

Boulder County
Creating Vibrant Communities in Which We Age Well

Individual Response Form

1. ***As you age, has your day-to-day life:***

Improved? _____ Stayed about the same? _____ Become more difficult _____

2. ***Compared to this time last year, are you:***

Healthier? _____ About the same? _____ Less healthy? _____

3. ***When it comes to aging well, what's your highest priority?***

4. ***Is there anything more about your biggest struggle that you'd like us to understand?***

5. ***Please add anything else you'd like to make sure we consider:***

6. Please list your city/town of residence _____

Thank you!