I hope that your Student Support Services experience has been a positive and fruitful one. I am asking you to assist us to evaluate our program. Please complete the following evaluation form. I value your input and honesty. Your feedback will be considered as we plan for next years events. Please circle one choice per question.

Please rate the following areas of service by circling one of the following responses using a scale from 1(Unacceptable) to 5(Excellent).

<table>
<thead>
<tr>
<th>1=Unacceptable</th>
<th>2=Acceptable</th>
<th>3=Average</th>
<th>4=Above Average</th>
<th>5=Excellent</th>
</tr>
</thead>
</table>

1. Did you attend SSS sponsored workshops?  ☐ Yes  ☐ No

If you answered no please tell us why not then skip to # 2:
__________________________________________________________________________________________
__________________________________________________________________________________________

If you answered yes please tell us which workshops you attended and who presented it.
__________________________________________________________________________________________
__________________________________________________________________________________________

How beneficial was/were the workshop(s) to you?  1  2  3  4  5

Please tell us why or why not:
__________________________________________________________________________________________
__________________________________________________________________________________________

2. Did you receive academic advising/counseling from the Student Support Services program?  ☐ Yes  ☐ No

If you answered no please tell us why not then skip to # 3:
__________________________________________________________________________________________
__________________________________________________________________________________________

If you answered yes please tell us who provided you the service?
__________________________________________________________________________________________
__________________________________________________________________________________________

How beneficial was the advising/counseling to you?  1  2  3  4  5

Please tell us why or why not:
__________________________________________________________________________________________
__________________________________________________________________________________________
3. Did you receive English tutoring from the Student Support Services program?   ☐ Yes ☐ No

If you answered no, please tell us why you did not receive English tutoring, then skip to #4:
__________________________________________________________________________________________
__________________________________________________________________________________________
If you answered yes, please tell us who provided you the service?
__________________________________________________________________________________________
__________________________________________________________________________________________

How beneficial was the English tutoring to you?   1 2 3 4 5

Please tell us why or why not:
__________________________________________________________________________________________
__________________________________________________________________________________________

4. Did you receive Math tutoring from the Student Support Services program?    ☐ Yes ☐ No

If you answered no, please tell us why you did not receive Math tutoring, then skip to #5:
__________________________________________________________________________________________
__________________________________________________________________________________________
If you answered yes, please tell us who provided you the service?
__________________________________________________________________________________________
__________________________________________________________________________________________

How beneficial was the Math tutoring to you?   1 2 3 4 5

Please tell us why or why not:
__________________________________________________________________________________________
__________________________________________________________________________________________

5. Did you receive Science tutoring from the Student Support Services program?   ☐ Yes ☐ No

If you answered no, please tell us why you did not receive Science tutoring, then skip to #6:
__________________________________________________________________________________________
__________________________________________________________________________________________
If you answered yes, please tell us who provided you the service?
1=Unacceptable  2=Acceptable  3=Average  4=Above Average  5=Excellent

How beneficial was the Science tutoring to you?  

Please tell us why or why not:

__________________________________________________________________________________________
__________________________________________________________________________________________

6. Did you receive tutoring other than English, Science or math from the Student Support Services program?  
☐ Yes  ☐ No

Tutoring Subject: ______________________

If you answered no, please tell us why you did not receive Math tutoring, then skip to #7:

__________________________________________________________________________________________
__________________________________________________________________________________________

If you answered yes, please tell us who provided you the service?

__________________________________________________________________________________________
__________________________________________________________________________________________

How beneficial was the other subject tutoring to you?  

Please tell us why or why not:

__________________________________________________________________________________________
__________________________________________________________________________________________

7. Did you participate in any cultural/educational events with the Student Support Services program?  
☐ Yes  ☐ No

If you answered no, please tell us why you did not participate in any cultural/educational events, then skip to #8:

__________________________________________________________________________________________
__________________________________________________________________________________________

If you answered yes, please tell us who provided you the service?

__________________________________________________________________________________________
__________________________________________________________________________________________

How beneficial was the cultural/educational event to you?  

Please tell us why or why not:

__________________________________________________________________________________________
__________________________________________________________________________________________
8. Do you believe the Student Support Services program office is appropriate for the services offered? □ Yes □ No

If you answered no, please tell us why you believe it is not appropriate, then skip to #9:
__________________________________________________________________________________________
__________________________________________________________________________________________

If you answered yes, please why is it appropriate?
__________________________________________________________________________________________
__________________________________________________________________________________________

9. Do you believe the Student Support Services program office has a safe and/or private environment? □ Yes □ No

If you answered no, please tell us why you believe it is not a safe and/or private environment, then skip to #10:
__________________________________________________________________________________________
__________________________________________________________________________________________

If you answered yes, please tell us why you believe it is a safe and/or private environment?
__________________________________________________________________________________________
__________________________________________________________________________________________

10. Did you receive referrals or additional resources by the Student Support Services program? □ Yes □ No

If you answered no, please tell us why you didn’t receive any referrals or additional resources, then skip to #11:
__________________________________________________________________________________________
__________________________________________________________________________________________

If you answered yes, please tell us who provided this service?
__________________________________________________________________________________________
__________________________________________________________________________________________

How beneficial was/were the referral(s) or additional resource(s)? 1 2 3 4 5

Please tell us why or why not:
__________________________________________________________________________________________
__________________________________________________________________________________________

11. Did you participate in the Student Support Services Program Laptop Lending Library? □ Yes □ No

If you answered no, please tell us why you didn’t participate in the Laptop Lending Library, then skip to #12:
__________________________________________________________________________________________
__________________________________________________________________________________________
<table>
<thead>
<tr>
<th>1=Unacceptable</th>
<th>2=Acceptable</th>
<th>3=Average</th>
<th>4=Above Average</th>
<th>5=Excellent</th>
</tr>
</thead>
</table>

If you answered yes, please tell us who provided this service?
__________________________________________________________________________________________
__________________________________________________________________________________________

How beneficial was/were the laptop lending library? 1 2 3 4 5

Please tell us why or why not:
__________________________________________________________________________________________
__________________________________________________________________________________________

12. Did you use the Student Support Services Program Computer Labs (UC 2nd & 3rd floors)?

☐ Yes ☐ No

If you answered no, please tell us why you didn’t use the computer labs:
__________________________________________________________________________________________
__________________________________________________________________________________________

If you answered yes, please tell us who provided this service?
__________________________________________________________________________________________
__________________________________________________________________________________________

How beneficial was/were the computer labs? 1 2 3 4 5

Please tell us why or why not:
__________________________________________________________________________________________
__________________________________________________________________________________________

12. Did you receive grant aid from the Student Support Services Program?

☐ Yes ☐ No

If you answered no, please tell us why you did not receive grant aid:
__________________________________________________________________________________________
__________________________________________________________________________________________

If you answered yes, please tell us who provided this service?
__________________________________________________________________________________________
__________________________________________________________________________________________

How beneficial was/were the grant aid? 1 2 3 4 5

Please tell us why or why not:
__________________________________________________________________________________________
__________________________________________________________________________________________
13. What is your favorite part or component of the program?

14. What is your least favorite part or component of the program?

15. What suggestions do you have which may help us improve the program?

16. Will you continue your participation in the Student Support Services Program?  
   ☐ Yes  ☐ No  (If no, please tell us why?)

Additional comments: