Family Interest Inventory

Dear Family,

Your needs and interests are very important to us. We are partners in this program. Please take a few minutes to help us understand your current interests and needs. We will use this information to design family events to meet your needs.

I am interested in learning more about:

☐ Helping my child get ready for or do well in school.
☐ Helping myself or my child deal with loss or grief.
☐ Helping myself or my child deal with extended separation or deployment.
☐ Helping myself or my child deal with divorce.
☐ Dealing with alcohol or drugs (for preteens or teens).
☐ Ways our community or program can help families or teens find work.
☐ Ways to help my child make friends or be active in the community.
☐ Healthy eating and obesity prevention.
☐ Ways to increase physical activity.
☐ Post-Traumatic Stress Disorder.
☐ Parenting support groups or resources about parenting.
☐ Tips for bouncing back from challenges.
☐ Safe sleep for infants.
☐ Toilet training.
☐ Suicide prevention.
☐ Preventing school violence.
☐ Budgeting and money.
☐ Other: ____________________________________________
☐ Other: ____________________________________________

I am concerned about:

☐ Bullying in my child's school or program.
☐ Children or family members with anger issues.
☐ Recognizing or responding to child abuse or neglect.
☐ My child's special needs.
☐ Transitions (within programs and across programs).
☐ Violence in our community.
☐ Other: ____________________________________________
☐ Other: ____________________________________________