

# Family Voices

## Serving on Groups

### Evaluation Survey Module 4

Name: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Instructor name: \_\_\_\_\_ Date: \_\_\_\_\_

Please take the time to honestly answer the following questions. Your answers will help us understand what works and what we can improve to help more families make a difference by serving on decision-making groups. Your responses are very important to us.

We are asking for your name and e-mail address so that we can do a follow-up survey to understand changes over time. Your e-mail address will not be shared or used for any other purpose. Please let your instructor know if you have any questions or concerns. Thank you for your participation!

**The following statements ask you to compare how you feel NOW, after you've taken the training, with BEFORE you took the training.** Please mark one box per row.

Module 4: Tools Groups Use	
<p><b>1a. Now, after the training,</b> I clearly understand how the following can help groups function effectively (<i>select all that apply</i>)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Facilitator</li> <li><input type="checkbox"/> Ground rules</li> <li><input type="checkbox"/> Meeting agenda</li> <li><input type="checkbox"/> Meeting minutes</li> <li><input type="checkbox"/> Written guidance</li> <li><input type="checkbox"/> Open meetings/closed sessions</li> </ul>	<p><b>1b. Before the training,</b> I clearly understood how the following can help groups function effectively (<i>select all that apply</i>)</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Facilitator</li> <li><input type="checkbox"/> Ground rules</li> <li><input type="checkbox"/> Meeting agenda</li> <li><input type="checkbox"/> Meeting minutes</li> <li><input type="checkbox"/> Written guidance</li> <li><input type="checkbox"/> Open meetings or closed sessions</li> </ul>

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
2a. <b>Now, after the training,</b> I can identify common reasons why groups might be unproductive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2b. <b>Before the training,</b> I could identify common reasons why groups might be unproductive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Please indicate your level of agreement with the following statements about today's training.** Please mark one box per row

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
3. The training topic was covered in sufficient detail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The training allowed sufficient time for questions and answers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The instructor had high-quality presentation skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The instructor was highly knowledgeable about the topic covered today	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

7. Please share any comments about the training or suggestions for improvement here: