

Talking Service Site:

Date of First Session:

**Talking Service
Participant Pre-Survey**

Name _____

Rank _____

OR

I am a family member of a veteran. Relationship: _____

Check: Male _____ **Female** _____ **Age** _____

Military Branch: _____

List deployments or named operations and year(s):

Why did you sign up for this program? What do you hope to gain from this experience?

Please continue on to other side



Please use the following scale to rate your understanding and practice for each idea. Please circle one number for each component.

1= I have no experience nor understanding.

2= I can tell you what this is, but have not had any personal experiences.

3= I have had one experience with this.

4= I have had a few experiences with this.

5= I have had many experiences with this.

1 2 3 4 5 Participating in a book discussion

1 2 3 4 5 Participating in Shared Inquiry discussions

1 2 3 4 5 Reading literature about war and/or military experience

1 2 3 4 5 Deployment in support of a war, conflict, or named operation

1 2 3 4 5 Sharing past experiences in war, conflict, or named operation

1 2 3 4 5 Sharing experiences with transitioning into civilian life

1 2 3 4 5 Participating in a program for veterans

The *Talking Service* team is working with professional evaluators to assess the impact and success of the program. Your responses are very important for providing a successful program. Thank you for sharing with us!

The evaluators are interested in talking to some *Talking Service* participants to learn more about their experiences in the program. If you'd be willing to take part in a confidential short interview (15-20 minutes) with one of the evaluators, please share your phone number and email address:

Phone:

Email: