**Parent Feedback Form**

In order to ensure the satisfaction of your family and maintain quality services, we ask that you take a moment to complete the below survey. Please let us know what you would like to see Piece of Our Puzzle improve as well as anything that may have worked really well for you and your family within our service delivery. Our ultimate goal *is* progress, participation and satisfaction. When you are finished the survey, please detach and send back to our office. You can also email the completed form to **erin@pieceofourpuzzle.com** - Thank you for your time!

## Name of Person Completing Form and Relationship to Child: Name of Child: Age: Birthday:

Address: Phone Number:

# My child receives the following services.

## Staff are on-time and punctual — NEVER

SOMETIMES

ALWAYS

N/A

Staff are knowledgeable in the areas that they provide services for - NEVER SOMETIMES ALWAYS N/A

Staff has a good rapport with my child and family - NEVER

I feel as though progress is being made - NEVER

SOMETIMES

SOMETMES ALWAYS

ALWAYS

N/A

I have a better understanding of the services being provided - NEVER SOMETIMES

N/A

I feel a part of my child’s *team —* NEVER SOMETIMES *I* am able to communicate with my child ‘s team - NEVER Services are taking place to fit my family’s schedule — NEVER Additional Comments:

ALWAYS

SOMETIMES

SOMETIME

N/A

ALWAYS

ALWAYS

N/A

N/A

