***Legal Advocate Client Survey***

***Directions:*** Please help us to improve our program by answering the following seven questions. We want to know how you are doing with your recovery process, and how we have helped. *Just circle the best answer for each question.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **As a result of the services I received from [your agency name here]:** | ***Strongly Agree*** | ***Agree*** | ***Neutral*** | ***Disagree*** | ***Strongly Disagree*** | ***NA*** |
| *Stability/Resolution:*1. Obtaining legal advocacy made it easier for me to regain a sense of control over my life.
 | ***5*** | ***4*** | ***3*** | ***2*** | ***1*** | ***-*** |
| *Safety:*1. I feel safer because of the legal remedies the advocate helped me get.
 | ***5*** | ***4*** | ***3*** | ***2*** | ***1*** | ***-*** |
| *Understanding/Participating in the Criminal Justice (Legal) System* 1. I now have a better understanding of my role in the legal process.
2. I now have a better understanding of my rights as a victim of crime.
 | ***5******5*** | ***4******4*** | ***3******3*** | ***2******2*** | ***1******1*** | ***-******-*** |
| *Satisfaction*1. The legal Advocate gave me the information I needed to advocate for myself in court hearings.
2. The Legal Advocate gave me appropriate referrals to the legal issues I faced as a result of the crime.
3. The agency took my culture, religion, and orientation into consideration when providing me services.
 | ***5******5******5*** | ***4******4******4*** | ***3******3******3*** | ***2******2******2*** | ***1******1******1*** | ***-******-******NA*** |

*Thank you for taking the time to help us improve our services.*