Strong Choices Program
Participant Feedback Form

		(1) Not at All	(2) A little	(3) Somewhat	(4) A lot	(5) Extremely
1.	How interested in this session did you expect to be?	O	O	O	O	O
2.	How interesting was this session?	O	O	O	O	O

What led you to choose these responses?

How much did these things help you understanding the information?		(1) Not at All	(2) A little	(3) Somewhat	(4) A lot	(5) Extremely
3.	The videos and animations	O	O	O	O	O
4.	The instructor	O	O	O	O	O
5.	Handouts/activities	O	O	O	O	O

What led you to choose these responses?

How much did these things cause you to think more about the information?		(1) Not at All	(2) A little	(3) Somewhat	(4) A lot	(5) Extremely
6.	The videos and animations	O	O	O	O	O
7.	The instructor	O	O	O	O	O
8.	Handouts/activities	O	O	O	O	O

What led you to choose these responses?

		(1) Not at All	(2) A little	(3) Somewhat	(4) A lot	(5) Extremely
9.	How much did you like session?	O	O	O	O	O
10.	How motivated do you feel to think about your drug and alcohol choices?	O	O	O	O	O

How concerned are you about your current…	(1) Not at All	(2) A little	(3) Somewhat	(4) A lot	(5) Extremely
11. Drug choices?	○	○	○	○	○
12. Alcohol choices?	○	○	○	○	○

Using the 0-1-2-3 guidelines for low risk choices, I am currently making *low* risk choices for…	(0) No	(1) Unsure	(2) Yes	(88) Does Not Apply
13. Alcohol	○	○	○	○
14. Prescription medications	○	○	○	○
15. Other drugs	○	○	○	○

How much do you like each of these names for the program?	(1) Not at All	(2) A little	(3) Somewhat	(4) A lot	(5) Extremely
16. Strong Choices	○	○	○	○	○
17. PRIME Awareness	○	○	○	○	○
18. PRIME Connections	○	○	○	○	○
19. _____	○	○	○	○	○

Here are a few other things we'd like your opinion about.

1. What parts of the session will stick with you?

2. What parts of the session could you live without?

3. What parts annoyed you or had a *negative* impact on you?

4. What other comments or suggestions do you have to improve the session, including how the facilitator should conduct it?

5. Did the module name describe the session well? What are your suggestions of different names for the module?

Finally, we just want to understand who the audience is today...

A. How old are you? _____

B. Gender?
- ○ (0) Female
- ○ (1) Male

C. What is your racial/ethnic background? Check all that apply.
- ☐ (0/1) African-American, Black, or African
- ☐ (0/1) American Indian, Native American, or Alaskan Native
- ☐ (0/1) Asian or Asian-American
- ☐ (0/1) Latina, Latino, or Hispanic
- ☐ (0/1) Native Hawaiian or other Pacific Islander
- ☐ (0/1) White, Caucasian, or European
- ☐ (0/1) Other: _____

D. What is the highest education you have completed so far?
- ○ (1) 8th grade or less
- ○ (2) 9th to 11th grade
- ○ (3) High school graduate or GED
- ○ (4) Some college or technical school
- ○ (5) Associate Arts degree (2 year or AA degree)
- ○ (6) Four year degree
- ○ (7) Graduate degree

E. Which *best* describes your *current* relationship status?
- ○ (1) Never married
- ○ (2) Living together
- ○ (3) Married
- ○ (4) Registered domestic partner
- ○ (5) Separated
- ○ (6) Divorced
- ○ (7) Widowed

F. What is your current rank in the Army, Army Reserve or National Guard?
- ○ (1) E1 – E3
- ○ (2) E4 – E6
- ○ (3) E7 – E9
- ○ (4) W1 – W5
- ○ (5) O1 – O10

E. How many times have you been deployed to either Iraq or Afghanistan or another combat theater?
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