

PARTNERS IN POLICYMAKING®

SIX-MONTH FOLLOWUP EVALUATION

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| 1. Overall evaluation of the Partners program. | Excellent | <input type="checkbox"/> |
| | Very good | <input type="checkbox"/> |
| | Good | <input type="checkbox"/> |
| | Fair | <input type="checkbox"/> |
| | Poor | <input type="checkbox"/> |
| 2. Evaluate your ability to secure necessary services for yourself or a family member with a disability. | Excellent | <input type="checkbox"/> |
| | Very good | <input type="checkbox"/> |
| | Good | <input type="checkbox"/> |
| | Fair | <input type="checkbox"/> |
| | Poor | <input type="checkbox"/> |
| 3. Evaluate your current leadership/advocacy skills. | Excellent | <input type="checkbox"/> |
| | Very good | <input type="checkbox"/> |
| | Good | <input type="checkbox"/> |
| | Fair | <input type="checkbox"/> |
| | Poor | <input type="checkbox"/> |

PLEASE NOTE:

Questions 4 through 7 are directly related to the outcomes required in the federal law that funds the Partners program:

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| 4. Since graduating from the Partners program, I (or a family member with a disability) am more independent* at work, home, or school. | Yes | <input type="checkbox"/> |
| | No | <input type="checkbox"/> |

* Independent means the extent to which individuals exert control and choice over their lives.

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| 5. Since graduating from the Partners program, I (or a family member with a disability) am more productive.* | Yes | <input type="checkbox"/> |
| | No | <input type="checkbox"/> |

* Productivity means starting employment, higher wages or benefits, improved job status or a job promotion.

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| 6. Since graduating from the Partners program, my level of self determination* (or that of a family member with disability) has increased. | Yes | <input type="checkbox"/> |
| | No | <input type="checkbox"/> |

* Self determination means taking responsibility for personal decisions and actions – such as making decisions about money and needed resources; choosing where and with whom to live.

7. Since graduating from the Partners program, I (or or a family member with a disability) have experienced more community integration and inclusion*.

Yes ☐
No ☐

* Integration and inclusion mean living, working and participating in the local community along with citizens without disabilities.

8. Since graduating from the Partners program, I have contacted public officials about needed services or improvements in the quality of services. Estimate the number of contacts made at each level of government.

Federal # _____
State # _____
Local # _____

9. If you answered Number 7, tell us the type of contacts you have made with public officials since graduation. Estimate the number for each type of contact.

Letters/emails # _____
Phone calls # _____
Visits # _____

10. What other opportunities have you had to educate the public about the abilities of people with disabilities and how individuals, local, and community decisionmaking can best meet the needs of each person. Estimate the number for each activity.

Testimony at public hearings

Presentations # _____
Committees # _____
Newspaper Editorials/
Newletters # _____

11. How would you describe the value of the Partners program in changing your own life and/or helping you to work for changes that benefit others with disabilities?

THANK YOU!