

# CLIENT FEEDBACK FORM

\_\_\_\_\_ (Date)

\_\_\_\_\_  
(Name of Interviewer)

\_\_\_\_\_  
(Name of Person Completing Form)

**Instructions:** Rate each statement on a 7-point scale where 1 = strongly agree, 7 = strongly disagree, and 4 = neutral. You and your instructor may wish to change and adapt this form to meet the needs of varying clients, agencies, and situations.

	Strongly Agree		Neutral			Strongly Disagree	
1. (Awareness) The session helped you understand the issue, opportunity, or problem more fully.	1	2	3	4	5	6	7
2. (Awareness) The interviewer listened to you. You felt heard.	1	2	3	4	5	6	7
3. (Knowledge) You gained a better understanding of yourself today.	1	2	3	4	5	6	7
4. (Knowledge) You learned about different ways to address your issue, opportunity, or problem.	1	2	3	4	5	6	7
5. (Skills) This interview helped you identify specific strengths and resources you have to help you work through your concerns and issues.	1	2	3	4	5	6	7
6. (Skills) You will take action and do something in terms of changing your thinking, feeling, or behavior after this session.	1	2	3	4	5	6	7

What did you find helpful? What did the interviewer do that was right? Be specific. For example, not "You did great," but rather, "You listened to me carefully when I talked about \_\_\_\_\_."

What, if anything, did the interviewer miss that you would have liked to explore today or in another session? What might you have liked to have happen that didn't?

Use this space or the other side for additional comments or suggestions.