Family Feedback Survey

Date Completed_____

Please circle who you are: **Youth** **Parent / Guardian**

Please take a couple minutes to complete our survey to improve our quality of services. *All surveys are anonymous and confidentially, and provided directly to the Quality Services unit.*	Strongly Agree	Agree	Neither Agree or Disagree	Disagree	Strongly Disagree
I understood why I worked with the Juvenile Office.	5	4	3	2	1
I understood the process of working with the Juvenile Office.	5	4	3	2	1
I understood what I needed to do in my case.	5	4	3	2	1
I was able to provide input throughout my case.	5	4	3	2	1
I believe my input was valued throughout my case.	5	4	3	2	1
I believe that my voice mattered.	5	4	3	2	1
My Juvenile Officer was helpful.	5	4	3	2	1
My Juvenile Officer answered all my questions.	5	4	3	2	1

Please let us know if you have other comments or suggestions to improve our service to youth and families.

Last Date Revised: August 3, 2022