



## AGENCY POST-SURVEY

**Instructions:** Please complete this survey at the end of each eight-week program.

**Thank you for your help!**

**1. What types of things did you do to disseminate information about the program? (Please check all that apply.)**

- Distributed written information (flyers, brochures, etc.)
- Out information on the agency website or other websites
- Set up tables or booths at agency or other events
- Spoke at meetings
- Sent e-mails to colleagues
- Other (please describe): \_\_\_\_\_

**2. What methods did you use to recruit youth with disabilities to the program? Please briefly describe each method and then, looking back, give us your opinion on how effective it was — how well it worked.**

A. \_\_\_\_\_

- Not Effective                       Somewhat Effective                       Very Effective

B. \_\_\_\_\_

- Not Effective                       Somewhat Effective                       Very Effective

C. \_\_\_\_\_

- Not Effective                       Somewhat Effective                       Very Effective

D. \_\_\_\_\_

- Not Effective                       Somewhat Effective                       Very Effective

3. **What methods did you use to recruit mentors to the program?** Please briefly describe each method and then, looking back, give us your opinion on how effective it was - how well it worked.

A. \_\_\_\_\_

Not Effective                       Somewhat Effective                       Very Effective

B. \_\_\_\_\_

Not Effective                       Somewhat Effective                       Very Effective

C. \_\_\_\_\_

Not Effective                       Somewhat Effective                       Very Effective

D. \_\_\_\_\_

Not Effective                       Somewhat Effective                       Very Effective

4. **How much of a problem was each of the following in the planning and implementation of this eight-week implementation of the program?**

	No problem	A little bit of a problem	A major problem
Recruiting youth with disabilities (mentees)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disseminating information about the program	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Recruiting mentors			
Keeping in touch with mentors on a regular basis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation for mentors or participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of good resources on physical activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lack of good resources on nutrition`	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Keeping mentors motivated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Keeping mentees motivated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Keeping track of program forms (registration forms, surveys, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Completing background checks on mentors	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:		<input type="checkbox"/>	<input type="checkbox"/>

5. **How useful was the program (agency) manual?**       Not useful       Somewhat Useful       Very Useful

6. **What is the one thing we could do to improve the program manual?**

7. **How useful was the program Web site?**       Not useful       Somewhat Useful       Very Useful

8. **What is the one thing we could do to improve the program web site?**

9. **How well did the agency coordinator orientation prepare you for your role?**

Not at all well       Somewhat Well       Well       Very Well

10. **What is the one thing we could do to improve the orientation?**

11. In general, how much of a change would you say there has been in your knowledge of the things listed below based on your involvement in the program?

	No Change	I Know More	I Know Much More
The importance of physical activity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Activities youth with disabilities can do to become more physically active	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The importance of good nutritional habits			
What good nutrition means in terms of eating habits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:		<input type="checkbox"/>	<input type="checkbox"/>

12. Overall, how would you describe your experience as an agency coordinator? (e.g. what did you like about it? Would you do it again?)

13. What is the one essential thing that we could do to improve this Program in the future?

**THANK YOU FOR COMPLETING THIS FORM!**