

# Family Readiness Group Survey

*I am XXXXXX- Your Family Readiness Group Lead Volunteer. As your lead volunteer, I will help facilitate your Family Readiness Group. In order to do that effectively I ask you to please complete the following survey. The commander and I extend an invitation to you and encourage and welcome your participation.*

**INSTRUCTIONS:** Please **CIRCLE** the letter that **BEST** represents your response. Some questions will ask you to write in your response or circle all that apply. Please write your responses legibly.

1. Please indicate your relationship to your service member:

- a. Mother/Father
- b. Spouse
- c. Fiancée, Girlfriend/Boyfriend
- d. Son/Daughter, Step-Son/Daughter
- e. Brother/Sister
- f. Other: (Please indicate relationship) \_\_\_\_\_

2. How long has your service member been in the National Guard?

- a. Less than one year
- b. 1-3 years
- c. 4-6 years
- d. 7-9 years
- e. 10-20 years
- f. Over 20 years

3. Has your service member ever been deployed?

- Yes
- No (Please continue on to Question 6)

4. When and where was your service member deployed?

\_\_\_\_\_

5. Did you have a relationship with your service member during the previous deployment(s)?

- Yes
- No

6. Please indicate the type of communication that would work best for you:  
(Check all that apply)

- a. Monthly meeting (location: \_\_\_\_\_)
- b. Newsletters
- c. Email
- d. Video-Teleconference (in the armory nearest to you)
- e. Telephone
- f. Other: \_\_\_\_\_

7. What are your expectations of /for the Family Readiness Group?

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8. Are you interested in participating in a Family Readiness Group?

- a. Yes, I think it is very important
- b. Yes, but just once in a while
- c. Yes, as long as I am not asked to volunteer
- d. Yes, and I would like to be a volunteer in the Family Readiness Group
- e. Not sure at this point
- f. No

9. Please circle all the Family Readiness activities listed below that you might want to be a part of:

- a. Attend an educational program for families.
- b. Help write or find articles for a family readiness newsletter.
- c. Help produce the Family Readiness newsletter.
- d. Volunteer to be a caller on the telephone tree.
- e. Children's Activities
- f. Be on a card writing committee.
- g. Help with holiday activities.
- h. Refreshment Committee
- i. Web Site Committee
- j. Volunteer to be part of the Finance Committee
- k. Other idea(s): \_\_\_\_\_

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10. I am interested in learning about the following military benefits:  
(Circle all that apply)

- a. Pay
- b. Insurance (medical and life)
- c. Commissary and PX/BX
- d. Educational benefits
- e. National Guard license plates
- f. Family use of military installation facilities
- g. Emergency financial assistance
- h. Red Cross assistance to military families
- i. Civilian job protection
- j. Youth Programs/Youth Camp
- k. Other: \_\_\_\_\_

11. I am interested in learning about the following family issues or topics: (Circle all that apply)

- a. Stress/Time management
- b. Communication skills for families
- c. Family fitness/health/wellness/nutrition
- d. Parenting skills/children's issues
- e. Blended families/step-parenting
- f. Finding childcare

- g. Helping children adjust to the absence of a parent during military duty
- h. Forming a family program network to cope with the stress of being a military family
- i. Helping children learn in school/learning disabilities
- j. Budgeting/saving money/getting more money
- k. Drug and alcohol prevention/concerns
- l. Finding a job/resume writing/improving interview skills
- m. Getting more involved in your community/community projects
- n. Developing a positive attitude/humor/motivation
- o. Taking care of an elderly relative
- p. Coping with unemployment
- q. Developing positive self-esteem
- r. Other: \_\_\_\_\_

If you have any additional comments or ideas please feel free to put them here:

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Thank you for you for completing this survey. Any questions or concerns may be directed to your Family Readiness Group or the State Family Program Office at 1-800-658-3930.

**CAN ENTER YOUR CONTACT INFORMATION HERE, IF YOU WOULD LIKE TO.**

**Help us ensure we have your correct and complete contact information for newsletters and emails by completing the following. The information will also be used for the telephone tree if you are designated the contact person by your service member.** This information will be kept confidential and your privacy protected.

Your Soldier's Name: \_\_\_\_\_

Your Name: \_\_\_\_\_

Your Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Your Phone number(s): (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

Your Email address (es): \_\_\_\_\_