Pre-Program Reflection



Date: ____ /____ /____

Location: ____

Facilitator(s):

We are interested in knowing how you experience the program. So we are going to ask you some questions before the program starts and then after the program ends. Your feedback helps us to keep making this program more relevant for parents/carers like you. We appreciate it.

Please take a few moments to answer the following questions.

1. What do you think this group is about?

2. Why did you decide to attend this group?

3. What do you hope to gain from attending this group?

4. Do you have any other comments?

