

Family & Youth Law Center
at Capital University Law School

Webinar Participant Survey

1. Participant ID # _____ Participant Sex: Male Female
2. What is the zip code where you live? _____
3. What day did you see this Webinar? ____/____/____
4. What kind of program are you attending, where you saw this webinar?
 A Hospital-based drug/alcohol treatment program B Residential drug/alcohol Treatment Program
 C Daytreatment drug/alcohol program D Outpatient drug/alcohol Treatment Program
 E Drug/Alcohol Diversion Program F Drug/Alcohol Education Program
 G Drug/Alcohol program Aftercare Services H Mental Health program with drug/alcohol services
5. What is the date that you began this program ____/____/____
6. Do you have an open case with a child protection agency (like JFS or Children Services)?
 NO (continue with question 7) YES (skip to question 9) NOT SURE (continue with question 7)
7. How many children live in your household? _____
8. What is your relationship to those children? (Check all that apply)
 A Birth Parent B Step parent C Grandparent /Great Grandparent
 D Foster Parent E Adoptive Parent F Other relative G Non-relative
9. List two things you learned from this webinar:
a)

b)
10. After seeing this webinar, are you:
 A Less likely to finish this treatment program
 B More likely to finish this treatment program
 C Neither more nor less likely to finish this treatment program

If you would like to speak with a lawyer, to get some advice at no cost, call (614) 236-7236.