ADAP Grantee
Wording for Attendee Evaluations

Please add the following questions to event attendee evaluations.

1. Credentials (select all that apply):
   - [] Apprentice Addictions Professional
   - [] Certified Alcohol & Drug Counselor
   - [] Licensed Alcohol & Drug Counselor
   - [] Certified Prevention Specialist
   - [] Licensed Social Worker
   - [] Licensed Mental Health Clinician
   - [] Licensed Marriage & Family Therapist
   - [] Working toward licensure or certification
   - [] Recovery Coach
   - [] Other: __________________________

2. Highest Level of Education:
   - [] Doctorate
   - [] Medical
   - [] Master
   - [] Bachelor
   - [] Associate
   - [] High School or GED
   - [] Below High School
   - [] Other: __________________________

3. This event has increased my knowledge and/or skill.
   - [  ] 1 Strongly Disagree
   - [  ] 2 Disagree
   - [  ] 3 Neither Agree or Disagree
   - [  ] 4 Agree
   - [  ] 5 Strongly Agree

   Please explain: