

FRC Contractor Evaluation Form Participants

Name of Organization/ Program/ Workshop/ Presentation: _____

Please evaluate the following statements 1 being the lowest score and 5 being the highest score.

Please rate your level of stress before taking the course (1 being the lowest level of stress and 5 being the highest level of stress).

1 2 3 4 5

How likely are you to participate in this activity again?

1 2 3 4 5

How likely are you to recommend this session to someone?

1 2 3 4 5

How likely are you to participate in another FRC activity/ programming?

1 2 3 4 5

Please select your answer	Yes	No
Did you run into any obstacles in attending this event?		
Did you run into any challenges understanding the material?		
The material presented were easy to follow and understand.		
I feel like this was a good way to spend my time.		
I found this experience conducive to my healing process.		
I would like to engage in more non-traditional therapies in the future.		
My expectations were meet.		

Please rate your instructor/ moderator

Please select your answer	Yes	No
My instructor/ moderator fostered an inclusive environment.		
My instructor/ moderator was engaging and attentive.		
My instructor/ moderator was prepared and flexible.		

My instructor/ moderator presented the objectives of the class in an effective matter.		
My instructor/ moderator was respectful of everyone's privacy and individuality.		
My instructor/ moderator was mindful of language and cultural sensitivity.		

Please answer the following statements in short answers.

Are there any non-traditional therapies that you would like to see at the FRC?

Were the time and dates provided fitting to your schedule or would like to see any changes?

Do you have any suggestions on how we can improve our non-traditional therapies?

Please rate your level of stress after taking the course (1 being the lowest level of stress and 5 being the highest level of stress).

1 2 3 4 5