



CSU Service Learning for Family Health
UNIVERSITY SERVICE PRE-SURVEY
 HEALTH PROMOTION CLASP MEMBERS – STRENGTHENING COMMUNITIES



University Information

University Name: _____ Date: _____

Address: _____ State: _____ Zip: _____

Name of person completing survey: _____

Title: _____ Phone: _____ Email: _____

Please circle the number which indicates your agreement with each of the following statements:

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. The SLFH AmeriCorps Member(s) and Service Learner(s) will help local community Organizations serve more clients.	1	2	3	4	5
2. The Member(s) and Service Learner(s) will help local community Organizations provide an increased level of services to their clientele.	1	2	3	4	5
3. The Member(s) and service learner(s) and their interaction local community Organizations will provide other benefit(s) to the University.	1	2	3	4	5
4. If you agree, please list the other benefit(s): _____ _____					
5. As a direct result of SLFH Members, there will be an increase in the abilities of local community Organizations to utilize more volunteers.	1	2	3	4	5
6. Local Organizations provide orientations to all service learners or volunteers.	1	2	3	4	5
7. The University provides training in preparation for our Organization to work with service learners.	1	2	3	4	5
8. Organizations distinguish the difference between service learning and internships.	1	2	3	4	5
9. Local community Organizations are familiar with the learning objectives of service-learning courses at the University.	1	2	3	4	5
10. Local community Organizations have established lines of communication with the University.	1	2	3	4	5
11. Our lines of communication with local community Organizations work well.	1	2	3	4	5
12. The University understands the mission of the local community	1	2	3	4	5

Organizations as they relate to their clientele.

13. Local community Organizations are prepared to thoroughly train Service Learners to be able to perform the necessary tasks.

1

2

3

4

5

14. The University and local community Organizations and have developed cooperative problem-solving procedures.

1

2

3

4

5

15. Our partnership with the community Organizations recognizes the strengths and assets of both parties.

1

2

3

4

5

16. Our partnership with the community Organizations addresses the needs of both parties.

1

2

3

4

5

Additional Comments: _____
