

YRRP Post-Event Questionnaire

Instructions: Think about the extent to which you agree with the statements below. Your answers will remain anonymous and confidential. Please consider only the present event when answering questions. Thank you!

Check all that applies for each topic area. As a result of this event, ...

	Finance	Jobs	Legal	Medical	Mental Health	Education
<i>I learned something new about:</i>	<input type="radio"/>					
<i>I am clearer about how to access resources on:</i>	<input type="radio"/>					
<i>I plan to seek assistance for:</i>	<input type="radio"/>					
<i>My unit would support me if I needed help with:</i>	<input type="radio"/>					
<i>I need help with:</i>	<input type="radio"/>					
<i>I feel better prepared to deal with:</i>	<input type="radio"/>					

Check one box for each statement below. As a result of this event, ...

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	N/A
I would like to attend future events	<input type="radio"/>					
I feel better prepared to manage stress	<input type="radio"/>					
I found the event to be helpful	<input type="radio"/>					
I am more supportive of my/my loved one's continued military service	<input type="radio"/>					
I know about how to access local resources	<input type="radio"/>					
I am more willing to continue in military service	<input type="radio"/>					
I know more about VA services and benefits	<input type="radio"/>					
I can better communicate with my loved one(s)	<input type="radio"/>					
The event was not helpful	<input type="radio"/>					
I am prepared for the next phase of deployment	<input type="radio"/>					
I feel that my finances are in order	<input type="radio"/>					
I made a connection with another attendee	<input type="radio"/>					
I still have <u>major</u> concerns about deployment	<input type="radio"/>					
I know how to access Tricare services	<input type="radio"/>					
I feel the resources/exhibitors were beneficial	<input type="radio"/>					

As a result of attending a YRRP event in the past, I have used the following services (check all that apply):

JAG/Legal ESGR Stress Management Financial Management Youth Programs Chaplain Programs
 Military One Source Suicide Prevention Marriage Enrichment Red Cross Transition Assistance Adviser Program

Family Status: Single w/ kids Single w/out kids Married w/ kids Married w/out kids

Deployment Phase: Pre During Post-30 Post-60 Post-90

Age: 18-25 26-35 36-55 56+

Employment Status: Employed Unemployed (Searching) Unemployed (Not Searching)

I am a: Spouse Service member Child Parent

Sex: Male Female

of Deployments: 0 1 2 3 4 4+

YRRP Events Attended: 1 2 3 4 5+

Military Grade/Rank: Enlisted Officer

Years of Service: <4 4-9 10-15 16-20 21+

Service Branch: AF Reserve Army Natl. Guard CG Reserve Navy Reserve

Air Natl. Guard Army Reserve MC Reserve

Civilian Education: HS Bachelor's Master's Doctorate

Comments/
Suggestions:



MULTIPLE PRESENTER EVALUATION

EVENT: YRRP MULTI-UNIT POST DEPLOYMENT EVENT

LOCATION: DENVER, CO **DATE:** 1,2 AUGUST 2014

In order to improve our programs and services, please answer the following questions with respect to the workshop you attended:

Using the following five-point scale, please rate each of the items below regarding the workshop/brief you attended:

Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Don't Know/ Can't Judge
1 point	2 points	3 points	4 points	5 points	0 points

1. Registration for the event was easy. _____
2. The location of the brief was convenient _____
3. The time of the brief was convenient _____

Using the same five-point scale, please rate each presenter on the following:

 YRRP YELLOW RIBBON REINTEGRATION PROGRAM	Getting to know your resource	Financial Reintegration	Getting the job you want	EMP	Acing the Interview	Resume Writing
4. The presenter was knowledgeable.						
5. The presenter was friendly and professional.						
6. I was very interested in this presentation.						
7. Information was presented in a way that was easy for me to understand.						
8. Audio/visual, handouts, and/or other material supported my learning.						
9. Other?						

Comments or recommendations for improvement:

May we call you for additional information? Yes No

If yes, provide name and number: _____

Please Mark only One:

- | | | | |
|----------------------------------|---------------------------------|--|---------------------------------------|
| <input type="checkbox"/> E1 – E6 | <input type="checkbox"/> E7- E9 | <input type="checkbox"/> O1 - O4 | <input type="checkbox"/> O5 - O9 |
| <input type="checkbox"/> Spouse | <input type="checkbox"/> Parent | <input type="checkbox"/> Family Member | <input type="checkbox"/> Other: _____ |

Please hand-deliver to a YRRP Staff Member Before You Leave

Thank you



UNITED STATES MARINE CORPS
Marine Forces Reserve
2000 Opelousas Avenue
New Orleans, Louisiana 70114

IN REPLY REFER TO:
1754
FRO

From:
To:

Subj: AFTER ACTION REPORT FOR YRRP EVENTS

Ref: (a) DoDI 1342.28 "DoD Yellow Ribbon Reintegration Program"
(b) MCO 1754.9A UPFRP
(c) ForO 1754.9 UPFRP
(d) FPL 11-12

Encl: (1) Final Agenda
(2) Event Reporting Spreadsheet
(3) Zero Balance Invoices

1. General (Summary of Event)

- a. Type of Event:
- b. Dates of Event:
- c. Event Location:
- d. Scope of Event:

2. Lessons Learned

- a. What went right:
- b. What went wrong:
- c. Recommendations:

3. Conclusion

4. Point of Contact

Signature