

# 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: \_\_\_\_\_  
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Parent: I feel that this program (ASAP) is very worthwhile. I looked at other intensive outpatient programs and liked the way ASAP's program was arranged. I also very much appreciated the promptness with which my calls were returned.

The lead therapist (██████████) is a very dynamic leader and truly an asset to your organization. The other intern/student therapists (██████████) are also talented therapists that I'm glad we had a chance to work with as well.