**Parent Café Survey**

**Name:**

**DCAT/CPPC Site:**

**County(ies):**

**Phone:**

**Email:**

Is your site currently holding Parent Cafes?
[ ] Yes [ ] No

What county (ies) are holding Parent Cafes?

Click or tap here to enter text.

When and where are your Parent Cafes being held?

Click or tap here to enter text.

How many Parent Cafes has your site hosted?

Choose an item.

What is the average number of participants at each Parent Café?

Choose an item.

Do you feel that the number of participants is growing, remaining the same or declining?

Choose an item.

Does your site currently have any Parent Café trainers?

[ ] Yes [ ] No

Does your site currently have any Parent Café facilitators?

[ ] Yes [ ] No

Does your Parent Café focus on a specific group or issue? (Example: foster care families, parents with teens, a certain neighborhood, etc.)

Click or tap here to enter text.

Please identify someone (name and email) from your site that is willing to participate in monthly Parent Café calls.

Click or tap here to enter text.