

Juvenile Rehabilitation Administration Parole Services Customer Satisfaction Survey

Please indicate which type of parole your child is on:	
☐Intensive Parole ☐Sex Offender Parole ☐Regular Parole ☐Don't Know	

For each item identified below, circle the number to the right that best fits your judgment of its quality.	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree	Don't Know
1. I know what JRA parole services there are for my child and family.	1	2	3	4	5	6
2. I believe JRA parole services are very supportive of my child.	1	2	3	4	5	6
3. I believe JRA parole services do a good job of holding my child accountable for his/her actions.	1	2	3	4	5	6
4. I feel that my child does better in school or work while on parole than if he/she was not on parole.	1	2	3	4	5	6
5. I helped make plans and goals about parole services for my child.	1	2	3	4	5	6
I feel like I have input into decisions that are made about parole services for my child.	1	2	3	4	5	6
7. I have regular contact with my child's parole counselor.	1	2	3	4	5	6
8. I feel that JRA parole staff treat me with courtesy and respect.	1	2	3	4	5	6
9. I feel that JRA parole staff respond to my concerns promptly.	1	2	3	4	5	6
10. I am satisfied with JRA parole services.	1	2	3	4	5	6



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Thank you for taking the time to complete the survey, if you would like to add any additional comments please complete the section below.

•	What more would you like to see JRA parole services offer?
•	Additional comments about JRA parole services: