ADD HOUSE NAME

Participant Survey

Activity: ___________________________ □ Online □ Face to face:

HOW WELL DID WE DO IT?

1. How did coming participating into the activity today make you feel?

Keyword selection – e.g.
- □ Happy
- □ Connected
- □ Safe
- □ Confident
- □ Excited
- □ Enthusiastic
- □ Welcomed
- □ Supported
- Other: ___________

2. Would you come back to do participate in this activity again?

👍👍👍👍👍

3. Would you recommend the activity to others?

👎👎👎👍👍👍

4. Did you enjoy the activity?

👎👎👎👍👍👍

5. Did the activity meet your expectations?

👎👎👍👍👍 □ N/A

IS ANYONE BETTER OFF?

Measure: Connected me with other people in your community

6. Did the activity help you connect with other people in your community?

👎👎👎👍👍👍
Measure: Raised my awareness of services and supports
7. Did the activity help raise my awareness of services and supports

Measure: Connected me to the services and supports I need
8. Did the activity help you connect with service providers/services?

Measure: Increased my confidence in myself
9. After attending this activity/event, I feel:

Measure: Increased my skills and knowledge
10. I believe I gained new skills or knowledge

Measure: Increased my sense of safety in my community
11. After attending the activity today I feel safer:

12. Do you have any suggestions about how we might improve this activity/event in the future?

13. What is the most significant thing you’ll take away from this activity/event?