## PASS COURT

## **EXIT EVALUATION**

Name	Date
(optional)	
The PASS Court values what you thin	nk about the program. We care about your thoughts
not only because we appreciate you, b	out also because you have become an important part
of someone else's success by participa	ting in PASS Court. You have helped pave the way
for many others that will follow in yo	our steps, and we want your experience on what we
did right, what we did wrong, and wh	at worked best for you. Most importantly, we want
your advice on how to be the best that	we can be.
Keep in mind that we have specifically	designed the survey to be reviewed only after you
have graduated. In other words, no n	natter what you have to say, we cannot take your
success away from you – you are free	from all obligations to the United States Probation
Office, the District Court overseeing y	your case, and to your PASS Court team. This is the
best way we know for you to be as cor	mfortable as possible giving honest feedback.
1. What did you like the best about I	PASS Court?
	DAGG C 40
2. What did you like the least about	PASS Court?

3. Please identify changes that would help improve the program.	
4. Were the requirements of the program clearly explained to you? ☐ Yes ☐ No If no, please explain.	
5. Did you think sanctions were imposed fairly? Why, or why not?	
6. What goals did you achieve while in PASS Court? What did PASS Court have to do your ability to accomplish those goals?	with

7. Do you feel you have benefited from participation in the program? Yes No Please explain.
8. Were there any resources that you needed that PASS Court did not provide you. Examples include, housing, transportation, etc. In cases where PASS Court did not provide the services that you needed, did you receive information that was helpful?
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9. What advice do you have for us on how to better serve future PASS Court participants?
10. Would you be interested in speaking at a half way house, PASS Court session, or other event presented by the PASS Court?