

## EVALUATION OF YOUR STAY

It is our desire to serve the Lord and the residents staying in our shelters to the best of our ability. In order to help us to help you we need you to fill out the questionnaire below. Please feel free to be honest in your answers and only the Director will see this form. Kindly mail this back to our office at the end of your stay at The Sheepfold. Your answers are of great value to us and we thank you for your assistance.

1. Your name? \_\_\_\_\_

2. At which house location did you stay? \_\_\_\_\_

3. How long did you stay at The Sheepfold? \_\_\_\_\_

4. How did you enjoy your stay? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Were the guidelines and the daily schedule helpful? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. What kind of improvements would you suggest? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. How did our House Managers treat you? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. Were you helped spiritually and, if so, what helped you most? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**OUR PRAYER:** *“Father, we pray for this precious mother and her children and our prayers for their health, safety and prosperity go with them. We pray that our ministry to them has been pleasing to You and has been a strong influence in their lives. Keep them in your tender care as they leave us and enter into a new life with You.”*

The Sheepfold