

Post-program Evaluation



Date: ___/___/___ Location: _____

Facilitator/s: _____

Now that you have completed the Bringing Up Great Kids program, we would love your feedback.

1. Please take a few moments to reflect upon, and write about, your experience of the program.

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2. Did the program meet your expectations?

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3. What else could we have done or could do better?

- The program should be longer or shorter, please specify [.....]
- More in-depth information about [.....]
- Less time on [.....]
- More time on [.....]

4. Any other comments.

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