

Feedback Form

As you leave the ASAP Program please provide us your feedback regarding our program. Your feedback will allow us to maintain our effectiveness and improve where needed:

client: I think this program works, only if you work it. I felt very comfortable talking and sharing my experiences, with drugs/alcohol in the group. Everyone was supporting and nice, and straight up with the truth. I would tell my friends about this program if I thought they needed help to.

Parent: I THINK THIS PROGRAM IS WONDERFUL. I REALLY ENJOY THE PARENT & CHILD SESSIONS. I FEEL THIS PROGRAM WILL WORK FOR YOU, IF YOU WANT IT TO WORK.