

SAFELIGHT SATISFACTION SURVEY
FJC CAC ES

CHECK the service(s) received at Safelight and CIRCLE satisfaction level.

<input type="checkbox"/> 24-hour crisis line	Very Unsatisfied	Unsatisfied	Neutral	Satisfied	Very Satisfied
<input type="checkbox"/> Emergency Shelter	Very Unsatisfied	Unsatisfied	Neutral	Satisfied	Very Satisfied
<input type="checkbox"/> Emergency Room Advocacy	Very Unsatisfied	Unsatisfied	Neutral	Satisfied	Very Satisfied
<input type="checkbox"/> Counseling	Very Unsatisfied	Unsatisfied	Neutral	Satisfied	Very Satisfied
<input type="checkbox"/> Case Management	Very Unsatisfied	Unsatisfied	Neutral	Satisfied	Very Satisfied
<input type="checkbox"/> Support Groups	Very Unsatisfied	Unsatisfied	Neutral	Satisfied	Very Satisfied
<input type="checkbox"/> Transitional Housing	Very Unsatisfied	Unsatisfied	Neutral	Satisfied	Very Satisfied
<input type="checkbox"/> Court Advocacy	Very Unsatisfied	Unsatisfied	Neutral	Satisfied	Very Satisfied
<input type="checkbox"/> Job Training	Very Unsatisfied	Unsatisfied	Neutral	Satisfied	Very Satisfied
<input type="checkbox"/> Law Enforcement Accompaniment	Very Unsatisfied	Unsatisfied	Neutral	Satisfied	Very Satisfied

How satisfied are you with the services received at Safelight? (Circle one)

Very Unsatisfied Unsatisfied Neutral Satisfied Very Satisfied

Was the staff friendly and helpful? (Circle one)

NO MAYBE YES

Which staff in particular and why?

How did you benefit from services at Safelight? "After Safelight I _____."

<input type="checkbox"/> felt listened to	<input type="checkbox"/> felt less stress/anxiety	<input type="checkbox"/> increased my knowledge of local resources
<input type="checkbox"/> felt more confident	<input type="checkbox"/> Decreased isolation	<input type="checkbox"/> increased my knowledge of domestic violence, sexual assault and/or child abuse
<input type="checkbox"/> felt more hope for the future	<input type="checkbox"/> felt safer	
<input type="checkbox"/> felt emotionally supported	<input type="checkbox"/> Increased knowledge on ways to stay safe	

Would you recommend Safelight services to other people? (Circle one)

NO MAYBE YES

What aspect of the program was MOST helpful to you?

What aspect of the program was LEAST helpful to you?

We would love to hear more from you. Your ideas and experiences are extremely important.
Please email or write with any additional comments or suggestions to:
Info@safelightfamily.org or 133 5th Avenue West, Hendersonville, NC, 28792