

**St. Margaret of Scotland RC Church**  
*Parish Feasibility Study*

**Please return this form in the enclosed envelope by mail or in the  
Collection by Sunday, September 3<sup>rd</sup>**

Dear Parishioner,

During the next few weeks our parish is undertaking a Feasibility Study to seek input and advice from all parishioners on the details of proposed improvements to our parish buildings. Your participation in this study is a very important factor in planning for our future. Please read the enclosed information and complete this questionnaire to the best of your ability. **All surveys will be kept confidential and are only viewed by Parish Development for the purpose of preparing a report to the parish.** You may return this questionnaire by mail or place it in the collection basket at Mass. You can also access the information on the parish's web-site at [www.saintmargaret.com](http://www.saintmargaret.com) and click on the "Feasibility Study" link. Thank you!

Name (Optional):

Address:

City:

State:

Zip:

Phone:

E-mail:

1. How long have you been a parishioner of St. Margaret's? \_\_\_\_\_ years.

2. Are you currently involved in any parish programs/ministries?

\_\_\_\_\_ Yes \_\_\_\_\_ No

Which programs/ministries \_\_\_\_\_

3. How would you rate your overall satisfaction with the Parish?

Very Satisfied \_\_ Satisfied \_\_ Dissatisfied \_\_\_\_\_ Very Dissatisfied \_\_\_\_\_

Comments \_\_\_\_\_

***Please review the Feasibility Study Needs Statement before answer the following questions.***

4. Are you familiar with the parish's current needs?

Yes \_\_\_\_\_ No \_\_\_\_\_ Somewhat \_\_\_\_\_

5. What is your reaction to the Needs Statement?

Necessary \_\_\_\_\_ Mixed \_\_\_\_\_ Un-necessary \_\_\_\_\_

6. Are there any of these projects that you feel should be given priority?

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7. Are there other areas of need that are not included in the Needs Statement that you see as a priority?

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8. Please rate your overall agreement with this question:  
The parish will need to conduct a capital campaign to fund the cost of the proposed repairs and improvements?

\_\_\_\_\_ Strongly Agree    \_\_\_\_\_ Agree    \_\_\_\_\_ Disagree    \_\_\_\_\_ Strongly Disagree

9. With regard to your own involvement would you:

	Yes	No	Maybe
Give to a Campaign	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Serve as a leader	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Solicit Gifts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Significant gifts will be needed in order for the parish to undertake this project. If you were to consider making a financial commitment to the campaign, could you possibly estimate the size of your gift? *(Please note, this is not a commitment, it is a projection of possible gifts to help us move forward in our financial planning.)*

- |  |   |
|--|---|
| _____ \$38 per month for 4 years or \$2,000  | _____ \$141 per month for 4 years or \$7,500  |
| _____ \$47 per month for 4 years or \$2,500  | _____ \$188 per month for 4 years or \$10,000 |
| _____ \$56 per month for 4 years or \$3,000  | _____ \$281 per month for 4 years or \$15,000 |
| _____ \$66 per month for 4 years or \$3,500  | _____ \$375 per month for 4 years or \$20,000 |
| _____ \$75 per month for 4 years or \$4,000  | _____ \$469 per month for 4 years or \$25,000 |
| _____ \$94 per month for 4 years or \$5,000  | _____ \$ _____ Please fill in an amount       |
| _____ \$113 per month for 4 years or \$6,000 | _____ Unsure at this time                     |

***Please note – Monthly payment amounts are based on (optional) 10% down payment and the frequency of the pledge payments would be selected by the donor.***

11. Please complete the following statement, “If there is one thing I wish St. Margaret’s would do, I wish it would...”

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12. To be successful, a capital campaign needs strong leadership. Who do you feel could serve as effective campaign leaders? Why?

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13. Additional Comments:

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Thank You for your thoughts and opinions!