

JB Charleston EFMP-Family Support Survey

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Purpose of the Survey: To identify service gaps and gauge interest in support groups, events, and educational opportunities for members enrolled in the Exceptional Family Member Program.

JB Charleston EFMP-Family Support Survey

1. How many family members are stationed here with you at JB Charleston? _____
2. Please check where you would like to see future M&FRC events/workshops held.

Air Base

Weapons Station

Other:

If you selected "Other" preferred location, please list exactly where? _____

3. Please check how often would you like to see events/workshops offered?

Weekly

Bi-Weekly

Monthly

Bi-Monthly

Quarterly

Bi-Annually

Annually

4. Please check which time frame is best for you or your family to attend events/workshops.

0600-0800 0800-1000 1000-1200 1200-1400 1400-1600 1600-1800

5. Please check which day(s) are best for you or your family to attend events/workshops?
Please select all that apply.

Monday

Tuesday

Wednesday

Thursday

Friday

Saturday

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6. What would hinder you or your family from attending events/workshops?
Example: Lack of enclosed, or non-inclusive, play area(s) available.

7. How should the EFMP Family Support Program promote future events/workshops?
Please check all that apply.

Flyer

Facebook

Instagram

JBCMFR Website

Word-of-Mouth

Other

If you selected "Other", please list how you would like to be informed of upcoming events/workshops.

Thank you for your time completing this survey!