



We would like to ask you a few questions so that Families Helping Families can measure the effectiveness of its services to families. The answers you give will help us improve these services.

Please select your level of agreement or disagreement with the following statements.

Name

0/50

*** There was a FHF representative available to speak to me the first time I contacted the Center. NOTE: If you did not call during regular operating hours, check N/A.**

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree
- Not Applicable

*** FHF staff were courteous and supportive.**

- Strongly Agree
- Agree
- Disagree
- Strongly Disagree
- Not Applicable