

VISHNU INSTITUTE OF TECHNOLOGY

OCEAN CLEAN-UP AWARENESS SURVEY FORM

Respondent Information:

- Full Name: _____

- Village : _____

- Date: _____

S.No	Survey Questions (Check one box per question)
1	Have you noticed an increase in pollution along the coastline in recent years? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure <input type="checkbox"/> Rarely
2	What types of waste do you commonly see near the beach or water? <input type="checkbox"/> Plastic Bottles & Bags <input type="checkbox"/> Fishing Gear <input type="checkbox"/> Food Wrappers <input type="checkbox"/> Glass/Cans
3	How does ocean pollution affect your daily life? <input type="checkbox"/> Affects local livelihood <input type="checkbox"/> Reduces tourism <input type="checkbox"/> Health risks <input type="checkbox"/> No major impact
4	Are there waste bins or recycling stations near your local beach/harbor? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Enough <input type="checkbox"/> I don't know
5	Would you participate in a beach clean-up event? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe <input type="checkbox"/> Only if nearby
6	What days work best for clean-up activities? <input type="checkbox"/> Weekdays <input type="checkbox"/> Weekends <input type="checkbox"/> Public Holidays <input type="checkbox"/> Any Day
7	How should we spread awareness about ocean clean-up? <input type="checkbox"/> Social Media <input type="checkbox"/> Posters <input type="checkbox"/> School/College Events <input type="checkbox"/> Door-to-door Awareness
8	Which features do you like most in the Ocean Clean-Up Volunteer App? <input type="checkbox"/> Event Listing <input type="checkbox"/> Volunteer Sign-up <input type="checkbox"/> Map Location <input type="checkbox"/> Success Stories
9	What improvements would you like in the app? <input type="checkbox"/> Upload Photos <input type="checkbox"/> Volunteer Leaderboard <input type="checkbox"/> Reminders <input type="checkbox"/> Chat Feature
10	Would you recommend this app to others? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Maybe <input type="checkbox"/> Not Used Yet

Declaration:

I confirm that all information provided is accurate to the best of my knowledge.

Signature: _____

Date: _____