

Survey

Welcome

Please answer the following series of questions before we begin the workshop. This survey is completely anonymous so answer as honestly and completely as possible.

On a scale of 1 – 5, 1 being Not at all familiar and 5 being Extremely familiar, how familiar are you with the word cancer?

- 1 2 3 4 5

Not at all familiar

Extremely Familiar

Do you have a plan of action when it comes to your health?

- Yes | No

How frequently do you visit your doctor for a routine check-up?

- 3-5 times per year 1-2 times per year
 Once every 2 years Only when I'm ill or injured

On a scale of 1 – 5, 1 being Not very interested and 5 being Extremely interested, how interested are you with the learning about creating your own resource kit?

- 1 2 3 4 5

Not Interested

Extremely Interested

Are you comfortable in talking to your family about cancer?

- Yes I'm not comfortable
 No I prefer not to answer

What are some myths that you have heard about cancer?

Survey

Thank you

Please answer the following series of questions before you leave the workshop. This survey is completely anonymous so answer as honestly and completely as possible.

On a scale of 1 – 5, 1 being Not at all confident and 5 being Extremely confident, how confident are you with explaining cancer to a family member?

- 1 2 3 4 5

Not at all confident

Extremely Confident

On a scale of 1 to 5, 1 being not likely and 5 being Definitely likely, how likely are you to form your own plan of action?

- 1 2 3 4 5

Not Likely

Definitely

How frequently do you plan to visit your doctor for a routine check-up after this presentation?

- 3-5 times per year 1-2 times per year
 Once every 2 years Only when I'm ill or injured

On a scale of 1 – 5, 1 being not useful and 5 being extremely useful, were the topics presented today useful for your type of work that you do in your community?

- 1 2 3 4 5

Not useful

Extremely Useful

Please rate the quality of the presentation you saw today.

- 1 2 3 4 5

Disappointing

Exceptional

How frequently do you plan to visit your doctor for a routine check-up after this presentation?

- 3-5 times per year 1-2 times per year
 Once every 2 years Only when I'm ill or injured

Survey

Continued

What topic are you most interested in hearing today? did you order?

Please share any additional comments or suggestions.

Survey

Norris Comprehensive Cancer Center
Comprehensive Cancer Control Coalition in Service
Provider Area 4
1450 Biggy St, Suite G501A
Los Angeles, CA 90089
3234427801

Survey

Continued

Do you plan to return to our restaurant?

Yes | No

Would you recommend our presentation to a friend?

Yes | No

Why, or why not?

What topics would you like added to our presentation?

Please share any additional comments or suggestions.

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