

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 that this program was very affective but the only change I would make is to tell the ~~the~~ client that ~~the~~ his or her U.A. came up positive before they have to confront their parents about it.

Parent: I'm extremely pleased of what's been taught and what I have learned in these few weeks. ~~is~~ is an excellent therapist along with ~~the~~. I like how all of you hold the children/youth accountable for their actions and make them aware of their abuse and shortcomings. I love to hear when you cheer them on when they do what's right. These 10 weeks has been very informative and enjoyable and I will recommend this program to others in the future.