

Prism / Kaleidoscope Program

Participants Evaluation

Date: _____

1. Female _____ Male _____

2. What was the most important part of the Kaleidoscope program for you:

3. In what ways do you believe this grief and loss program has helped you?

4. Is the material in your workbooks helpful? _____ Why? _____

5. What would you say to others about this program?

6. How would you rate the skill level and helpfulness of the facilitators?

7. Is there anything we could do to improve this program?
