

YOUTH TRANSFORMATION CENTER - RJ MEETING STUDENT FEEDBACK
 FOR TRANSFORMING SAFETY PROJECT WITH ELEMENTARY SCHOOLS
 This form should be filled out by an adult, particularly for those children
 who may not have the reading skills to do this on their own.



Which best describes you today?

Person Harmed

Person Who Caused Harm

Please mark the best answer:

1. Were things fair?	<input type="checkbox"/> No	<input type="checkbox"/> Sort of	<input type="checkbox"/> Yes
2. Did you feel listened to?	<input type="checkbox"/> No	<input type="checkbox"/> Sort of	<input type="checkbox"/> Yes
3. Were your questions answered?	<input type="checkbox"/> No	<input type="checkbox"/> Sort of	<input type="checkbox"/> Yes
4. Did you come to today's meeting by choice?	<input type="checkbox"/> No	<input type="checkbox"/> Sort of	<input type="checkbox"/> Yes
5. Was today's meeting useful to you?	<input type="checkbox"/> No	<input type="checkbox"/> Sort of	<input type="checkbox"/> Yes
6. Do you think the student who did harm was held accountable? Did she or he take responsibility for his/her actions?	<input type="checkbox"/> No	<input type="checkbox"/> Sort of	<input type="checkbox"/> Yes
7. Were the needs of the person who was harmed met?	<input type="checkbox"/> No	<input type="checkbox"/> Sort of	<input type="checkbox"/> Yes
8. Were the consequences fair?	<input type="checkbox"/> No	<input type="checkbox"/> Sort of	<input type="checkbox"/> Yes
9. Would you suggest this meeting for others?	<input type="checkbox"/> No	<input type="checkbox"/> Maybe	<input type="checkbox"/> Yes

10. How did this meeting go for you? Please circle the best answer:

bad kind of bad I don't know kind of good good

11. Please share any other comments you have: