

**(Insert Name) PROGRAM**  
**Support Group Evaluation Form**

1. **Which face best captures how you feel about this program overall?**  
(please mark an 'x' over your choice)



**What do you like best?**

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**What do you like least?**

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2. **For each of the following statement please circle the response that best reflects your feeling about that statement.**

This program has made an important difference in my life

Strongly Agree                      Agree                      Disagree                      Strongly Disagree

I feel welcome when I attend support group meetings

Strongly Agree                      Agree                      Disagree                      Strongly Disagree

I have learned skills in this program that I use each day

Strongly Agree                      Agree                      Disagree                      Strongly Disagree

I am a better parent as a result of this program

Strongly Agree                      Agree                      Disagree                      Strongly Disagree

I felt safe when raising my point of view in meetings

Strongly Agree                      Agree                      Disagree                      Strongly Disagree

I practice better nutrition as a result of this program

Strongly Agree                      Agree                      Disagree                      Strongly Disagree

I am more aware of community service that can help me as a result of participating in this program

Strongly Agree                      Agree                      Disagree                      Strongly Disagree

**3. How relevant was the program to your experience with \_\_\_\_\_?**

(place an 'x' on the line below)

\_\_\_\_\_

No at all | Somewhat | Very

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**4. How would you rate the way the way program staff (or volunteers) interacted with participants?**

(place an 'x' on the line below)

\_\_\_\_\_

Very Poorly | Very well

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**5. Describe an experience that you have had since participating in the program that you dealt with differently because of what you learned through this program?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**6. How do you think we could we improve the program?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Thanks for helping us to assess and improve the program!!**