



# Let Us Know

## About this Youth Suicide Prevention Session

I liked. . .	Poor to Excellent
 • Overall Session	1 2 3 4
• Printed Materials	1 2 3 4
• DVD (if used)	1 2 3 4

Please rate facilitator(s):	Poor to Excellent
Knowledge of Topic	1 2 3 4
Responsiveness to Group	1 2 3 4
Teaching Methods	1 2 3 4
Organization	1 2 3 4



**Changes?  
Modifications?  
Improvements?  
Comments?**

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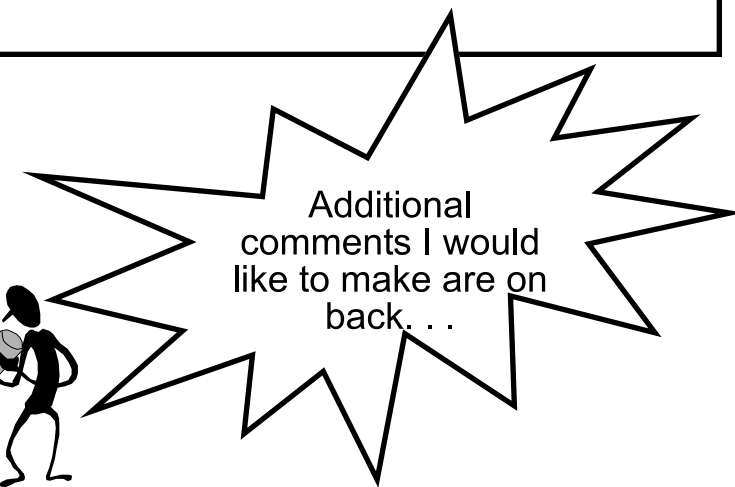
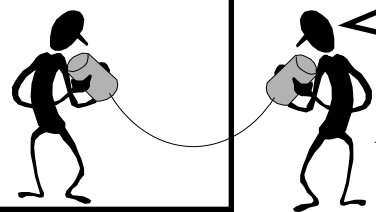
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- Have you ever attended a suicide prevention workshop before?
  - No
  - Yes
- Did this program meet your needs and expectations?
  - No
  - Yes
  - Not Sure
  - More than I expected



**As a result of this program, I have...**

- ...increased my general knowledge about youth suicide prevention and intervention.
 

Low 1 2 3 4 High
- ...an understanding of three ways to intervene in suicidal behavior. (Show you care, ask about suicide, get help.)
 

Low 1 2 3 4 High
- ...a better idea of resources available for help.
 

Low 1 2 3 4 High

*I am still confused about...or would like more information on:* (include name & phone# or e-mail if you want a response)

