

Family Violence Awareness Week Evaluation Form

Your Community _____

Family Violence Awareness Week Planning Kit

- a) What was your overall impression of the kit?
 poor less than satisfactory satisfactory better than satisfactory excellent
- b) Did you find the materials in the kit easy to understand?
 Yes No

Family Violence Awareness Week Materials

- a) What was your impression of the Family Violence Awareness Week Poster?
 poor less than satisfactory satisfactory better than satisfactory excellent
- b) Did you use the Poster?
 Yes No

If yes, how: _____

- c) What would like to see added in the Family Violence Awareness Week Kit? Please list.

Family Violence Awareness Week Small Grants

Did you apply for small grants?

Yes No

If yes, was it helpful? If not, Why not? _____

Impact on Your Community

In general, do you think the Family Violence Awareness Week Kit helped you to raise awareness about family violence in your community?

Yes No Not Sure

Please Explain: _____

Thank you for your input!

Not part of our cultures
VIOLENCE



No place in our lives

Coalition Against Family Violence NWT

Fax to: (867) 873-0285 or
email council@statusofwomen.nt.ca

We would like to know your thoughts of the kit and any suggestions that you may have. If you require assistance please phone toll free 1-888-234-4485. Your input will be used to direct future planning for this event.