

**Western NC Region Positive Parenting Program
Level 2 Seminar Caregiver Satisfaction Survey**



Your child's age: _____

Date of seminar: _____ Presenter's name: _____

County: _____ Name of seminar: _____

INSTRUCTIONS:

This questionnaire will help us to evaluate and continually improve the Triple P parenting program we offer. We are interested in your **HONEST OPINIONS** about the services you have received, whether they are positive or negative. Please answer all of the questions by circling the response that best describes how you honestly feel. Thank you!

1. How would you rate the quality of the seminar presentation?

| | | | | | | |
|------|---|---|---|---|---|-----------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Poor | | | | | | Excellent |

2. Did the seminar provide sufficient opportunities for questions?

| | | | | | | |
|--------------------|---|---|---|---|---|-----------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| No, definitely not | | | | | | Yes, definitely |

3. Was the seminar interesting to you?

| | | | | | | |
|--------------------|---|---|---|---|---|-----------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| No, definitely not | | | | | | Yes, definitely |

4. Did the presenter use clear examples to illustrate parenting issues?

| | | | | | | |
|--------------------|---|---|---|---|---|-----------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| No, definitely not | | | | | | Yes, definitely |

5. Did the presenter provide clear explanations?

| | | | | | | |
|--------------------|---|---|---|---|---|-----------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| No, definitely not | | | | | | Yes, definitely |

6. Did you gain sufficient knowledge or information to be able to implement the parenting advice you heard about?

| | | | | | | |
|--------------------|---|---|---|---|---|-----------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| No, definitely not | | | | | | Yes, definitely |

7. Overall, how would you rate the content of the seminar?

| | | | | | | |
|------|---|---|---|---|---|-----------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| Poor | | | | | | Excellent |

8. Was the seminar helpful in gaining an understanding of what you can do to help your child learn new skills and behavior?

| | | | | | | |
|--------------------|---|---|---|---|---|-----------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| No, definitely not | | | | | | Yes, definitely |

9. Was the parenting tip sheet you received useful?

| | | | | | | |
|--------------------|---|---|---|---|---|-----------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| No, definitely not | | | | | | Yes, definitely |

10. Do you intend to implement the parenting advice you received?

| | | | | | | |
|--------------------|---|---|---|---|---|-----------------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| No, definitely not | | | | | | Yes, definitely |