| Occupational workshop _____              | <input type="checkbox"/> | 7  | Nursery/Play centre _____                                       | <input type="checkbox"/> | 18 |
| Insertion Workshops _____                | <input type="checkbox"/> | 8  | Intervention on the street _____                                | <input type="checkbox"/> | 19 |
| Adult education/ Language training _____ | <input type="checkbox"/> | 9  | Internet access _____   | <input type="checkbox"/> | 20 |
| Personal hygiene _____                   | <input type="checkbox"/> | 10 | Cloakroom _____   | <input type="checkbox"/> | 21 |
| Laundry/ Washing machines _____          | <input type="checkbox"/> | 11 | Other (specify) _____   | <input type="checkbox"/> | 22 |

**6. Is the centre primarily oriented toward a particular sector of the homeless population?**

- Yes \_\_\_\_\_  1  
 No \_\_\_\_\_  6      → (Go to question 8)

**7. Could you indicate the specific situation tended homeless persons suffer?** (At most two options should be completed)

- Ex-conviction \_\_\_\_\_  1  
 Drug addiction \_\_\_\_\_  2  
 Other Drug-Addiction \_\_\_\_\_  3  
 Immigration / Application for international protection \_\_\_\_\_  4  
 Women who are victims of domestic violence \_\_\_\_\_  5  
 Women who are victims of trafficking \_\_\_\_\_  6  
 Legal age of minors in institutions / Youth formerly under-custody \_\_\_\_\_  7  
 Mental disorder \_\_\_\_\_  8  
 HIV/AIDS \_\_\_\_\_  9  
 Other (Specify) \_\_\_\_\_  10

**8. What population is tended to in the centre?**

- Only males \_\_\_\_\_  1  
 Only females \_\_\_\_\_  2  
 Both sexes \_\_\_\_\_  3

**9. Please indicate the percentage of foreign nationals tended to in the centre**

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 %

**10. Which are the most frequent means of access to the centre? Choose the three more frequent and number them from 1 to 3 by order of importance, leaving the other in blanc.**

*(1) Specialized networks: Child protection system, women victims of gender violence, etc.*

The centre has free access \_\_\_\_\_  1

Users are sent from:

- general social services/primary attention \_\_\_\_\_  2

- other centres that specifically tend to Homeless Persons \_\_\_\_\_  3

- other specialized centres (1) \_\_\_\_\_  4

- prisons \_\_\_\_\_  5

- hospitals \_\_\_\_\_  6

- accident and Emergency \_\_\_\_\_  7

- other means of access \_\_\_\_\_  8

**11. Please indicate how access is made from the homeless network itself**

*(This question will only be answered by the centres that have marked the option **Access derived from the homeless network itself** in question 10. Otherwise, go to question 12)*

From a Single Gateway to the network \_\_\_\_\_  1

From other centres in the network \_\_\_\_\_  2

**12. Does the centre have a security service?**

Yes \_\_\_\_\_  1

No \_\_\_\_\_  6 → (Go to question 14)

**13. What type of security service is it?**

Public \_\_\_\_\_  1

Private \_\_\_\_\_  6

**14. Please indicate the percentage contribution of the following organisations or institutions to the financing of the centre**

a.1. State Administration _____	<input type="text"/>
a.2. Autonomous Community Administration _____	<input type="text"/>
a.3. Local Administration (including councils, communities, local corporations...) _____	<input type="text"/>
<b>a. Total public administrations</b> (a.1+a.2+a.3) _____	<input type="text"/>
<b>b. Companies</b> _____	<input type="text"/>
c.1. Associations _____	<input type="text"/>
c.2. Foundations _____	<input type="text"/>
c.3. The Catholic Church _____	<input type="text"/>
c.4. Other religious communities _____	<input type="text"/>
<b>c. Total private non-profit institutions</b> (c.1+c.2+c.3+c.4) _____	<input type="text"/>
<b>d. Individual donations</b> _____	<input type="text"/>
<b>e. Own funds</b> (centre funds) _____	<input type="text"/>
<b>TOTAL</b> ( <i>Shaded totals must sum up 100</i> ) _____	<input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>

**15. What was the total expenditure of the centre in 2018?** (*Indicate the amount in euros without decimals*)

euros

**16. Please, how many persons worked in the centre on 14 December 2018, regarding their situation and dedication** (*In the case where the center would not be in operation on that date, please, take as reference the nearest days in which it would be in operation and indicate at the end of the questionnaire in the Observations section*).

	Part time		Full time		Total	
	Men	Women	Men	Women	Men	Women
Wage earners with indefinite contract _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Wage earners with temporary contract _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Subcontracted _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Volunteers _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Other (Religious persons and students in internships) _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>TOTAL</b> _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**17. Please, indicate the same staff regarding the functions they performed.** (Do not forget to include subcontracted personnel, volunteers, religious persons or in internships ...)

	<u>Part time</u>		<u>Full time</u>		<u>Total</u>	
	<u>Men</u>	<u>Women</u>	<u>Men</u>	<u>Women</u>	<u>Men</u>	<u>Women</u>
Management personnel	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Technical staff (social worker, social educator) ____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Health personnel with a university qualification (doctors, nurses, etc.) ____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Support personnel with health or socio-educational functions _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Auxiliary administrative personnel (secretariat) and services personnel (kitchen, maintenance, surveillance, etc.) _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>TOTAL</b> _____	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

*The totals highlighted in questions 16 and 17 must coincide.*

### C. Specific characteristics of centres that offer accommodation services and/or Housing First program

*(This section must be completed by those centres that offer accommodation services and/or Housing First program. Otherwise, please go to section D)*

#### 18. What has been the period of activity of the center?

All year \_\_\_\_\_  1      → (Please go to question 19)  
 Another period \_\_\_\_\_  2

#### 19. Please indicate the months during which the centre is open

January \_\_\_\_\_       April \_\_\_\_\_       July \_\_\_\_\_       October \_\_\_\_\_   
 February \_\_\_\_\_       May \_\_\_\_\_       August \_\_\_\_\_       November \_\_\_\_\_   
 March \_\_\_\_\_       June \_\_\_\_\_       September \_\_\_\_\_       December \_\_\_\_\_

#### 20. Weekly centre opening *(Mark as many boxes as necessary)*

From Monday through Friday \_\_\_\_\_  1  
 Saturdays \_\_\_\_\_  2  
 Sundays \_\_\_\_\_  3

#### 21. Please mark the daily operating periods of the center

	<u>Without closing</u>	<u>Up to 12 hours open</u>	<u>More than 12 hours open</u>
From Monday through Friday _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saturdays _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sundays _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### 22. Available places according to type of centre the days 15 June and 14 December 2018

*(1) Number of places in flats or apartments: Include the places dedicated to the Housing First program*

	<u>15-06-2018</u>	<u>14-12-2018</u>
Number of bedplaces available in shelters, residences _____	_ _ _	_ _ _
Number of bedplaces available in flats/group or community dwellings <i>(1)</i> _____	_ _ _	_ _ _
Number of bedplaces available in guesthouses/hotel establishments _____	_ _ _	_ _ _
<b>Total number of bedplaces available</b> _____	_ _ _	_ _ _

#### 23. Of the total existing places, how many are concerted or subsidised?

*(This question will only be answered by the centres that had indicated options 2 or 3 of question 1)*

	<u>15-06-2018</u>	<u>14-12-2018</u>
Number of concerted/subsidised places _____	_ _ _	_ _ _

**24. Please, indicate the number of flats/group or community dwellings**

**15-06-2018**    **14-12-2018**

Number of flats/group or community dwellings \_\_\_\_\_

**25. Indicate the number of places occupied according to the type of center on each of the dates**

**indicated and how many of these places were occupied by women** (In case that no service of accommodation was provided during those dates, please, take as reference the closest days that the centres were open, distinguishing between holiday and winter periods. If so, indicate it at the end of the questionnaire in the section Observations.)

(1) Include the places occupied by participants in the Housing First program

(2) Include the places occupied by women in the Housing First program

**15-06-2018**    **14-12-2018**

Number of places occupied in shelter, residence or reception centre \_\_\_\_\_

- Of them, number of places occupied by women \_\_\_\_\_

Number of places occupied in flats or apartments (1) \_\_\_\_\_

- Of them, number of places occupied by women (2) \_\_\_\_\_

Number of places occupied in pensions or hotel establishments \_\_\_\_\_

- Of them, number of places occupied by women \_\_\_\_\_

**Total number of places occupied** \_\_\_\_\_

- **Of them, number of places occupied by women** \_\_\_\_\_

*(The questions 26 and 27 will only be answered by the centres that offer the Housing First program (option 4 of question 5))*

**26. Please, of the total number of apartments or apartments reflected in question 24, enter the number of homes dedicated to the Housing First program on the dates indicated**

**15-06-2018**    **14-12-2018**

Number of dwellings \_\_\_\_\_

**27. Indicate the number of users who have participated in the program and how many of them were women.**

**15-06-2018**    **14-12-2018**

Number of participant \_\_\_\_\_

- Of them, number of women \_\_\_\_\_



*(The questions 28, 29 and 30 will **only** be answered by centres that have places in a **shelter, residence or shelter** (first section of question 22))*

**28. What type of stay does the centre provide?** (Check as many boxes as necessary. The periods of time indicated in parentheses are indicative)

- Emergency (between one and five days) \_\_\_\_\_  1
- Short stay (between six days and a month) \_\_\_\_\_  2
- Long stay (more than one month) \_\_\_\_\_  3

**29. What type of rooms does the centre have?** (Check as many boxes as necessary)

- Individual bedrooms \_\_\_\_\_  1
- Specific bedrooms for families \_\_\_\_\_  2
- Bedrooms with two or three beds \_\_\_\_\_  3
- Multiple bedrooms (4 beds or more) \_\_\_\_\_  4

**30. Characteristics of the centre regarding the user of the accommodation service**

	<b>YES</b>	<b>NO</b>
Do users help with the chores of centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users receive/send correspondence at the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users receive/make telephone calls in the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users recharge electronic devices (laptop, cell phone...)? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users have pets in the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users register in the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users receive visits in the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Are the centre facilities adapted to people with reduced mobility? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6

**D. Specific characteristics of centres that offer catering service**

*(This section must be filled out by those centres that offer catering services, except if they have indicated options 3, 4 or 5 of question 4 (flats/groups or community dwellings). If that is not the case, go to section E)*

**31. What type of service does it provide? (Indicate as many boxes as necessary)**

- Lunch \_\_\_\_\_  1
- Dinner \_\_\_\_\_  2
- Breakfast \_\_\_\_\_  3
- Handing out sandwiches or food parcels \_\_\_\_\_  4
- Handing out soup or hot beverages \_\_\_\_\_  5

*If you only indicate these options, go to questions 29 and 30, and go to the next section*

**32. Activity period**

- All year \_\_\_\_\_  1 → (Please go to question 31)
- Another period \_\_\_\_\_  2

**33. Please indicate the months during which the centre is opened**

- |   |                                      |  |   |
|---|--------------------------------------|--|---|
| January _____ <input type="checkbox"/>  | April _____ <input type="checkbox"/> | July _____ <input type="checkbox"/>      | October _____ <input type="checkbox"/>  |
| February _____ <input type="checkbox"/> | May _____ <input type="checkbox"/>   | August _____ <input type="checkbox"/>    | November _____ <input type="checkbox"/> |
| March _____ <input type="checkbox"/>    | June _____ <input type="checkbox"/>  | September _____ <input type="checkbox"/> | December _____ <input type="checkbox"/> |

**34. Weekly offering of catering services**

	Breakfast	Lunch	Dinner
From Monday through Friday _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saturdays _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sundays _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**35. Are breakfasts, meals and/or dinners made in each centre?**

- Yes, they are made in each centre \_\_\_\_\_  1
- No, they are made by a catering company \_\_\_\_\_  2

**36. Please, indicate the number of table settings available the days 15 June and 14 December 2018.**

	<b>15-06-2018</b>	<b>14-12-2018</b>
Total number of table settings available _____	_ _ _ _ _	_ _ _ _ _

**37. Mark the number of breakfasts, lunches and / or dinners that have been served on each of the dates indicated (In case the centre was not opened on those dates, please, take as reference the closest days in which the centre was opened, distinguishing between holiday and winter periods. Please, write it in the section Observations.)**

	<b>15-06-2018</b>	<b>14-12-2018</b>
Number of breakfasts _____	_ _ _ _ _	_ _ _ _ _
Number of lunches _____	_ _ _ _ _	_ _ _ _ _
Number of dinners _____	_ _ _ _ _	_ _ _ _ _
Number of services (breakfasts + lunches + dinners) _____	_ _ _ _ _	_ _ _ _ _

**E. Specific characteristics of intervention on the street services**

*(This section must be filled out by those centres that offer **Intervention on the street**. Otherwise, go to section F)*

**38. Which was the activity period?**

All year \_\_\_\_\_  1 → (Go to question 37)  
 Other period \_\_\_\_\_  2

**39. Please, indicate the months in which intervention services have been performed**

January \_\_\_\_\_       April \_\_\_\_\_       July \_\_\_\_\_       October \_\_\_\_\_   
 February \_\_\_\_\_       May \_\_\_\_\_       August \_\_\_\_\_       November \_\_\_\_\_   
 March \_\_\_\_\_       June \_\_\_\_\_       September \_\_\_\_\_       December \_\_\_\_\_

**40. Opening Hours**

	Open only during the day	Open only at night	Open day and night
From Monday through Friday _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saturdays _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sundays _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**41. How many persons were attended on 15 June and 14 December 2018, and of them, how many were women?** *(In the event that the service has not been provided on these dates, please, take as a reference the nearest days in which you had performed any intervention, distinguishing between the summer and winter period and indicate it at the end of the questionnaire in the Observations section).*

	<b>15-06-2018</b>	<b>14-12-2018</b>
Number of persons tended to _____	_ _ _ _	_ _ _ _
- of them, number of woman _____	_ _ _ _	_ _ _ _

**42. Mobile means available on the indicated dates**

	<b>15-06-2018</b>	<b>14-12-2018</b>
Number of automobiles available _____	_ _ _ _	_ _ _ _
Number of motorcycles available _____	_ _ _ _	_ _ _ _
Number of vans or buses available _____	_ _ _ _	_ _ _ _
Total number of mobile means available _____	_ _ _ _	_ _ _ _

**43. Please, indicate the number of resources available on the indicated dates**

	<b>15-06-2018</b>	<b>14-12-2018</b>
Number of street teams available _____	_ _ _ _	_ _ _ _
Number of volunteers tending in the streets _____	_ _ _ _	_ _ _ _
Number of persons tending in streets _____	_ _ _ _	_ _ _ _

**44. Do you perform nightly counts of homeless people?**

Sí \_\_\_\_\_  1

No \_\_\_\_\_  6      → (Pasar a la sección F)

**45. Please indicate the number of people counted on June 15 and December 14, 2018 and how many of these people were women** *(In case the count was not made on these dates, please, take as reference the closest days in which they would have done so, distinguishing between the summer and winter period and indicate it at the end of the questionnaire in the Observations section).*

	<u>15-06-2018</u>	<u>14-12-2018</u>
Number of persons tended to _____	_ _ _ _	_ _ _ _
- of them, number of woman _____	_ _ _ _	_ _ _ _

**F. Specific characteristics of centres that offer occupational and/or educational services**

*(This section should be full filled by day centres and centres that offer occupational and/or educational services. Otherwise, go to Observations)*

*Only the centres that have indicate option 8 question 4 or options 6, 7, 8 or 11 of question 5, should fill out this section*

**46. Which has been the activity period?**

All year \_\_\_\_\_  1 → (Go to question 43)  
 Other period \_\_\_\_\_  2

**47. Please, indicate the months during which the centre was opened**

January \_\_\_\_\_       April \_\_\_\_\_       July \_\_\_\_\_       October \_\_\_\_\_   
 February \_\_\_\_\_       May \_\_\_\_\_       August \_\_\_\_\_       November \_\_\_\_\_   
 March \_\_\_\_\_       June \_\_\_\_\_       September \_\_\_\_\_       December \_\_\_\_\_

**48. Please, indicate the days the centre is open (Mark as many boxes as necessary)**

From Monday to Friday \_\_\_\_\_  1  
 Saturdays \_\_\_\_\_  2  
 Sundays \_\_\_\_\_  3

**49. Indicate the number of places available on 15 June y 14 December 2018.**

**15-06-2018**      **14-12-2018**

Total number of places \_\_\_\_\_ 

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**50. Please, indicate the number of places occupied on the indicated dates. (In case that the centre was closed during those dates, please, take as reference the closest days that the centres were open, distinguishing between holiday and winter periods. If so, indicate it at the end of the questionnaire in the section Observations.).**

**15-06-2018**      **14-12-2018**

Number of occupied places \_\_\_\_\_ 

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**51. Centre characteristics regarding the user of the occupational and/or educational services**

	YES	NO
Do users help with the chores of centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users receive/send correspondence at the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users receive/make telephone calls in the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Is there a left-luggage service available to users in the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users recharge electronic devices (laptop, cell phone...)? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users have pets in the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users register in the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users receive visits in the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Are the centre facilities adapted to people with reduced mobility? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users do internships managed by the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6
Can users enrol in labour exchange managed by the centre? _____	<input type="checkbox"/> 1	<input type="checkbox"/> 6

***Observations:***

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***Thank you for taking part.***

