Dear Parent/Caregiver:

Would you please take a few minutes to evaluate our questionnaires? We appreciate your participation in our program and hope that our services have been helpful to you.

*Please circle the number that best expresses your opinion.*

1. Approximately how many minutes did it take you to fill out each questionnaire?  
   ____ minutes.
   
   Did you consider this amount of time:  
   very little time  1  2  3  too much time  4  
   
   Comments:

2. Did the questionnaires alert you to skills your child has or activities your child could do that you were not sure about?  
   very few  1  2  3  very many  4  
   
   Comments:

3. After filling out the questionnaires, did you have any new ideas about how to interact or play with your child?  
   very few  1  2  3  very many  4  
   
   Comments:
4. Were any items unclear or difficult to understand?

very few 1 2 3 very many 4

Comments:

5. Did you enjoy participating in this program?

very little 1 2 3 very much 4

Comments:

If you have any further comments about the questionnaires, please write them below.