

Somerset County Day Reporting Center

Program Participant Survey

Program Name: _____

Program Instructor: _____

The program was beneficial to you. (circle one)

1	2	3	4	5	6
Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree

Explain: _____

The presentations were useful. (circle one)

1	2	3	4	5	6
Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree

Explain: _____

The discussions were helpful. (circle one)

1	2	3	4	5	6
Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree

Explain: _____

The activities were engaging. (circle one)

1	2	3	4	5	6
Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree

Explain: _____

The program taught you useful tools that you can apply to your life? (circle one)

1	2	3	4	5	6
Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree

Explain: _____

The program instructor delivered the program effectively? (circle one)

1	2	3	4	5	6
Strongly Disagree	Disagree	Slightly Disagree	Slightly Agree	Agree	Strongly Agree

Explain: _____

What was your overall experience with this program? (circle one):

5	4	3	2	1
(Very Good)	(Good)	(Neither)	(Bad)	(Very Bad)

Additional Comments:

Thank You for taking the time to fill out this survey.