



Family

Participant Self-evaluation

Unique Client ID: _____	Assessment Type: <input type="checkbox"/> Pre <input type="checkbox"/> Post
Facilitator: _____	Session Type: <input type="checkbox"/> Group <input type="checkbox"/> Individual
Organization: _____	Date Completed: ____ / ____ / ____

Circle the number that best represents your level of agreement. Then, have your facilitator calculate the average score for each category (Attitudes, Knowledge and Skills).

Attitudes

	<u>Strongly Agree</u>	<u>Agree</u>	<u>Disagree</u>	<u>Strongly Disagree</u>
1. I agree that my values, beliefs and behaviors are partly based on what my family members have passed on to me.	1	2	3	4
2. I have a desire for healthy family relationships.	1	2	3	4
3. I show the six positive attitudes for success (honesty, responsibility, willingness, humility, caring and gratitude).	1	2	3	4
4. I have realistic expectations of my family members.	1	2	3	4

Attitudes Average (Total ÷ 4) =

Knowledge

5. I have identified the positive and negative traits passed down to me from family members.	1	2	3	4
6. I know which family relationships are a positive influence.	1	2	3	4
7. I know which family relationships are a negative influence.	1	2	3	4

Knowledge Average (Total ÷ 3) =



Family

Participant Self-evaluation

Strongly Agree Agree Disagree Strongly Disagree

Skills

8. I am able to effectively communicate with my family members.	1	2	3	4
9. I have the ability to resolve conflicts with my family members.	1	2	3	4
10. I understand the healthy family ground rules.	1	2	3	4
11. I have set goals to improve my family relationships.	1	2	3	4
12. I have shared positive experiences with my family.	1	2	3	4

Skills Average (Total ÷ 5) =

Overall Score

Overall Average (Overall Total ÷ 12) =