

DATE: January 14, 2014

PROGRAM: *Select Program Name*

MEMBER NAME(S):

GENERAL

How did you find out about the program? What made you decide to join?

What does an average day/week look like?

Has your role as a member been clear (as described in the position description)?

MEMBER TRAINING

Tell me about your orientation/pre-service training. Do you feel that it adequately prepared you to begin your service assignment? Could it be improved?

Did you have a formal orientation at your service site?

What kinds of other training have you received? Has it been beneficial?

MEMBER SUPPORT

Tell me about your site supervisor.

Do you feel supported at your site? Is there anything that could be improved?

How often do you meet with him/her? Is this sufficient for your needs?

Do you feel supported by the program staff?

MEMBER IMPACT

How do you see your service contributing to your program's overall goals?

How has your service impacted your site?

What data are you collecting? Do you think it's the correct data to show success?

PERSONAL EXPERIENCE

On a scale of 1-10 (1 being not good, 10 being perfect) how would you rate your overall experience with your program? 1 2 3 4 5 6 7 8 9 10 other

Is there anything you would recommend the program do in order to increase overall effectiveness?

How will you know you have had a successful year?

ADDITIONAL QUESTIONS

What else is important for me to know about your experience and/or your program?

Do you have any questions you would like to ask of me?