



## Parent Binder and KidPack Evaluation

Your feedback is very important to us and is used to help us improve the program. **Please return the completed evaluation to:** DFCI Family Connections

SW-231  
450 Brookline Ave  
Boston, MA 02215

Today's Date: \_\_\_\_\_

### Parent Binder Evaluation:

1. Did you find the binder helpful in providing support and information to families coping with cancer?

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2. Would you recommend it to other families with children?

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3. Please share any comments or suggestions for improving the binder or the services of the Family Connections Program.

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4. If you could give a message or advice to another family affected by cancer, what would it be?

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### KidPack Evaluation:

1. Did you/your children find the KidPack helpful in coping with cancer as a family?

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2. Would you recommend it to other families with children of a similar age?

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3. Do you have any concerns about the informational, creative, comfort or play items in the KidPack?

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4. Please share any comments or suggestions for improving the pack.

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**THANK YOU!**